Toolkit

Understanding and addressing equality, non-discrimination and inclusion in water, sanitation and hygiene (WASH) work

Part of our Global Strategy 2015–2020

WaterAid

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Introduction

WaterAid is determined to make clean water, decent toilets and good hygiene normal for everyone, everywhere within a generation.

To make this happen, we have set ourselves the strategic aim to 'tackle and challenge the inequalities that prevent poor and marginalised people from realising their rights to safe water, sanitation and hygiene'.[1] But what do 'realising rights' and 'tackling inequalities' really mean for how we design, implement and evaluate water, sanitation and hygiene (WASH) programmes? And how can we ensure those most at risk of marginalisation are not left behind?

This resource provides you with practical guidance and support on reducing inequalities in your programme and advocacy work. It introduces the most important equality, non-discrimination and inclusion principles and follows them up with practical activities, tools and checklists for you to apply to your work with partners and communities.

With so much attention now being focused on equitable and sustainable development there has never been a better opportunity to put equality, non-discrimination and inclusion at the heart of our work.

Although this resource focuses on WASH, many of the principles and activities are equally relevant to other sectors of development. Clean water, decent toilets and good hygiene impact on all areas of life and all human rights.

By integrating with others working on the same ideas from different perspectives, we can make a bigger difference.

Remember – inclusion should not be something that happens only in specifically designed 'inclusive projects'. It must be embedded across all aspects of the programmatic approach – both practice and advocacy – and be demonstrated by all WaterAid staff and partners.

Using this resource

This resource provides you with a framework for making your work more inclusive, and includes tools you can use to put the theory into practice.

There are so many tools available it can be hard to know which ones to choose and when to use them. This resource brings together tried and tested resources that will help you embed equality, non-discrimination and inclusion in your work.

Throughout the toolkit you'll find:

Key concepts
Terms, definitions and ideas that are essential in planning and implementing rights-based programming.

Actions
Activities for you to carry out in your work.

Useful information and resources
Facts, quotes and further detail to expand your knowledge.

Key tools
These are **mandatory** for WaterAid staff and partners and should be used in your programming and advocacy work.

Bonus tools
These are additional tools for you to use in your programme and advocacy work, where appropriate.

Embedding inclusion

There is no one-size-fits-all solution we can pick up and apply to make our work inclusive; we need to do a range of different things, adapted to the specific context.

It's not a linear process either; some activities can be carried out at various times in the programme cycle, and some can be run in parallel. An activity may result in unexpected outcomes, requiring you to respond in ways you had not originally anticipated, adapting your approach.

Focusing on the principles of the **rights to water and sanitation** will help guide your journey towards equality, non-discrimination and inclusion in WASH.

Agnes outside the new toilet block at her school in Slaya, Kenya.

'The human right to water entitles everyone without discrimination to sufficient, safe, acceptable, physically accessible and affordable water for personal and domestic use. The human right to sanitation entitles everyone without discrimination to physical and affordable access to sanitation, in all spheres of life, which is safe, hygienic, secure, socially and culturally acceptable, which provides for privacy and ensures dignity.'

United Nations General Assembly / Human Rights Council[2]

WaterAid/ Behailu Shiferaw

WaterAid's Steps to inclusive WASH diagram shows the steps you must take to achieve inclusive WASH for all.

Remember – these are not a series of standalone actions. They must be embedded in everything you do. Your approach should be adapted for the local context and flexible enough for you to take advantage of opportunities as they arise.

Diagram 1: Steps to inclusive WASH

WaterAid staff and partners are aware of the human rights to WASH and apply this in their work.	**WaterAid staff and partners have the skills and confidence to implement inclusive WASH.**	**Marginalised groups and individuals are aware of their rights to WASH and their communities recognise their rights.**
Marginalised groups and individuals actively participate in WASH management committees, activities and decision-making, so are able to claim their rights to WASH.	**WaterAid staff and partners collaborate with marginalised groups and individuals to collect evidence on the barriers to WASH and address these.**	**WaterAid partners support communities to use this evidence to engage decision-makers in inclusive WASH.**
The WASH sector, wider sectors and civil society work together to advocate inclusive WASH as a human right.	**Decision-makers are aware of their responsibilities, and provide, monitor and enforce inclusive WASH. They are held to account through effective systems.**	**Inclusive WASH for all**

Source: WaterAid Guidance (updated 2017).

Members of a
disabled persons'
organisation in
Madagascar
describing the
challenges they
face in getting
contractors to listen
to their needs when
building facilities.

1 Get informed

WaterAid/ Sibtain Haider

Fida Husain washing his hands at the WASH facility in his home in Punjab, Pakistan.

This section introduces the key concepts behind equality, non-discrimination and inclusion in water, sanitation and hygiene (WASH), and explains what they mean for practical programming.

Are you familiar with these concepts?

- **Equality and non-discrimination**
- **Equity and inclusion**
- **The rights-based approach and participation**
- **Marginalisation, social exclusion and intersectionality**

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Section 1

Action

Read through the statements below and select the response that best describes your understanding. Be honest.

	Yes, I totally agree	I agree to some extent	No, I do not agree at all
Equity and equality are basically the same thing	**3**	**2**	**1**
Access is about ensuring that ramps are built for disabled people at water points and latrines	**3**	**2**	**1**
Non-discrimination is making sure water committees have female representatives	**3**	**2**	**1**
Inclusion results from having disabled people and older people present at community discussions	**3**	**2**	**1**
Everyone has rights, so it is unfair to focus on a specific group of people	**3**	**2**	**1**
Total			

How did you score?

Between 5 and 7
You are familiar with the main concepts and could head straight to Section 2, but read Section 1 if you want to check you have everything covered.

Between 8 and 11
You have some basic awareness of the main concepts but are probably not 100% confident in how these work in practice, so best to read Section 1.

Between 12 and 15
Your knowledge of the main concepts is limited. Read Section 1 carefully.

Important definitions

Let's consider some of the key concepts and what they mean for practical programming.

Equity and equality are definitely not the same thing. Try thinking of it like this:

Diagram 2: Equity vs. equality
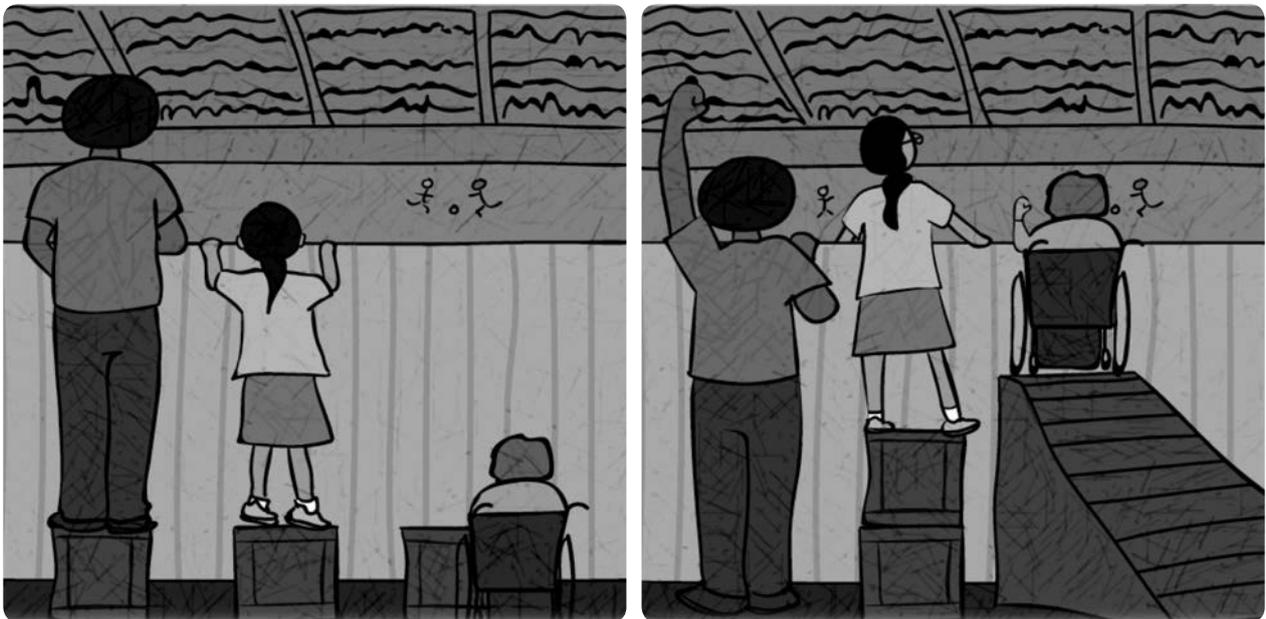
Source: based on an original idea by Craig Froehle (2012).

The picture above shows a range of people who have gone to watch a football game. They have been provided with the same set of tools to help them get a good view. But despite having the same tools, not everyone is able to see the action. Treating everyone the same will not necessarily result in everyone achieving the same outcomes. Equality is not brought about by providing the same type of service to everyone.

The picture above shows that in order to actually see the football game a few practical measures had to be put in place for equality to be achieved. Those measures are what we focus on when we talk about equity – what we have to do to enable different people to share in the outcomes. Equity is about providing the tools or the mechanisms through which equality can be achieved.

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Section 1

Equity is the principle of fairness.

Equity involves recognising that people are different and need different types of support and resources for their rights to be realised. To ensure fairness, measures are often needed to compensate for discrimination and disadvantages. Of course, the real problem in the scenario is the wall – but more on that later.

Equality is a fundamental human right to equal opportunities.

Equality is the legal obligation that ensures everyone can claim their rights. Equality recognises that traditionally some people have been denied opportunities because of who they are, where they live, what they believe in, or because they have a disability (so called 'prohibited grounds').

Human rights laws require equal access to basic services, although, as the picture illustrates, this does not mean providing everyone with the same service. They help by ensuring barriers are removed and discrimination is addressed.

Linked to equality is the principle of **non-discrimination**.

Non-discrimination is the legal principle that prohibits any distinction, exclusion or restriction that results in either an individual or group of people not being able to enjoy or realise their human rights on an equal basis with others based on 'prohibited grounds'.

For equality to be achieved, inclusion is essential. That doesn't just mean having everyone present (like in the picture on the left) but that people are supported to engage in processes that ensure their needs and rights are recognised.

Inclusion is making sure that everyone gets the chance to participate fully.

The principles of equality and non-discrimination are embedded in WaterAid's strategic aims. Recognising the human rights to water and sanitation moves beyond focusing just on access and participation to the obligations governments have, nationally and locally, to implement equality and non-discrimination in all aspects of their work.

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WaterAid/ Ernest Randriarimalala

The practical consequences of this become clear when we think about services. We can build water points in remote rural villages to promote the human right to safe drinking water for all. But, if the design of that water point has not considered how children, disabled people or older people might use it, then not everyone's right to safe drinking water has been upheld.

Inaccessible design may not be the only reason people are excluded from WASH services. Sometimes, negative attitudes, norms and beliefs mean some people are prevented from using shared facilities. For example, people living with HIV, leprosy or a disability may be stopped from using a water point because of fears over contamination.

Everyone has rights, but some people need specific support to achieve them. It's not being unfair to target the needs of the people most at risk of marginalisation in our work; it's being equitable.

Vero turns on the tap for the first time in Tsarafangitra Village, Madagascar.

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The changing nature of development – from needs to rights

To achieve equality, non-discrimination and inclusion in WASH we need to move from a needs-based approach to a **rights-based approach**. This is because how we think about problems directly affects the kinds of solutions we offer.

Talking openly about human rights can sometimes be difficult, or even risky; however, this does not mean the principles expressed in this approach are inappropriate or do not apply. We can still work in ways that respect the principles of human rights without using the specific language that goes along with it. If you are working in a context where human rights are not openly talked about or accepted, you can still use this resource and the tools it recommends, but you may have to talk about them differently.

Let's look at how approaching development based on needs or rights can influence programming decisions.

Kausar with her mother, Salma, in their home in Ratta, Punjab, Pakistan.

WaterAid/ Sibtain Haider

The needs-based/individual approach

Originally, help and support was provided to people on the basis of charity. This consisted of donations of food, money, clothing or medical care to deal with an immediate need.

In Diagram 3 we see the typical characterisation of marginalised people as separate from the rest of the community – regarded as 'the other'. They are perceived to be people whose identity and needs represent something outside of the norm.

A needs-based approach to development involves NGOs being responsive to the needs of 'the other' (or 'the poor'). Micro-level interventions prevail, usually targeted at specific groups of marginalised people and designed to meet their immediate stated needs (see how the arrow is pointing to marginalised people in the diagram). Anyone involved is seen as a 'recipient' or 'passive beneficiary' of the interventions.

Although this approach helps to alleviate suffering and improves wellbeing, it does so only for those involved, and for the duration of the intervention. Over the longer term, very little changes in the system, so people remain largely dependent on assistance and continue to be vulnerable to the random shocks (positive or negative) that strike them during their lives. Unfortunately, it also tends to focus on those whose needs are easiest to recognise and address (low-cost, high-impact groups) rather than the hardest to reach.

Diagram 3: The needs-based/individual approach

Community

Marginalised people

- Based on concepts of 'the other'
- Issues assessed on an individual needs basis
- Participation involves identifying needs
- Micro-level interventions that seek to alleviate immediate issues
- Separate programmes focused on specific groups
- Those in receipt of support are passive beneficiaries
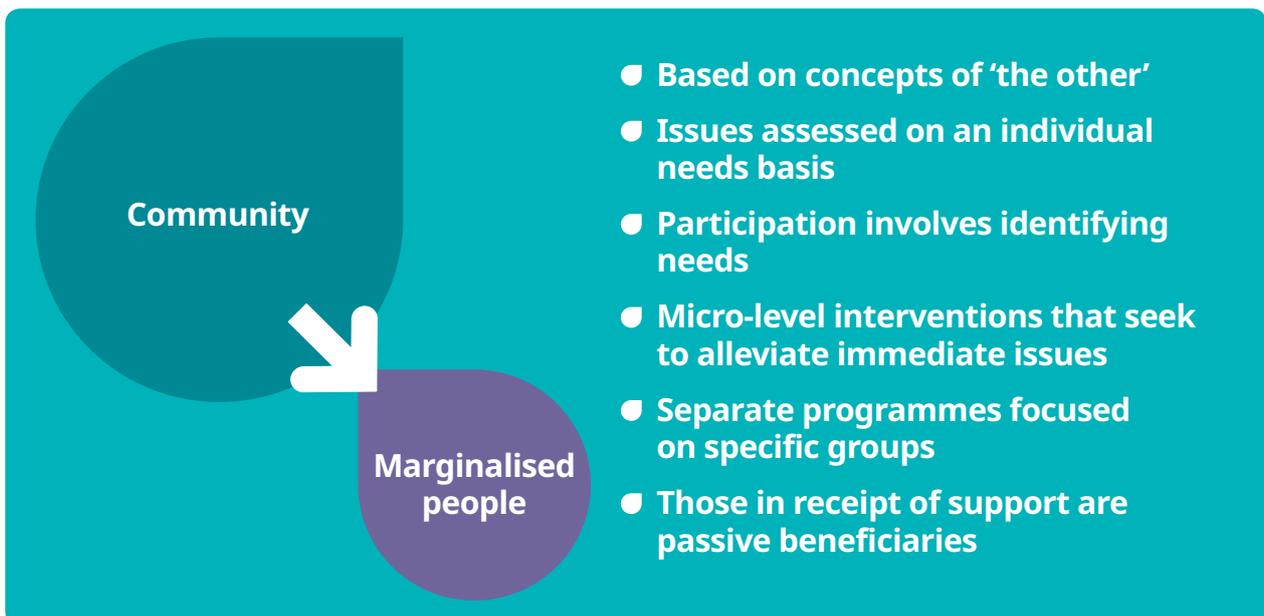
Source: Adapted from an original concept developed by Coe S and Wapling L (2010).[3]

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The rights-based/inclusive approach

So what is different about a rights-based approach? To begin with, we have to understand development as a human right. That means disadvantage and marginalisation represent unfulfilled rights. Development is no longer about needs but about rights. So what does that mean in practice? Take a look at the rights-based/inclusive approach in Diagram 4. How does it differ from the needs-based one?

Diagram 4: The rights-based/inclusive approach

Marginalised people

Community

- Based on established human rights
- Human diversity is recognised as a feature of all communities
- Issues assessed on the basis of barriers to participation
- People are empowered to claim their rights and duty-bearers are held accountable
- Interventions bring about long-term systematic changes in attitudes, behaviour, policies and laws
- Programme recipients are rights holders

Source: Adapted from an original concept developed by S Coe and L Wapling (2010).[3]

Eduardo Felipe Homphriz Marklin in front of the recently finished rainwater collection tank in Wawa Bar, Nicaragua.

WaterAid/ Jordi Ruiz Cirera

A significant difference is that everyone is now represented as being in the community. Taking a rights-based approach means understanding that a diverse range of people make up the community, all of whom have the right to development. Instead of thinking about individual needs, this approach looks at what barriers people experience (represented by the dotted line) to fulfilling their rights.

Inclusive development is now more about identifying those barriers and putting in place interventions that will lead to their eventual removal. It looks to empower marginalised people to claim their rights, while educating duty-bearers (those who run services, or hold decision-making authority) to realise what they need to do to make sure their work is accessible. Over time, systemic changes to attitudes, behaviour, policies and laws take place and the barriers are removed; power and resources are rebalanced and redistributed throughout the whole community.

A human rights-based approach to development is one that pays attention to the power dynamics between people who experience marginalisation and those who make decisions. By empowering those at risk of marginalisation to claim their rights, and by supporting duty-bearers to take greater responsibility for responding to the needs of rights-holders, this approach seeks to rebalance power and redistribute resources more equally.

This approach seeks to change the relationship between duty-bearers and rights-holders from one of charity and powerlessness to one of obligation and rights.

'The right to development is an inalienable human right by virtue of which every human person and all peoples are entitled to participate in, contribute to, and enjoy economic, social, cultural and political development, in which all human rights and fundamental freedoms can be fully realised.'

Source: UN General Assembly (1986) Article 1 Declaration on the Right to Development.[4]

Diagram 5 below shows how the human rights-based approach seeks to bring about change in three distinct yet related arenas – among the excluded, among the duty-bearers and in the system itself.

Diagram 5: The human rights-based approach

Change among excluded (mindset + behaviour + capacity)

Change among duty bearers (mindset + behaviour + capacity)

Systematic change

Limited change
Claiming of rights/ entitlements by marginalised based on international human rights

Limited change
Service delivery of rights/entitlements by duty-bearer based on national legal structure

Sustainable change (change of power equations + system)

Stages/kinds of change
- **Awareness**
  - **– Information**
  - **– Knowledge**
  - **– Ability to analyse**
- **Voice**
- **Influence**
- **Limited enjoyment of right/entitlement**

Stages/kinds of change
- **Effective implementation**
- **New or modified laws/schemes**
- **Adequate resources**
- **Change in the 'helping' society**
- **Sustainable enjoyment of right/ entitlement**

Stages/kinds of change
- **Accessibility**
- **Transparency**
- **Responsiveness**
- **Willingness to sanction non-performance**
- **Limited enjoyment of right/entitlement**

Source: WaterAid (2017)

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We can work with people to develop their awareness, voice and influence on services; we can work with duty-bearers to become more accountable to ensure WASH services reach everyone; and we can work on the system that supports everyone to consider services as rights rather than charity.

Remember that duty-bearers are not just the obvious government officials, they include anyone who has responsibility for others, including the heads of households, school head teachers, health centre staff, community leaders and members of local organisations.

So when you are thinking about developing inclusive programmes, you need to pay attention to these dynamics. Do all sections of the communities you work with really understand the rights they (and others) have to WASH services? Do public authorities and service-providers know what obligations they have to provide accessible facilities?

Action

Read *Guidelines on embedding and integrating a human rights based approach***, available at: washmatters.wateraid.org/publications/ embedding-and-integrating-a-human-rights-based-approach. Make notes on how you think gender, age (including both children and older people), disability and health status might impact on the rights to water, sanitation and hygiene from the perspective of the rights-holders and duty-bearers within your local context.**

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Important concepts in rights-based programming

First, consideration needs to be paid to **participation**.

Participation means that people are involved in the social, economic, political and cultural processes that affect their lives. This is recognised as a right.

To achieve equality, this must be *meaningful, appropriate* and provide *ownership*. Participation should be empowering – providing people with a voice in decisions that affect their lives. It is not just about consulting people on their immediate needs, but also the wider context – about why people have unfulfilled rights in the first place.

In a rights-based approach, people become active participants in the process of change – by learning about their rights, then analysing their situation and the causes of exclusion. People can begin to use their voice to influence others through raising awareness, advocating and holding duty-bearers to account, for example. They move from being passive recipients of programme interventions to active agents of change. Section 3 contains suggestions for promoting participatory programming.

Second, there are issues of **discrimination** and **marginalisation**.

Discrimination means treating people less favourably because of their status or identity.

The issue of who is marginalised is critical to the equality, non-discrimination and inclusion process and forms the basis of many of the tools featured in this resource. We will be considering how to ensure that people whose rights have been left unfulfilled are brought into programmes and projects, how to help empower them, and how to improve accountability and responsiveness on the part of service-providers and state institutions. In particular, we will look at how power, and powerlessness, feed into marginalisation, and how taking a rights-based, rather than a needs-based, approach helps to challenge and redefine unequal power relations.

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Marginalisation is a process by which some people's needs become less visible, their voice is absent from decision-making, and resources are not shared equitably, as a result of discrimination.

WaterAid/Mani Karmacharya

Samrakshya, Manisha and Dilasha, showing their clean hands in Kushadevi, Nepal.

How marginalisation affects programming

WaterAid/ Ernest Randriarimalala

Bryan washing his hands at a water point in Antanambao village, Madagascar.

When we talk about those who are at risk of being 'poor and marginalised', who are we talking about? In the first instance, WaterAid takes a macro approach to identifying who we work with because we want to make sure that those who are in the poorest situations are targeted for support.

Remember, 'poor' in this sense means experiencing *unfulfilled rights to clean water and safe sanitation*.

So WaterAid works in countries around the world where access to WASH is not yet guaranteed, and within those countries with communities that are, for example, geographically marginalised, such as those in remote rural areas; in environments that are more vulnerable to the effects of climate change; or where income levels are low, including in informal settlements. These are **macro-level factors** that help us **target communities in geographical areas that are more vulnerable**.

Let's now think about who we might expect to see living in these communities and whether or not any of those people might be at further risk of discrimination and marginalisation. On a very general level, we expect to see the community made up of both men and women. If we adopt a life-cycle lens, we'll see that there are definitely going to be babies and children, young people, adults, and older people.

So, we can already see that there are two factors that could potentially lead to marginalisation – **gender** and **age**. Women, girls and older people can all experience discrimination in relation to WASH.

We know also that there are going to be some people in the community who have disabilities and some who have long-term health conditions such as HIV, TB or leprosy. These factors can also lead to stigma and discrimination. So to gender and age we can add **disability**, and **health status**. We call these **universal markers for marginalisation** because they are factors for potential exclusion that are present in all communities.

Universal markers for marginalisation:

- **Gender**
- **Age**
- **Disability**
- **Health status**

There are other marginalisation factors that might impact on people at programme level – including, for example, ethnicity, tribe, religion, caste, sexual orientation and gender identity, landlessness, economic situation, and refugee or migration status – but they are **context-specific**. They may be a factor in why particular sub-communities are targeted by programmes at the macro decision level, but even within these sub-communities there will be people for whom gender, age, disability and health status may exacerbate their marginalisation.

Any one of these factors alone, be it universal or context-specific, can impact on the opportunities people have, but combined they can considerably increase the vulnerability of an individual or household. So, gender-based inequalities can be made worse when they are also associated with other types of discrimination, such as disability and ethnic minority status. This is called **intersectionality**.

Intersectionality is the understanding that an individual's experiences will be affected by how different aspects of their identity overlap – for example, their race, class, gender, age, health status or disability status. This can mean that some people will experience more discrimination and marginalisation because of different aspects of their identity.

It's an issue that is highly significant in understanding why some groups of people remain 'hard to reach' or 'left behind' in the development process. The following diagram helps to illustrate how knowing the profile of communities can improve discussions around barriers to inclusion and increase the likelihood for interventions to have a widespread impact.

Section 1

Diagram 6: The marginalisation framework

Identifying who is marginalised

Macro-level contextual factors

- Geography (environment)
- Migration
- Ethnicity/tribe
- Religion
- Caste
- Sexual orientation/ sexual identity
- Landlessness
- Economic situation
- Refugee/ migration status

Micro-level universal factors

- Gender
- Age
- Disability
- Health status

Intersections

Macro + micro-level characteristics = potential for marginalisation – e.g. young women from a minority ethnic group or older people with disabilities living in refugee camps.

Barriers to inclusion

Environmental

- Natural environment
- Built environment
- Method and modes of communication

Institutional

- Legislation
- Policies
- Cultural norms
- Traditional practices

Attitudinal

- Beliefs
- Practices
- Behaviour
- Language

Inclusive WASH

Universally designed

Participatory

- **Legal compliance**
- **Empowerment**
- **Accountability**

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Understanding marginalisation

Before you can implement inclusive WASH programmes, it's important that everyone involved, including staff and partners, understands the principles behind equality, non-discrimination and inclusion in WASH (Section 1) and the terminology and categories of marginalistion that we are most likely to see in our work (this section).

Words matter, especially in the context of marginalisation. It is important to realise there may be all kinds of stigma, taboos, prejudices and expectations tied up in the words we use. WaterAid and partner staff, no matter where they work, are just as likely to hold discriminatory or conservative understandings of concepts as are the communities in which they work.

That is why it is so important that the terms gender, disability, age and health status are clearly defined and consistently and continually communicated to everyone.

This section provides you with information and tools to check your own awareness levels and others', and ensure everyone is using the same language before designing programmes. Don't leave it to chance.

We will cover each of the 'universal markers for marginalisation' explained in Section 1: Gender, Age, Disability, and Health status.

Section 2

Action

Use the following exercise with staff and partners to check how much they know and understand about equality, non-discrimination and inclusion in WASH, and how committed they are to bringing it about.

1. **Use the scale to rank the extent to which your organisation currently practises equality, non-discrimination and inclusion.**

| 0 | 1 | 2 | 3 | 4 |

Have not thought about it

We have good practices in place
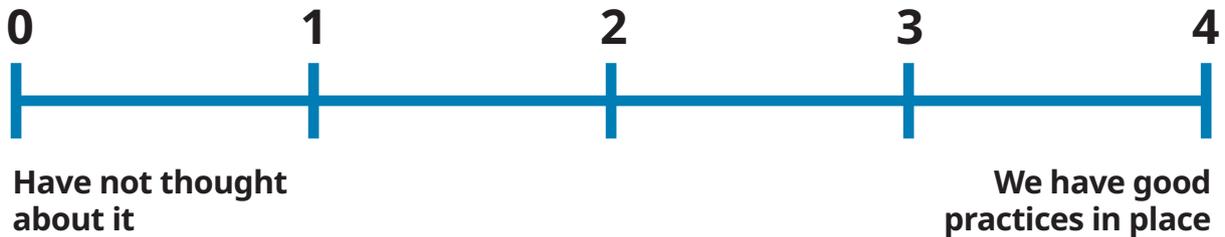
2. **Now use the same scale to rank to what extent you engage with each of the following groups of people in your WASH programme and advocacy work.**

- Women
- Men
- Disabled people (both women and men)
- Older people aged 60 years and over (both women and men)
- Children (both girls and boys)
- People with chronic health conditions (both women and men)
- Within your own context, what is another characteristic that often leads to discrimination or exclusion?

| 0 | 1 | 2 | 3 | 4 |

We don't have a relationship at this time

We have a good relationship and we consult on all plans

WaterAid Basile Ouedraogo
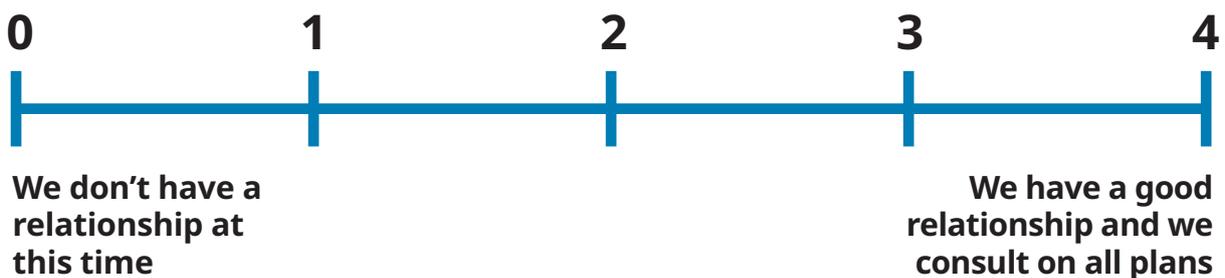
Justine Dabire on her tricycle at home, in Dissin, Burkina Faso

A perfect score on this action is 48 – how well are the staff and partners you work with doing? A score of 20 or more suggests that things are heading in the right direction, but anything less needs serious attention. While you are aiming for a high overall score, it is also important to highlight any gaps. If there are groups of people missing or registering low levels of interaction on the scale, you need to think about why. It's really important to stress at this point that any work that aims to include marginalised people needs the active involvement aspect.

Voicing some common concerns

Here are some common reasons people give as to why some groups of people feature less obviously than others do:

"We don't think there are many of them in our communities."

"We find it hard to identify them in our communities."

"We don't have the skills or experience to work with them."

"We don't have the resources to meet the needs of such people."

"We don't think they can make a valuable contribution."

"Working with these people is very challenging, and we don't have the time or expertise to do it effectively."

A lot of the concerns expressed above have more to do with a lack of experience and confidence than any real skills gaps. Many can be significantly reduced with some well-timed awareness-raising sessions. People often don't realise they already have the skills to help tackle marginalisation (since they are the basis for most community development activities).

So it is always best to start by ensuring that staff and partners are equipped with the skills and confidence to implement rights-based WASH programming. Refresh and increase understanding and skills sets where necessary, and partner with representative organsations – for example, local disability rights or women's rights organisations – to help run these awareness and knowledge-building sessions.

Defining who we work with

In Section 1 we introduced the universal markers for marginalisation – a set of factors, common to all communities, that can lead to discrimination and exclusion. People who fall into these groups are a key focus for rights-based programming.

It is tempting to think that simply identifying these markers in plans and strategies will lead to a greater number of people in these groups being included. This is true to some extent; certainly, activities are more likely to be designed with the needs of marginalised people included if they are named as an excluded group. However, these markers represent concepts that are not as widely understood as you might think – all can be interpreted in subtly different ways, depending on people's experiences, attitudes, cultural context and training.

In the following pages, we have attempted to provide examples and evidence of how some characteristics or group identities can affect a person's experience of WASH. It is important to say that not all people in a certain group or with a certain characteristic will experience barriers or discrimination. But these examples provide an overview of what statistics and evidence tell us are potential or even likely issues to consider in our work.

Francine with her baby fetching water at the water point in Ambohijafy Village, Magascar.

WaterAid/ Ernest Randriarimalala

Section 2

Disability

Mary Simeon using the tapstand in Chamwala Village, Malawi.

WaterAid/Dennis Lupenga

Disability is not a neutral term, and this contributes to the difficulties we can face in identifying people with disabilities in our programming. **Do not make the assumption that everyone knows what disability means.** Without a clear and agreed understanding of disability from a rights perspective, it is possible for programmes to miss lots of the barriers faced by disabled people and for many people to remain excluded.

Each country will have its own official definition of what counts as a disability, but these are mostly linked to household data collection, the provision of social protection, and other specific services. In fact, you might find that disability is defined in several different ways even within one country. Internationally, the standard way to describe disability (including within WaterAid) is provided by the UN Convention on the Rights of Persons with Disabilities (UNCRPD), which states that:

> **'Persons with disabilities include those who have long term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.'**
>
> Source: Article 1, UNCRPD (2006).

So, what do we mean by impairment and disability?
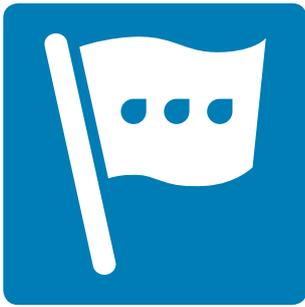
An Impairment is a physical, sensory, intellectual and/or mental health issue that a person has been born with or has acquired through injury, accident or another cause.

When we use the term **impairment** we focus on what makes an individual different from others; that is the physical, sensory, intellectual and/or mental health problem(s) they have. It is just a medical label though; it does not describe the impact of that difference on their everyday life, and it won't tell us much about why they are excluded.

Disability results from the interaction between a person's impairment and the environmental, social and institutional barriers they face.

Diagram 7:

Impairment	**+**	Barriers	**=**	Disability

Source: OpenWASH (2018). *Count me in! Inclusive WASH in Ethiopia*, The Open University UK/WaterAid.

When we use the word **disability**, our focus shifts to the attitudinal, environmental and institutional barriers that can limit or exclude people with impairments from participating in society; put more simply, what effect an impairment has on someone's opportunity to carry out daily activities. This is the understanding of disability we need to make sure everyone is using, because this will lead us to focus our attention towards barriers to inclusion, rather than medical needs.

This understanding of disability fits better with the rights-based approach – it's not about just attending to individual needs but about dealing with barriers, empowering people to claim their rights and hold duty-bearers accountable, and bringing about long-term systemic changes in attitudes, behaviours, policies and laws. This is known as 'the social model of disability'.

It is important to note that this does not mean that disabled people should be treated the same as non-disabled people and that their impairments don't matter. Remember the picture from Section 1? In order to achieve equality, we need to identify and remove barriers to inclusion.

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Disability and WASH

The *World Report on Disability* estimates that, globally, there are more than a billion people over the age of 15 living with a disability.[6] Representing 15.3% of the world's population, this means that on average one in four households will include a disabled person).[6] Figures for childhood (0–14 years) disability estimate that there are around 95 million disabled children.[6] Childhood disability is generally more common in low- and middle-income countries, but this also varies regionally, with the highest rates recorded in Africa (22%) and South East Asia (21.1%).

Data also shows that vulnerable populations are more likely to be affected by disability; so not only are there more disabled people in lower-income countries generally, but also rates are highest among women, older people, those living in poverty and those belonging to ethnic minorities.[7,8]

The prevalence of disability is also growing. The risk of disability grows as people age and, with increases in life expectancy across the world, there are growing numbers of older people in many countries. More people are also surviving what in the past would have been fatal trauma and diseases with associated disabling effects, contributing to global increases in the numbers of people living with chronic health conditions and non-communicable diseases, such as cancer, diabetes, cardiovascular disease, hypertension and kidney and liver disease.[6]

Involving people with disabilities in programme design helps to ensure that WASH provision responds to different needs, for example by considering water and sanitation technology options, using different ways to communicate hygiene messages, and providing additional options and training for carers of people with disabilities. While it is not all about physical adaptation, it's good to keep in mind that it is much cheaper to ensure at the planning stage that WASH designs are inclusive than to make adaptations later.

Unhygienic toilets impact disproportionally on the health and dignity of those with visual or mobility difficulties because they are more likely to have to crawl across floors that are soiled or step into the mess left by others.[9] Distant and inaccessible water points make it hard for many disabled people, older people and children to collect water for themselves, increasing their dependency on others and making them more likely to restrict their water intake and use in an effort not to over-burden others.[9] Water scarcity and fragility can be most acutely felt by those unable to collect or access it themselves. In turn, this increases the

WaterAid/ Basile Ouedraogo

burden on carers, who have to meet their own needs and those of the people they care for.

WASH programming and involvement can support people with disabilities to claim their rights by helping increase their visibility, dignity, self-confidence and active participation in policy- and decision-making, often by working closely with disabled people's organisations.

A girl with learning difficulties doing some exercises with a teacher/caretaker in a special school in Bamako district, Mali.

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Gender

Gender roles are socially constructed and they come with sets of expectations and norms. **Sex** refers to the physiological differences that exist between women and men, whereas **gender** encompasses all the social attributes we assign to being female or male as a result of our culture and society.

The gendered identity of women and men affects how they are treated, what their expectations might be, how they behave and even how they might be expected to think. Because they are learned, gender roles vary over time and across communities, and have been affected by technological advances that are challenging more traditional economic and social practices.

Changes to gender roles and expectations often lead to resistance, especially from those seeking to retain cultural or traditional beliefs. Anticipating what difficulties might arise from altering the status of women and men, and building this into WASH programming, is essential. It is not simply a matter of ensuring equal numbers of women and men in water committees, but understanding how they are participating (for example, are women taking all the administrative roles, leaving the decision-making to men) and how this is affecting other aspects of their lives.[10]

Gender considerations are not limited to women and men; we also need to acknowledge other aspects of gender identity that can affect access. Little formal evidence exists but details are emerging about the discrimination and increased gender-based violence that those who identify as lesbian, gay, bisexual, transgender or intersex (LGBTI) experience.

What is clear is that a simple binary understanding of gender – in other words the basic categorisation of woman and man – does not cover everyone's experience of being female or male, so we cannot make assumptions about people's gender. While this resource does not specifically cover issues affecting the LGBTI community under gender, it is a factor receiving increased attention in relation to discrimination and gender-based violence, and something you need to be aware of as you think about who is excluded. Depending on the context in which you work,

WaterAid/Ernest Randriarimalala

Irene with her daughter, Keilane, and her niece inside their house in Ambohimalaza Village, Madagascar.

meeting up with people in the LGBTI community and finding out more about the challenges they face in access to WASH would be a very good place to start.

Gender and WASH

Although water and sanitation are recognised as human rights, achieving universal access will not be possible unless the specific needs of **women and girls** are built into policies and programmes.[11] There are some very powerful social and cultural norms around girls' and women's roles, responsibilities and even their bodies, that impact their ability to access WASH services.

Women and girls are typically responsible for water collection in most households, but most of it is used for cooking, cleaning the house and sanitation facilities, and for keeping children clean. That leaves little for their own hygiene needs, especially where supplies are short. And yet women and girls are at greater risk of infection, particularly during menstruation and pregnancy, when they are not able to use water for personal hygiene purposes.

Women and girls can also be at increased risk of gender-based violence when they have to use badly situated or

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maintained facilities (for example, isolated, remote water sources or unsafe latrines). Where there are no latrines, or those available are too dirty, girls and women have to risk defecating in the open.[12]

Exclusion and poverty of women and girls are also heightened by a lack of consideration of the provision of menstrual hygiene management facilities. Where taboos and stigma persist, they often cannot stay in work or school, or participate fully in public or family life.[13]

The challenges women face in relation to WASH change across the different stages of their lives and according to other intersecting factors, such as whether they are disabled, of a lower socioeconomic group, of an ethnic group that is marginalised, whether they are married or widowed, and so on.

Women and girls experience exclusion in relation to WASH at almost all levels. Traditionally, men have taken on powerful decision-making roles within community, local and national governance structures, while women have taken up more passive, home-based roles. Cultural stereotypes and norms around gender can affect decision-making arrangements, and access to power, resources, public participation and even to water itself. These norms can be so strong that they can continue to affect attitudes even when there is positive policy and legislation in place.

WASH issues are critical to the lives of women and girls, and women and girls are critical to the success and sustainability of WASH investments.

Source: Gender and Development Network (2016). *Achieving gender equality through WASH.*[11]

Despite being primarily responsible for the WASH needs of the household, because of the unequal power relations that exist between women and men, women are much less likely to be part of the decision-making process in planning improved services. If unchanged, this will continue to mean WASH facilities and services are far less likely to meet the needs of women and girls.

Focusing on and including women in WASH programming contributes to more effective and sustainable WASH outcomes, as well being a good mechanism to improve gender equality and women's wellbeing, voice, leadership and economic empowerment overall. It is therefore of both practical (assisting with day-to-day duties and roles) and strategic (through long-term challenge to discriminatory gender roles and norms) benefit to women and girls and society overall.[11]

Neny, 9, during the water arriving celebration in her village in Alaotra, Madagascar.

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Age

The term **older people** is commonly used to define people who are over a certain age. But the age at which people are regarded as being old varies. The UN (and this resource) uses 60 years and over, which is also the criteria for older people used for most statistics. Government departments may have different definitions of who they regard as old, depending on what services they are offering. For example, many high-income countries set the age at 65, because this is the age at which people can start receiving a pension or old age social security.

But, a person's chronological age may not reflect how 'old' they feel, and in community settings people may not refer to themselves as older people even though they are over 60. In fact, older people often define old age as declining health and independence (losing mental and physical capacity) rather than something that just happens once you reach a particular age. Old age might also be linked to a change in social status, such as becoming a grandparent, retiring from formal labour, or being widowed.

In the same way, while **children and young people** can be defined by their chronological age (assuming there is a record of their birth), whether or not they can participate in activities independently may be controlled by local traditions or by their personal development.

What is important is not necessarily that you follow official definitions but that you discuss and agree from the outset what you mean by the terms 'children', 'youth/adolescents' and 'older people', and that you make sure everyone involved in your programme knows the definitions you are using, including in the communities you are working with.

Age and WASH

Children are highly vulnerable to the effects of poor WASH, with the resulting deaths and disease falling disproportionately on children, women and those living in poverty.[14] Diarrhoea, a result of a lack of WASH, is the second most common cause of death in children younger than five globally.[15]

Infections, especially those leading to diarrhoea, can stop children's bodies from absorbing the nutrients they need to grow and develop. In fact, around half of all malnutrition is the result of repeated episodes of diarrhoea or intestinal worms caused by dirty water.[16]

In 2017, 962 million people in the world were older than 60 years. However, this is expected to more than double to 2.1 billion by 2050, and more than triple to 3.1 billion in 2100.[17] Many **older people** live in extreme poverty and are excluded from decision-making, while at the same time finding themselves as caregivers for younger generations. They often cite access to clean water and sanitation as a particular concern for them and their dependent families.

Older people can also be vulnerable to disability and health-related issues – especially hearing loss, vision loss, mobility restrictions, and other factors such as age-related incontinence – which puts them at significant risk of being excluded from WASH. Even when facilities are available, they are often difficult to access and use, so older people may continue to practise open defecation, or remain reliant on others in the household for assistance.

Older people may have difficulty collecting water and using water facilities, and can become more reliant on others for assistance.

Both these water and sanitation restrictions might lead to older people having to manage what and when they eat and drink and restricting their movements, preventing them from living full and dignified lives.

WaterAid/ Joey Lawrence

Mariama Adu, collects clean water from the pump in Tombohuaun, Sierra Leone.

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Health status

Another universal marker for marginalisation is **health status** – in particular, we are interested in working with people who are socially excluded because they have a chronic health condition. In simple terms, a chronic health condition is one where symptoms have lasted for longer than three months. Some conditions are the result of infection – such as HIV, tuberculosis (TB), leprosy, lymphatic filariasis (LF) and Hepatitis C – and others are non-infectious or non-communicable diseases (NCDs) – such as heart disease, stroke, cancers, asthma and diabetes.

Any of these conditions may result in exclusion as a direct result of people experiencing reduced mobility, mental or physical capacity. But there may also be considerable stigma attached to the condition, which can mean people are socially isolated or discriminated against, especially in relation to WASH. Conditions such as HIV, leprosy, LF and many other neglected tropical diseases (NTDs) are associated with high levels of stigma, and may have a significant impact on the extent to which people and their families can use public WASH facilities or take an active part in community life.[18]

Health status and WASH

By the end of 2015, there were more than 36 million people worldwide living with HIV.[19] It is important that people living with this chronic health condition, especially those on antiretroviral medication, maintain a balanced diet and can access clean drinking water. People living with HIV have a much greater risk of developing infections and diarrhoea, even more so in the case of babies who acquire HIV from their mothers during pregnancy or while breastfeeding.

This group is particularly at risk of exclusion through stigma where communities prevent people living with HIV from using communal WASH facilities as a result of misconceptions around how HIV is transmitted.[9] Poor access to clean water and sanitation also increases the burden and risk of infection for those who are caring for people with HIV, including healthcare professionals, if they have inadequate access to clean water, soap and gloves.

Around 1 billion people are affected in some way by neglected tropical diseases (NTDs).[20] In most cases, NTDs affect those already in economic poverty, and hold back their efforts to succeed in education and employment. Many untreated NTDs lead to disfigurement and disability, increasing the risks of further marginalisation.

There are strong links between NTDs and WASH. While people can often be successfully treated with medication, without WASH this is only a short-term solution, given the chances of re-infection. Many of those at risk from NTDs live in communities with little political voice or power, and since NTDs tend to be highly localised, in many cases national or international agencies show little interest.

Action

1. **Check that staff and partners are familiar with the current definitions WaterAid uses for gender, disability, children, youth, older people and health status and feel that they understand them.**

2. **Read WaterAid's Equity and Inclusion Terminology Guide – this guide provides more information about the terminology WaterAid prefers to use and why in relation to the individuals and groups. Feel free to share it with partners. This is a living document and should be updated as our understanding expands.**

   Available at washmatters.wateraid.org/equity-inclusion-terminology

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Said holds his daughter Atija outside their home in Lacua village, Mozambique.

Take action: practical tools and resources

This section brings together practical tools and resources for you to use in your work. It will help you assess your current progress, recognise barriers to inclusion in your context and analyse the power relations that perpetuate attitudinal and institutional barriers.

The tools are presented to coincide roughly with a typical programme cycle – from planning to evaluation – but many can be used regularly or adapted for use at different times. The underlying principles are generally the same – that the tools are used in a participatory way and are empowering for those who experience marginalisation. As you use them, you will discover the kinds of techniques that are more popular or more relevant to your context. Even if you already have some favourite tools, it's worth trying new ones – you might be surprised.
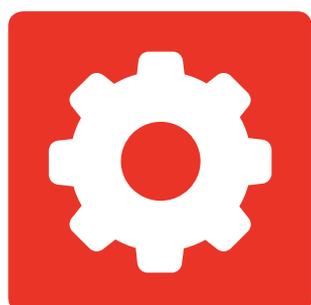
The tools in Section 3 focus on four things:

- Supporting marginalised people to understand that their situation is the result of unfulfilled rights.

- Understanding (or recognising) the delivery of accessible services as an obligation.

- Understanding the attitudinal, institutional and environmental barriers that might be blocking sustainable change.

- Increasing your confidence, skills and capacity to tackle exclusion and marginalisation in WASH.

3.1 Tools for awareness-raising and self-assessment

When working on equality and inclusion in WASH, it is important to start by assessing the levels of awareness, confidence and skills of staff and partners and to reassess these regularly. Staff come and go and people change roles regularly. And people forget! Regular awareness-raising and sensitisation are key to success.

Awareness-raising

Action

Plan some awareness-raising sessions to be held with staff (including senior management) and partners. Do not be tempted to skip this step and go straight into planning. Your interventions will be more effective if everyone involved in designing them has a solid rights-based understanding of the issues being addressed.

It is a very good idea to partner with a local or national organisation run by people from a particular marginalised part of society to help run your sessions. For example, if there is a gap in understanding or skills around gender equality, invite a well-respected women's rights organisation to your office to speak about the national and local context for women and girls. Similarly, a session run by representatives from a national or local disabled people's organisation can help give everyone the chance to better understand the situation of disabled people and ask questions about the challenges they may be facing.

Key tool

The game of life

Time: 25–30 minutes

Taken from WaterAid's Play Your Part Toolkit[21] (Session 2) which in turn draws extensively from Coe S and Wapling L (2010) *Travelling together – how to include disabled people on the main road of development* by World Vision. www.wvi.org/disability-inclusion/publication/travelling-together.[3]

The purpose of this tool is to help participants understand or remember how discrimination can cause and maintain poverty, and how this results in people's rights being denied. It also helps to demonstrate (visually) the privilege some people will have (simply because they are born in a certain gender, body or location) over others in the same location/country/community/family.

Key information

- Designed to be used with staff and partners to raise awareness and understanding.

- You will usually need a certain level of trust and honesty in the group to make the most of this game. It can be a very sensitive experience, so be respectful.

Resources

- Pre-prepared list of statements.

- Space large enough for participants to form a straight line with an arm's length between them and the person on their left. There should be space in front of the line to move forward ten steps and behind to be able to move back ten steps.

Section 3

Facilitation guidance

Set up, explain the activity and ask for volunteers

Set up the room. You will need enough space for four people to stand side-by-side, with the other participants seated around the edges of the room, facing towards the volunteers. Creating a 'corridor' in the middle of the room, enabling you to use the full length of the room for the exercise, is ideal. You can use masking tape to mark a line for the volunteers to stand on.

Note: it is important that people volunteer for their roles. In some situations, religious or traditional beliefs may preclude some from participating. Be aware and respect that. In some cultures, even to imagine being disabled can be seen as 'tempting fate'.

Ask for four volunteers from among the group (ideally, two men and two women) who are willing to stand for about 15 minutes to represent the following groups:

- Non-disabled men
- Disabled men
- Non-disabled women
- Disabled women

Note: You can adapt this exercise to have people representing different marginalised groups or you can add more people (the whole audience, giving everyone a different identity). Another option would be to ask people representing different groups to join the exercise at the end, and decide where they think they would be standing.

Stress that this is not a roleplay exercise – each volunteer will be representing a group of people from within a village or a community in their own country. Many people do not like roleplay, so it is good to reassure them. Also, stress that this is a generalisation – we do not need to get into detail about different types of disability – although this can be raised in discussion.

Play

Tell the volunteers that you will read out statements that represent different stages in life or experiences. For each statement that is read, they should think about the group they are representing and then take:

- Two steps forward for a very positive or very successful experience
- One step forward for a positive or successful experience
- One step back for a not-so-positive or not-so-successful experience
- Two steps back for a negative or unsuccessful experience

Once your volunteers understand what they will be required to do, reinforce that they are representing a group of people so they should respond accordingly. Their response should be based on what they think is currently accurate for a poor community in a developing country/ their country – not what it ought to be.

After each life stage and volunteers' responses, allow time for the others to react and comment. If there is disagreement, the group should decide by consensus and the volunteer may be asked to alter their move. The facilitator's role is to assess when to intervene to clarify reasons for decisions and to bring out and discuss any prejudicial points. After volunteers have made their moves, the facilitator should ask what difference access to clean water and sanitation would make at that stage of life.

Set the scene for a life story. As you want to emphasise links between marginalisation and access to WASH, consider placing the story in a typical village. Describe it in as much detail as you can, explaining that income poverty is generally quite high and only some people in the village have reliable access to clean water and sanitation. For entrepreneurs, opportunities exist in the nearby town where there are also health and educational facilities.

Start with the first life event, as if telling a story. Ask for comments and suggestions from the rest of the group.

Section 3

Statement 1

"One fine day, after a long wait of nine months, your character is born. How does your family feel when they see who you are? Make your moves."

Note what might happen:

- Family is very happy (non-disabled son born) – two steps forward
- Quite happy (disabled son/non-disabled daughter) – one step forward
- Not happy (disabled son) – one step back
- Very unhappy (disabled daughter) – two steps back

Statement 2

"Now you are a bit older and it's time to start thinking about school. How likely is it that you will be able to attend school? Make your moves."

Statement 3

"Now you are 20. You would like to get married, or form a relationship. How much do you think this will be possible for you? Make your moves."

Statement 4

"You like to keep busy and want to make some money for your family. You try to get a job. How easy will it be for you to find one? Make your moves."

Statement 5

"A few years go by. Everyone in your age group is having babies. How much will this be a possibility for you? Make your moves."

Note: Check if the disabled woman takes two steps back or is instructed to do so by the group. Why did this happen? They may say it is because most disabled women are physically unable to have children – a common myth.

Two steps back may well be an accurate response for a different reason – disabled women often don't have children because society thinks they can't or shouldn't. Or they might take two steps back because they do have children as a result of rape or sexual exploitation, which is also a common experience for disabled women in some communities.

Statement 6

"Now you are in your 40s. You have a lot of experience of life. You want to help your community by becoming involved in local politics. How likely are you to achieve this goal?"

Facilitate a discussion

- Who is in the best position now? Who is in the worst place?

- Volunteers, how does this make you feel?

- What does this tell us about how marginalised and discriminated groups are more likely to be poor and less likely to have access to basic services such as WASH?

- What groups (including but not limited to people with disabilities) in your society are most likely to be marginalised? List them.

- Do you work with these groups? Do we know what their experiences are when it comes to WASH?

Reminder

- People who start with a disadvantage often end up with less influence, fewer opportunities and greater poverty and are excluded from basic services.

- In every society there are groups of people who are more likely to be marginalised and excluded.

Bonus tool: Play your part

Available at : washmatters.wateraid.org/publications/equity-and-inclusion-play-your-part-awareness-raising-training-guide[21]

This is a one-day interactive awareness-raising session to build a common understanding of equality, non-discrimination and inclusion in WASH. It provides a good general overview of why a rights-based approach is important, and how you can get started.

Bonus tool: Travelling together

Available at: www.wvi.org/disability-inclusion/publication/travelling-together[3]

This is a one day interactive awareness-raising session to provide programme staff with the understanding and confidence to work effectively with disabled people. It promotes a rights-based understanding of disability and provides guidance on planning and designing more inclusive development programmes.

Assess where you are at

Action

The *Equity, non-discrimination and inclusion in WASH checklist* (overleaf) is useful for assessing how well your work is addressing equality, non-discrimination and inclusion across the programme cycle. It is a quick reference to help you consider what you need to cover at every stage of the programme or project cycle and review the extent to which the programmes or advocacy work you are running or proposing helps promote equality, non-discrimination and inclusion.

Read through the *Equity, non-discrimination and inclusion in WASH checklist* and familiarise yourself with all the points at which equity, non-discrimination and inclusion need to be reviewed throughout the programme cycle.

Shana Dixon constructing a rainwater harvesting tank in Wawa Bar, Nicaragua.

WaterAid/ Eduardo Rodriguez

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Section 3

Key tool

Equity, non-discrimination and inclusion in WASH checklist

Adapted from: WaterAid and WEDC (2013).[22]

1. Situation analysis identifies the environmental, attitudinal and institutional barriers different marginalised groups face in relation to WASH. ☐

2. Baseline includes population data disaggregated by gender, age, disability and health status, and survey questions about menstrual hygiene, the accessibility of facilities for disabled people, and traditional attitudes about gender, disability, and age in relation to WASH. Surveys collect the views of women, children, older people, disabled people, people living with chronic health conditions, and their households, and any groups living in the area whose needs are likely to be neglected (for example, low caste, pastoralists, migrant workers, displaced people, sex workers, prisoners). ☐

3. Community mobilisation uses participatory approaches that enable different people to actively participate, including those with less power. Meeting times and locations are convenient. There are separate discussions with women and children where necessary, and disabled or older people are visited at home if necessary. Mobilisers use empowering facilitation techniques. ☐

4. Information about sanitation and hygiene includes facts about menstrual hygiene, disability and communicable diseases. It reinforces the need to provide access to all, and challenges false beliefs that result in discrimination against disabled or older people, people living with chronic health conditions, and, where relevant, people of different castes or religions. ☐

5. Information is provided in local languages and accessible formats with pictures for people who cannot read or hear, and verbally or in an audio format for people who cannot see. Everyone has access to the relevant information. Women and girls have information about menstrual hygiene management. ☐

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6. Information about technology options for household toilets includes pictures (drawings or photos) of accessible designs, with features for menstrual hygiene management. ☐

7. WASH facilities provide privacy for women and girls to wash their bodies, stained clothing and any cloths used for menstrual hygiene management, and are accessible to those with disabilities. ☐

8. WASH facilities and their surrounds are sited and designed considering the accessibility, safety and dignity of users, particularly considering the requirements of women and girls across the lifecycle. ☐

9. Public water sources are located and installed in a way that makes them as accessible and user-friendly as possible for all users, including children and people who are older or disabled. ☐

10. Public or institutional latrines (in markets, schools or health centres, for example) include separate facilities for males and females, with accessible cubicles, and water provided inside the women's cubicles for menstrual hygiene management. ☐

11. There are arrangements for the disposal of sanitary napkins, where used. ☐

12. User committees include women and members of other marginalised groups, and are facilitated to ensure meaningful participation. ☐

13. Tariffs include options for the poorest people and those unable to pay. ☐

14. Links are made with relevant agencies (for example, health, rehabilitation, protection, gender-based violence) to address issues or needs that are beyond the scope of the WASH sector. ☐

15. Monitoring and evaluation indicators reflect targets for:
    - Facilities with a specified level of accessibility. ☐
    - Reduced numbers of the most marginalised people lacking access and use of facilities. ☐
    - Increased participation of marginalised community members, not only as beneficiaries but also in active roles with responsibilities, and payment where possible. ☐

Remember: To be equitable, WASH work should respond to the local context.

Section 3

Map your networks

Action

Make a list of all the civil society organisations and rights platforms you engage with that promote the collective voice of people in these marginalised groups (that are run by and for the people they represent). If you find any gaps in your connections with representative groups, do some research to find out if any groups exist that you can contact.

Read through the *Equity, non-discrimination and inclusion in WASH checklist* and familiarise yourself with all the points at which equity, non-discrimination and inclusion need reviewing throughout the programme cycle.

Pouk Kann's built his latrine himself, and WaterAid's partner DDSP made it more accessible by adding a ramp and rails. Kohsvay, Cambodia.

WaterAid/ Laura Summerton

WaterAid

Bonus tool: Stakeholder analysis

Tool 5 of *Towards inclusion: A guide for organisations and practioners* is very good for mapping your current stakeholders and assessing the role they play, particularly in helping you to achieve inclusive WASH. It also encourages you to think about at what stage each stakeholder should be involved, and what specific actions and collaborations they are necessary for. The example provided in Tool 5 helps you to think about the particular role of Disabled People's Organisations and Women-led Organisations in your WASH work.
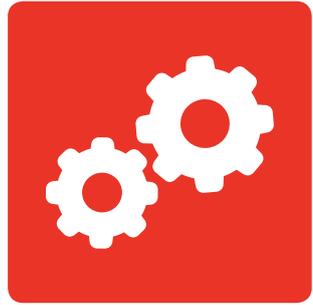
Bonus tool: Framework for action

Tool 2 of *Towards inclusion: A guide for organisations and practioners* is useful in helping you assess the current situation of your programme, projects, country programme or organisation, and the ways in which you are currently including a focus on marginalised or excluded groups.

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3.2 Planning stages – tools for use in baselines and situational analyses

Analysing barriers

Remember Diagram 2 in Section 1 illustrating equality? While equality was achieved through some good interventions (equity), in reality, the main source of inequality was the wall. If there had been no wall, then there would have been less need for those focused activities.

Through the rights-based approach, rather than focusing on individual needs, we look at what makes it difficult for some people to participate – the barriers to participation – and then try to design activities that reduce or eliminate those barriers.

Identifying barriers might seem like a complex process, but actually there are really just three main categories to be concerned about, which we will look at shortly. But importantly, in order to assess barriers you need to work closely with people experiencing or at risk of marginalisation. This is an incredibly important part of the process. It will test you to look for ways to ensure you actively engage marginalised people, and it will provide people who are traditionally excluded with a chance to voice their challenges.

This is an example of where the process itself can be just as important as the results. For some people this may be the first time they have ever considered that the reasons they are excluded have much more to do with how communities and institutions are set up and treat them than their own personal situation. It is the point at which people come to understand it is not because they have an impairment or illness that they cannot participate in discussions around constructing a new water point but because of specific barriers imposed on them, as a result of other people's attitudes or the locations of meetings, for example.

This is a key part of the **empowerment process** – when people realise it is the barriers imposed on them that prevent them from participating, and that they have a right to participate in and benefit equally from development.

Diagram 8: Categories of Barriers

There are three main categories of barrier: environmental, institutional and attitudinal.

Environmental barriers

exist in the natural or built setting, in the way things are constructed, and in the way information is delivered.

Examples:

- Steps built around a water point making access difficult for those with limited mobility.

- Latrines built in an isolated location, making it feel unsafe for some people to use.

- Hygiene messages communicated by a radio broadcast that some people cannot access.

Institutional barriers

are created by laws, policies, cultural traditions and practices, and company policies.

Examples:

- Design specifications for school latrines that neglect to include facilities to manage menstruation or the safe disposal of sanitary products for menstruating girls.

- A lack of standards for the design of accessible public water points.

- A lack of information on accessible toilets for households.

Attitudinal barriers

are the result of social norms, cultural beliefs, prejudice, behaviours, and language.

Examples:

- People known to be living with HIV and AIDS being kept away from water points because of a fear that others using the tap might catch their infection.

- Disabled people deliberately not being included in community meetings, because of the assumption that they will have nothing to contribute.

- Assumptions being made that women don't have technical knowledge and therefore should not be consulted over water service designs.

- The belief that menstruation is impure or dirty, and requires women and girls who are menstruating to live, wash and/or eat separately.

Adapted from Coe S and Wapling L (2010) [3]

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It is important to consider all three categories in any barrier analysis exercise. The focus is often on environmental barriers, because, in many respects, these are the easiest to identify – they are practical and directly affect people. Because of deep-rooted cultural beliefs or family traditions, people may not automatically identify attitudinal barriers as barriers – they may assume this is just how things have to be. You may have to talk about these types of beliefs and perceived norms with communities sensitively before they start to identify them as barriers.

Institutional barriers can be some of the most difficult for people to identify initially, because they may be unaware that laws, policies or practices are discriminatory. Very often, before such barriers can be identified, people first have to be given the opportunity to learn about rights and about how discriminatory policies and practices might exclude them. Likewise, where there are positive laws in place to protect their rights, people may need to be made aware of them, so they can lobby for them to be implemented fully.

Barrier analysis can be a powerful tool early on in planning for equality, non-discrimination and inclusion in programmes. Not only will the discussions identify practical constraints (environmental barriers), they will also provide a good basis for the design of awareness-raising activities (to address attitudinal barriers) and highlight targets for advocacy campaigns (to address institutional barriers).

Community members in Cambodia take part in a seasonal analysis during participatory village social assessment and mapping.

WaterAid Cambodia

WaterAid

Key tool
Barrier analysis

Time: min 2 hours to ½ day depending on the number of 'groups' you focus on

The purpose of this tool is to highlight the barriers that prevent people experiencing marginalisation from accessing water, sanitation and hygiene on an equal basis with others. By understanding and recognising these barriers we can take the first steps towards breaking them down. Focusing on the barriers rather than a person's impairment alone is in line with the social model of disability which is explained on page 31.

Note: WaterAid focuses on analysing barriers because it helps us to understand what action we can take to help achieve better disability inclusion in our work. As a WASH organisation, we can help to reduce and address environmental, institutional and attitudinal barriers to WASH for people with disabilities. However, we should not forget that the specific characteristics of an individual's impairment affect their day-to-day experiences of WASH. For instance, incontinence, pain, and an inability to communicate WASH needs are also significant barriers to WASH access.[24] Understanding how to meet these sorts of individual needs as well as addressing the societal barriers is one of the core challenges for the WASH sector. This is where stronger partnerships and integrated work with disabled people's organisations can be invaluable.

Key information

Barrier analyses are:

- Designed to be used by programme staff to analyse the context during the planning stage. Can also be used if you feel that progress is not happening as anticipated (especially for some members of the community) and you suspect this might be linked to, as yet, hidden factors.

- Best conducted in the form of focus groups held with a range of different community members (4–16 people per session). However, it can also be carried out by programme and advocacy staff (see Variation p62).

WaterAid

● Be aware of how accessible your meetings are to the range of people you want to participate. Ensure you consider the access needs of everyone (from venue location, timing and materials, to communication, additional support and attitudes).

You will need

● At least two facilitators (one to lead discussions and one to take notes and encourage participation)

● A5 cards for group discussion

● Marker pens for group discussion

● Pre-prepared flipcharts divided up into barriers as shown

● Accessible materials (voice/video recorder)

Tip

Before starting, ensure you are familiar with the definitions used to describe marginalisation and can deal sensitively with this type of investigation. In particular, ensure you are familiar with the human rights-based approach to development.

Background

Before starting the exercise, familarise yourself with the three main categories of barriers that will form the basis of the analysis: environmental, institutional and attitudinal (this is discussed in detail on page p57 of this toolkit).

Method

1. Explain to the group that this exercise will involve analysing the barriers to WASH experienced by people who are marginalised as a result of universal factors, including gender, age, disability and health status.

2. Create groups of 4–6 people.

Depending on how you are conducting this analysis, these groups can be composed entirely of people who are experiencing marginalisation (for example, disabled people, children and young people, or older people) or it could be run as an inclusive exercise where no specific selection of participants has taken place. In the latter case, you will need to ensure the specific views of different

people who are marginalised come through in the analysis (which may mean you have to direct the discussions more closely) and are recorded on separate analysis frameworks.

3. Give each group a large sheet of paper (or flipcharts) divided into two columns as per the group analysis framework on p63.

4. Ask the group to take each barrier in turn and discuss experiences of where people have encountered problems in access to water, sanitation and hygiene.

Note: Other factors can be added (for example, caste, ethnicity or religious identity) but these will be context-specific and will not be referenced in this tool; however, the process is the same.

If the group is not familiar with this type of discussion, you may need to help them by providing some examples. You could build some case studies using the examples on pp 29-41. There are more in the WaterAid publication *Play Your Part*: washmatters.wateraid.org/publications/ equity-and-inclusion-play-your-part-awareness-raising-training-guide.[21]

5. Once the group has finished discussing barriers, ask them to consider what kinds of solutions they would recommend.

6. Ask the group to record their discussion on the paper provided, indicating the barrier identified. Ensure that the marker for marginalisation is clearly identified on the paper, so that you are aware of which factor is being analysed.

   For some groups, you may need to provide support to ensure the discussion is documented (for example, where people are not confident writing, or are unable to write). If appropriate, you may want to consider enabling the group to record their responses on a voice recorder or by video (for example, using a smartphone). Just make sure that the entries they make are short and clearly referenced to each of the barriers.

7. Once the discussion has reached a conclusion, thank everyone for their participation and explain the next steps in terms of your planning process.

Discussion and follow up

The results should be analysed and collated to indicate which barriers the intervention intends to challenge. Remember there may be barriers that the intervention cannot address at this time, which should also be acknowledged in the programme plans, and in communications with the community. Being aware of the continued existence of barriers may help longer-term planning, especially in relation to advocacy.

It is very important, once you have facilitated an analysis like this, that you keep communities engaged in the process. You can use their suggested solutions as the basis for designing more inclusive interventions and for advocacy campaigning; however, communities themselves can use this information in their own planning, so it is important that you share the results and support any further discussions or work on addressing barriers as far as possible.

Variation

This tool is designed to be used in a participatory way, with members of the community who traditionally will have been excluded from discussions. Focusing attention on barriers helps prevent discussions from becoming too fixed on individual needs and starts the process of uncovering some of the power relationships that lead to exclusion. However, if the programme is new to this kind of approach and is not yet entirely familiar with people experiencing exclusion then it can be used by programme staff to generate discussions about what barriers they feel might exist, from their own observations and experiences.

If any of the barriers seem difficult to analyse or there seem to be significant gaps in experience, encourage programme staff to make contact with groups representing people experiencing marginalisation to talk through the results. Programme staff might also use their initial results to create focus group questions to use with community groups to generate more direct information.

Group analysis framework

Marker for marginalisation	Date

Barrier identified	Possible solutions
Environmental	
Institutional	
Attitudinal	

Women making soap in the village of Samabogo, Mali.

Key tool

Basic elements of a gender analysis

Adapted from March C, Smyth I, Mukhopadhyay M (1999).[25]
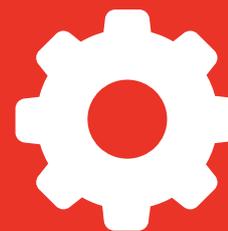
Section 3

Background

All WASH programmes will have gendered outcomes and an impact on power relations, whether intended or not. What we do and how we do it will either reinforce, neutralise or help transform gender and power relations within and outside WASH.[6] It is important to remember that all WASH programmes impact power, and that this can and does have unintended consequences, some of which might be negative.

The purpose of doing a gender analysis is to:

- Understand how a particular situation affects women and men differently.

- Understand how programme or policy actions will affect women and men differently.

- Make sure women can participate in a meaningful way in all aspects of the programme or project, including decision-making and access to the resources the programme brings and in terms of their time.

- Make the programme empowering for women.

- Avoid reinforcing gender norms that disempower women.

- Bring visibility to, and mitigate against, potential risks to women and girls (backlash, violence) from the interventions.

- Show the power dynamics based on gender.

Section 3

A gender analysis will help you to take account of:

- gender roles (the different activities of women, men, girls and boys)

- gender relations (between individuals, within families, and between groups of individuals and institutions or power-holders)

and:

- how these impact on people's lives

- how these affect patterns of access to and control over assets and resources (such as land, income and information, as well as intangible assets such as 'social status')

- how these relate to WASH

By better understanding gender-based inequalities and seeing how they look in practice in different contexts, you will be in a stronger position to design programmes and policy work that tackle these inequalities in and through WASH.

Method

Your gender analysis is an attempt to draw a 'gendered map' of social issues and relations that impact on or are linked to the WASH area that you are interested in. It is very similar to a barrier analysis and can be replaced by a good 'gender-focused' barrier analysis. However, doing a gender analysis using the key questions below or any other gender analysis tool, may give you extra depth and evidence on how WASH work affects women and men, girls and boys differently.

Questions to ask

A gender analysis can be a process of asking and answering a series of questions related to the area of WASH that you are planning to work on and disaggregating the answers by sex. You can do this in a workshop setting, working with your partners and/or community representatives to explore each question in detail. You may choose to focus on a few questions or bring in more specific questions. The overall objective is to explore any question related to context and plans from the point of view of how things might be different for women, men, girls and boys because of their gender.

1. Contextual gender analysis

These questions can include (but are not limited to):

● Who currently performs what activities and at what levels – household, community or sub-national/national?

Think about who does the productive activities (usually perceived to be things that generate an income or tangible benefit), who does the reproductive (generally associated with work in the household, raising children, cooking etc.) or community activities.

● Who currently owns, controls and manages what resources?

Consider things such as economic resources (for example, household income), productive resources (for example, land, equipment, tools, work, credit), political resources (capability for leadership, information and organisation), and time

● Who uses WASH resources and how?

● Who has ultimate control of, or makes decisions about, specific WASH-related resources at the different levels (in the household, in the community, at local and national levels)?

● Which major factors (culture, religion, politics, etc.) have influence over, and may be responsible for, maintaining gender differentiation in relation to a specific area of WASH?

● If age, class, religion, disability and sexual orientation affect a women's access, participation or status in the community, and specifically in relation to WASH?

2. Gender analysis of programme or project

Access:

● Will unequal access to project resources and services prevent the project from reaching its goals? If so, how?

Knowledge, beliefs and perceptions:

● Are there gender-related beliefs that will hinder project outcomes? What are they?

● Are there gender-related knowledge or experiences that are important to reaching project goals? (For example, can women's specific knowledge on certain issues help the project?)

Practices and participation:

⬤ Who is likely to benefit from the project/programme and how?

⬤ Who might be missed out of the project/programme and why?

⬤ Are there leadership roles that might help achieve broader participation in the project?

Space and time:

⬤ Are there gender-related roles that will prevent some people from participating in programme activities?

⬤ Does the time of the activities make them equally accessible to women and men?

Every programme and piece of work is different and therefore the focus of your gender analysis will vary depending on what you need to understand about the gendered dynamics of a particular aspect of WASH. It is best to be specific – select a few relevant areas to analyse well. You do not have to do all of it.

Where to find the answers

Look at existing data and information available from the WASH and development sectors within a particular country. Complement this with locally specific data and information. If you do not have it already, use existing engagement with the communities and people you work with to gather local data.

Consider using the following methods to inform your gender analysis:

⬤ Use relevant existing gender-disaggregated data (for example, DHS, census).

⬤ Two useful tools to inform a gender analysis (and to include in your programme) are included in WaterAid Timor Leste's *A manual for facilitating dialogue between women and men in communities: exploring the gender aspects of community water, sanitation and hygiene* (2016).[26] These can help uncover gender roles and decision-making.

　　– Women's and men's daily activities (2 hours) exercise – Module 1, Activity 1.1, p15 (Also on p93 of this toolkit.)

　　– Who does, who decides – card-sorting activity (approx. 2 hours) – Module 1, Activity 1.2, p19.

- Collaborate with women's organisations, networks and/or groups that are active in the programme area (or country) that can be involved in understanding gender-related context and norms.

- Research wider gender-related issues and problems prevalent in this locality or programme site(s), as identified by existing literature or research and consider how they link to WASH.

- Use opportunities that might already exist to do sex-separated focus group discussions with men and women (for example, with female toilet cleaners, female water engineers, women in local water user committees). Adding a few extra questions to existing plans for focus group discussions and meetings is valuable.

- Use existing programmes and work to collect evidence on the gendered aspects of WASH.

- Use relevant research from other organisations (for example, studies on violence, government strategies).

When to do it

You can conduct a gender analysis at individual programme/project level and at a macro level; for example, as part of the country strategy. It is best included from the start by writing it into the concept note, including questions to support gender analysis into your baseline. Your gender analysis will contribute to your context and/or barriers analysis. If a project is already underway, a gender analysis can be a useful monitoring process to assess how current project activities are affecting women and men differently.

How to use your analysis

The information and understanding gathered through a process of gender analysis should inform programme objectives and implementation strategy and plans. Taking these into account, policy and programme planners can identify the different (or even common) needs of women and men and then plan work accordingly.[26]

Remember: A gender analysis will help to make you aware of women's inequality in WASH access, relations and decision-making, and help you better plan the work that can be done to confront it. But a gender analysis on its own will not achieve change. Afterwards, the work must still be done.

Analysing power relations

Barriers, as we have seen, are very much linked to power relations. A human rights-based approach implies taking a much closer look at power relationships within the development process. Positive, sustainable change is unlikely to happen if rights-holders remain powerless, duty-bearers (like service-providers and public authorities) remain unaccountable, and laws and policies remain discriminatory. So we need to understand the power relationships between rights-holders and duty-bearers within a country, community and household setting, to understand why some people experience marginalisation, and work to improve accountability and responsiveness.

Analysing power relations can be complex, but a human rights-based approach involves understanding both the capacity to claim rights (inclusion) as well as knowing how rights are obstructed (exclusion). Any programme that seeks to empower and improve the participation of people experiencing marginalisation has to engage in the analysis of power on some level.

The table below illustrates four types of power that have an impact on marginalisation. People who have a good level of agency (power to); who are self-confident and aware of their rights (power within); and have good levels of social capital (power with) will be effective at engaging with those in power (power over). On the other hand, an absence of agency, self-representation and social capital perpetuates invisibility, enabling those in power to remain unaccountable and unresponsive to the needs of those unable to engage.

When it comes to preparing and planning for equality, non-discrimination and inclusion in WASH programmes you should consider each of these types of power. As you begin to map out the issues those experiencing marginalisation face because of their gender, age, disability and/or health status, make sure you seek information about how the different types of power impact on people, and include actions that help redress any negative situations.

Once you have gained a solid understanding of power relationships it is then useful to consider what change in power you would like to support. Discuss and set milestones (or indicators) with the people you are supporting, to track the change in power relations. Always make sure you build in plenty of opportunities to review the process in case you need to adjust activities as the relationships change.

Types of power	Rights-based terminology (key rights-based ideas)	What happens when this is missing?
POWER TO: power that comes from an individual's capability to act, alongside their access to resources and services	Agency	Unequal access to decision-making; few resources or assets; limited access to services; inability to make choices about one's life and actions
POWER WITHIN: power that comes from having the self-confidence, beliefs and awareness to act	Self-representation	Negative self-beliefs, led by superstitions or cultural norms; poor self-esteem and low self-confidence; little knowledge or awareness of rights
POWER WITH: the power that comes from linking with others to achieve a shared goal	Social capital	Isolation; little experience with collective action taking; few allies or supporters
POWER OVER: the power that people have in relation to institutions	Engagement	Unaccountable and unresponsive institutions; no space for influencing decisions; poorly designed and implemented policies; perpetuation of social exclusion and denial of rights

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Section 3

Bonus tool: Power analysis tools for WASH governance

WaterAid and Freshwater Action Network (2016).[26]

Available at: washmatters.wateraid.org/publications/exploring-gender-aspects-of-community-water-sanitation-and-hygiene-in-timor-leste

Designed to be used at the start of any intervention aimed at advocating the rights to WASH, this collection of easy-to-use tools will help you set out who to work with and what change you want to support.

It includes more on different forms of power and provides three steps for analysing power relationships:

1. listing stakeholders

2. mapping stakeholders

3. categorising stakeholders

Bonus tool: Exploring gender aspects of community water, sanitation and hygiene

WaterAid and Freshwater Action Network (2016).[26]

Available at: washmatters.wateraid.org/publications/exploring-gender-aspects-of-community-water-sanitation-and-hygiene-in-timor-leste

This resource contains five modules covering activities to use with communities from the planning to the handover stages. Alongside the activities there are helpful facilitation tips and guidance, based on real experiences from WaterAid's team in Timor-Leste.

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Bonus tools: Political Economy Analysis (PEA) Tool

WaterAid.[28]

Available at washmatters.wateraid.org/publications/political-economy-analysis-toolkit

Political economy analysis (PEA) is about understanding how change happens, helping to identify how best to influence change and make more politically informed decisions. The PEA toolkit provides a structured approach for analysing how change happens, from the national to the local level. It can help shape country strategies, programmes and even 'everyday' decisions.

Practitioners' guide to putting gender in political economy analysis: why it matters and how to do it.

Gender and Development Network (2018).[29]

Available at gadnetwork.org/gadn-news/2018/5/9/putting-gender-in-political-economy-analysis-why-it-matters-and-how-to-do-it

These tools will help you to consider the political landscape, which is essential for planning effectively. Political economy analysis is about understanding how change happens, helping to identify how best to influence change and make more politically informed decisions. It highlights the distribution of power and resources in a society and the implications for programmatic objectives. A gendered political economy analysis explicitly examines how gender and other social inequalities shape people's access to power and resources, and ensures that the perspectives of women inform the process, content and use of the analysis.

Section 3
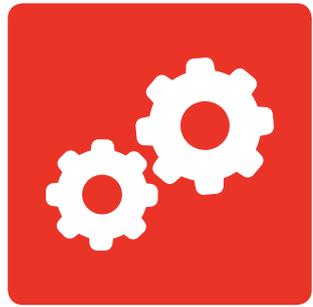
3.3 Tools for programme implementation and promoting participation

Engaging marginalised people and those at risk of marginalisation is vital for inclusive programming. It requires more than just ensuring marginalised people are present at a meeting – everyone needs to feel able to contribute, and these contributions must be taken into account in decisions. People will feel they have participated if their suggestions are acted on or at least considered.

It is important to involve all the relevant stakeholders at appropriate times in the project cycle. This can include local partner NGOs, local government officials, civil society organisations like disabled people's organisations, and members of the community. You may have to hold several different discussion groups to ensure everyone gets the chance to contribute. Participation is not only an important part of rights-based development, it also improves the relevance, ownership, access and sustainability of your work.

When planning meetings, consider the following factors:

- Time and location.
- Environmental, social and political factors.
- Power relations within and between groups.
- The issues being discussed – are they sensitive?
- Informed consent – have you asked people, including children, for their consent? Have you made sure children and those with more profound disabilities have had the opportunity to give informed consent? If this is not possible, ensure informed consent is given by their main carer/guardian, who can stay during any activity.
- Information – is it available in an appropriate format for the participants?

You may also be required to facilitate participatory discussions, recognising that certain issues may be sensitive and require more time, and perhaps more than one meeting. It is important to monitor participation over time, as it is likely to change. Barriers that you thought you might have addressed may reappear, and you might need different approaches to bring about long-term change.

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Key tool

Access and inclusion checklist

Time: 30 minutes or more.

Coe S (2014).[30]

This tool helps you ensure any meeting or event you are running is as accessible to people with disabilities as possible.

Key information

- Designed to be used by programme staff.
- Apply this tool to your preliminary plans and budgets so that you are able to make the necessary adjustments in advance.

Background

A number of barriers can prevent the inclusion of people with disabilities in mainstream work. One basic access requirement is the provision of effective access to meetings, consultation processes and events for people with impairments. When the access needs of disabled people are considered, you will find that others (such as older people, people with chronic health conditions, and pregnant mothers) will find it easier to access your events.

Are there any representative disabled people's organisations (DPOs) locally that could help you contact disabled people in the area? If you are unsure about whether your plans are accessible, ask DPOs for advice.

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Method

1. Check the location of the event

Assess physical access – Is the venue close enough for people with mobility impairments? Is it accessible to people who find it hard to walk or who use walking aids or a wheelchair? Is it on a slope or hill or does it have rough paths? Is it on the ground floor? Are there stairs? Will people be able to use facilities like toilets, cafeteria and discussion rooms independently?

Assess sensory access – For people who rely on visual communication, ensure there is enough light in the room and seating is arranged so that everyone is visible. Keep visual and auditory distractions to a minimum. This will increase everyone's participation. Check to see if you need to book sign language interpreters and always use interpreters accepted by the local deaf community. On arrival, make sure anyone with a visual impairment is given the chance to familiarise themselves with the layout of the venue.

Assess cognitive access – Ensure that the venue is easy to get to and that clear instructions are given well in advance, including place, date, time. Minimise visual and auditory distractions and on arrival ensure people have the chance to familiarise themselves with the venue and facilitators.

2. Check the format of the sessions

Assess physical access – Check that all planned activities are adapted for those with mobility constraints. Consider how someone with a mobility impairment might participate. This can affect choice of ice-breakers or role-play style sessions, which often involve a lot of moving around. If necessary, change activities. It may also mean supporting individuals or groups who may find writing difficult.

Assess sensory access – Check that all activities can be accessed by those with sensory impairments (make sure you are not relying on visual or auditory tools only). It is good practice to have everyone state their name at the start of any session – this will help people with visual impairments (and some with cognitive impairments) to become familiar with who is in the session with them. Use visual aids to clarify and confirm points but do not rely on them alone and always provide time for people to study them before moving on. Ensure you describe any visual aids and avoid simply pointing to parts of a picture or diagram while

saying things like "this shows", "here we see", "this part". Materials with large print should be available.

Assess cognitive access – Check that you keep jargon to an absolute minimum and your language is clear and well structured. Keep important points short and repeat them in different ways. Keep written material to a minimum and ensure it is in plain language (larger print with pictures is often useful).

3. Tips for large-scale events

- Publicise your event in places familiar to disabled people, for example through local DPOs.

- Give interpreters and communication support workers papers and information in advance, so they can prepare.

- Pay attention to contrast and type size in visual advertisements, for people with low vision – use larger type with good colour contrast.

- Choose a central venue that is easy for people to reach.

- Make sure the meeting space is accessible for all participants.

- Consider arranging transport for disabled participants, as inadequate public transport could prevent them from attending.

- Ask all presenters and participants what accommodations or modifications they require ahead of the event.

- If people with disabilities coming to the meeting require personal assistance support, offer to pay for the time and travel costs of the person attending with them.

- Have someone waiting at the main entrance to direct people to the meeting room.

- Make sure staff and volunteers know what accessible features are available in the building (such as ramps and accessible toilets).

- If using sign language interpreters, make sure they are positioned in a good place – check with the deaf participants if the location is suitable.

- Make sure there are no obstructions (such as chairs or tables) blocking major pathways.

- Make sure the room is well lit, especially for those with low vision or hearing impairments.

- Prepare alternative formats of materials (e.g. providing handouts on a memory stick). Make visual aids tactile (e.g. by using string for texture).

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Section 3

Key tool

Accessibility and safety audits

Time: 1 hour or more per audit

WEDC and WaterAid (2013).[31]

Further version available at: washmatters.wateraid.org/accessibility-safety-audits

The purpose of these accessibility and safety audits is to look closely at latrines and water points to:

- Identify barriers that make it difficult for some people to use the facility independently.

- Identify which features make the facility easy to use, and which features make it difficult to use for a physically vulnerable person.[viii]

- Find out if there are any safety concerns around using the facility, especially for adolescent girls, women, and children of different ages.

- Find out if there are any changes that need to be made to the facility and/or the surrounding area.

- Make practical suggestions for changes/improvements.

There are specific audits for reviewing market latrines, school latrines and community water points.[ix] Ideally, people who are regular users of the latrine or water point should be involved in discussing your results. Those with activity limitations should be involved in the audit process.

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viii   This might be a frail, elderly woman or man, a small child, a heavily pregnant woman, a wheelchair user or person who walks with a stick or crutches, someone who is visually impaired, with weak grip, a broken leg or a a limb amputation, for example.

ix   Tool adapted from references 12, 32.

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Key information

- These tools are designed to be carried out by a small team of reviewers including programme or project staff with representatives from the local community, including those with disabilities.

- These are practical tools that need to be conducted on site

- Use these tools at the planning stage to identify possible environmental barriers to the use of facilities by different members of the community.

- These tools can also be used to monitor whether a facility has been constructed in compliance with Universal Design specifications.

You will need

- One coordinator, with a team of up to four people (the tools can be used by individuals, but having representation from people experiencing marginalisation increases the impact).

- Notebook, pens, pencil, eraser, ruler

- Plain or squared paper

- Clipboard

- Tape measure

- Camera

- Waterproof document wallet (for keeping reports safe)

Method

Use the checklists overleaf to guide you through each audit process. It is worth ensuring that you are familiar with each set of questions before going into the field. The checklists detailed here are designed to provide you with appropriate questions rather than to be used to record details – your results should be recorded in your notebooks and then written up as an accessibility and safety audit report with recommended changes and action points.

The accessibility and safety audit for a market centre latrine is included here, and audits for latrines, school latrines and water points can be found at: wedc-knowledge.lboro.ac.uk/collections/equity-inclusion/general.html[33]

continues overleaf

Market centre latrine

A. General details

1. Location/address

_____

_____

_____

2. Geographic location

☐ rural ☐ urban ☐ peri-urban

☐ flat ☐ hilly ☐ wet/marshy

Additional details

_____

_____

_____

_____

3. Type of latrine

_____

_____

4. Constructed by

_____

_____

5. General description of latrine, focusing on superstructure, including materials, state of repair, cleanliness

_____

_____

_____

_____

B. Accessibility and safety

Use the checklists to note any significant barriers to access and safety. At this point it might be helpful to consult with a selection of different users to have them explain any barriers they experience. Make a note of what features make the facility difficult for some people to use independently. Use the checklists below to remind you of the kinds of features to look for, ignore any that are not relevant, and add things that are missing.

Checklist – general access to the latrines

- Distance from nearest market stall to latrine.
- What is the path/access route made of?
- Is the path wide enough for all users (recommended minimum width 90cm)?
- Is the path level and firm?
- Is the surface slippery when either dry or wet?
- Are there obstacles that make it difficult to pass, or easy to trip up (e.g. for visually impaired people)?
- Is the path clear of tree branches and bushes (up to 2m above floor level)?
- Can a visually impaired person follow the path independently (e.g. feeling surface texture, landmarks or guide rail)?
- Are slopes too steep (recommended maximum gradient 1 in 12)?
- Is the surface of the slope slippery or not?
- If used at night, is the path lit?
- How far is the female latrine located from the male latrine?

6. **Quick notes on suggested changes for improving general access to the latrine**

_____

_____

_____

_____

_____

Section 3

Checklist – access at the latrine entry point

Steps

- If there are steps, are they a manageable height (recommended maximum 15–17cm each step)? Are the steps even or uneven, firm or broken, non-slip or slippery?

- Is there a handrail for support?

- Is there an alternative entry point for wheelchair users? Check the slope is wide enough and not too steep for a wheelchair user. Does it have a guard rail?

Entrance

- Is there a flat platform in front of the door?

- Is the entrance wide enough for a wheelchair user to enter (recommended min width 80cm)?

- Is the difference in height between the inside and outside level or max 17cm?

Door

- Is the door easy to open by someone with weak hands? Is it at an appropriate height for the intended users?

- Does the door open inwards or outwards?

- Can the user enter the latrine with the door open and then close it behind them easily?

- Is the door easy to lock and unlock? Does the lock work?

- If someone faced harassment or safety risks when using the facility would they be able to get away from the facility safely?

7. **Quick notes on suggested changes for improving access into/out of the latrine**

_____

_____

_____

_____

_____

Checklist – internal design

Draw a plan to show the dimensions and layout as viewed from above.

Internal dimensions

- Internal width and length
- Distance from door to front of toilet pan/sanitation platform opening
- Width and height of toilet pan (if applicable)
- Distance on each side of the toilet pan/sanitation platform to each side wall
- Does the layout of the latrine allow enough space for a wheelchair/walking-aid user, or a user plus assistant, to use with the door closed securely? Draw the layout on a plan diagram.

Describe

- Is it a squatting or sitting latrine?
- If squatting, is there something to hold onto when squatting (e.g. rails, rope)? Note the materials, finish, position, height etc. Draw their position on the plan.
- If sitting, is the seat easy to use? Why/why not?
- Describe the seat – materials, finish, dimensions, fixed/moveable, size of hole etc.

Floor

- What is it made of?
- Is it even or uneven, firm or unstable, slippery or non-slip? Is the floor easy to clean?
- Is drainage good?

Light

- When the door is closed, is there enough light to see the toilet pan or footplate?

Windows and roof

- Do these protect users from rain/heat?
- Do they provide adequate privacy for everyone using the latrine?
- Can anyone see inside (e.g. when standing on neighbouring roofs)?

8. Quick notes on suggested changes to improve internal design

_____

_____

_____

_____

Checklist – water source and handwashing

- Is there a reliable source of water within the latrine? Is it accessible to everyone?
- Can everyone reach it from a squatting/sitting position?
- If not, what is the water source and how far is it from the latrine?
- Are anal cleansing materials always available and accessible?
- Are there accessible disposal facilities for anal cleansing materials and do they maintain hygiene?
- Is water always available for handwashing?
- Can all users easily reach the water?
- Is soap always available and easy to reach (including by small children)?
- Are the boys' and girls' handwashing facilities separate and away from each other (to allow privacy for girls managing menstruation)?
- Is there somewhere for the water to be disposed of that keeps the surroundings hygienic and prevents them becoming slippery?

9. Quick notes on suggested changes to water supply and handwashing facilities

_____

_____

_____

_____

Checklist – menstrual hygiene

- Is there a place for menstruating women and girls to wash reusable rags and/or soiled clothing?

- Is there a system for discrete disposal of sanitary protection waste?

- Is there a container with a close-fitting lid for used materials to be put into?

- Are the containers used?

- Are the containers emptied regularly?

- Is someone responsible for emptying and cleaning the containers?

- Is there an agreed and safe location for the final disposal of waste (e.g. incineration, burying or disposal into municipal waste collection systems)?

10. **Quick notes on suggested changes to disposal facilities for sanitary protection materials**

_____

_____

_____

_____

Checklist – using the latrine

Feeling safe when using the latrine

- Do all users feel safe when using the latrine? Check in particular how safe adolescent girls, women, and children of different ages feel about using it.

- Are there particular times, days or nights when they feel less safe?

- Are there any parts of the path that make users feel unsafe? Why?

- Have there ever been incidents of harassment or other safety threats when using the facility?

- Is there any way that men or boys can easily see inside the women's/girls' latrines?

- Do men hang around outside the women's/girls' latrine?

- If someone faced harassment or other safety risks when using the facility, could they get away safely?

Management and maintenance

- If there is a caretaker or cleaner?

- Do they make girls and women feel safe when they use the latrine by the way they behave?

Improvements

🔴 What would the users suggest could be improved in the facility design or management to make it feel safer to use?

11. Quick notes on suggested changes to improve feelings of safety

_____

_____

_____

C. Interviews with local users

12. People interviewed

_____

_____

_____

13. Who are the main users of the latrine (the primary users)?

_____

_____

_____

14. Are there people who would like to use it but do not do so, or who avoid using it? What are the main barriers that prevent people from using the latrine?

_____

_____

_____

15. What, if any, are the suggested changes people would like to recommend to improve access and safe use of the latrines?

_____

_____

_____

16. Any additional information or comments

_____

_____

_____

Key tool

Disability self-assessment

Time: minimum ½ day.
Adapted from Vold S (2012).[34]

The purpose of this tool is to facilitate a process of self-reflection and assessment in relation to the inclusion of disabled people in organisations, programmes and interventions. It offers the opportunity to identify specific actions that can be taken to increase participation. When undertaken by implementing partners, it can help you to see where more support might be needed.

Key information

- Designed to be used as an analysis tool by **programme and/or project staff**

- Run as an **interactive workshop** which should include all relevant staff

- Can be run as a single session (which would need a couple of hours at least) or over the course of several, shorter sessions

- Apply on a regular basis to monitor the progress being made and adjust plans accordingly

- Use the information generated by the analysis as the basis for developing short to long-term plans and action points in relation to improving the participation of disabled people in your organisation

Resources

- At least two facilitators – one to lead discussions and one to take notes and encourage participation

- A5 cards for group discussion

- Marker pens for group discussion

- Prepared flipcharts with a blank spider diagram drawn as shown in Diagram 9

- Copies of the disability checklist for each group

Tip: Before starting, ensure you have read sections 1 and 2 of this toolkit. This is to ensure you are familiar with all the definitions used to describe marginalisation, and can deal sensitively with this type of investigation. In particular, please ensure you are familiar with the **human rights-based approach** to development. It is worth ensuring that everyone in the group is familiar with this approach, so you may need to do some disability awareness training before applying this tool.

Method

It is important that these discussions are held in a way that ensures people feel comfortable and safe to speak honestly and openly. People do not always feel comfortable being critical of their own work or that of their colleagues. You should spend a little time explaining the importance of being honest and be open about the fact that this is not designed to criticise but to learn (for example reinforcing that 0 can be a great score, because then it is so easy to improve).

It can be a good idea to split up a large group into more manageable sub-groups (maximum of four people), and (if relevant) enable people to discuss things in their own language, to promote participation.

Make sure you allocate enough time, both for group discussions and presentations. This exercise can easily take a full day.

1. Clarify and explain

As facilitator, go through each section of the checklist to make sure everyone understands the questions and the task.

2. Where are we now?

Participants start by discussing each section in turn, providing a 'grade' from 0–5 for each of the questions, where 0 is none, and 5 is perfect. It is crucial that everyone in the group agrees, and that reasons and explanations for the decisions are recorded. The mode score for each section is then identified (that is, the number that appears most often). The scores are marked on a spider diagram, and 'current inclusion' is then shown as an area on the diagram (see Diagram 9).

This part of the session ends with the group(s) presenting their diagram to the facilitator (and each other), while explaining how they reached their conclusions. If different groups have markedly different results, discuss and come up with a common agreement.

3. The next steps – where to be in one year?

Each group should now re-visit their checklist. Again, taking each section in turn, discuss each question, and identify feasible and desirable actions they can take within the next year, in order to improve their 'inclusion score'. As before, they need to agree on where they want to be within one year for each of the sections, and mark this on their diagram.

This session ends as Section 2, with the group(s) presenting their results in plenary. In discussions, it is important to focus on whether the proposed actions are feasible and realistic.

4. The overall goal

If there is time, the exercise can be run a third and final time, with a focus on where the organisation wants to be in terms of disability inclusion at the end of the time period (for example, after two years, three years, or whatever is appropriate). The focus here should be on what the key steps would have to be – how would the organisation, and the programmes, look different?

Fatima, right, sits outside her home with members of her family in Mucuapa Village, Mozambique.

WaterAid / Eliza Powell

Diagram 9: Example of a spider diagram after completing all three sessions
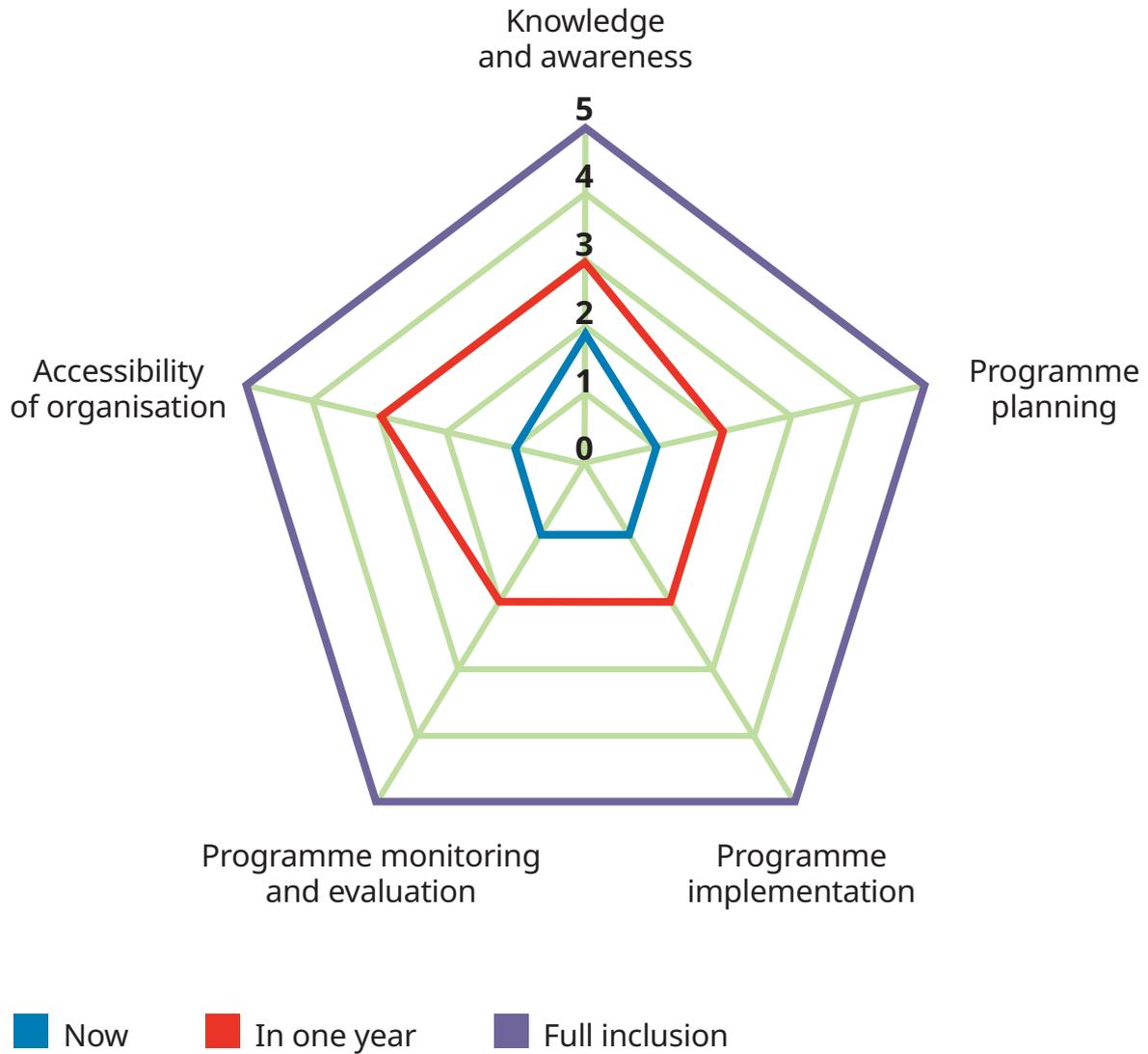
Disability checklist

1   Knowledge and awareness

a. Do staff understand what disability is? Including:

   i.   The difference between impairments and disability;

   ii. How to identify barriers

   iii. The rights of persons with disabilities (especially the UN Convention on the Rights of Persons with Disabilities)?

b. Do staff see disability as relevant to their work?

c. Are staff aware of relevant local laws and policies related to people with disabilities?

d. Does WaterAid have partner organisations who have the capacity and experience to work with disabled children and adults?

2   Programme planning

a. Is the issue of disability and the barriers faced by children and adults with disabilities included in the situational analysis?

b. Were any disabled children and/or adults consulted during the situational analysis and programme planning processes?

c. Are children and adults with disabilities included in baseline studies or area mappings?

d. Are there specific budget lines for disability inclusion and accessibility, or can this be accommodated within the budgets in other ways?

e. Do the strategic responses (programme plans) include specific actions to be taken to ensure children and adults with disabilities can access programme activities?

f. Are any disabled people's organisations identified as possible partners in the intervention?

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3 Programme implementation

a. Are children and adults with disabilities included in programme activities? ☐

b. Is advocacy being done on the rights of children and adults with disabilities? ☐

c. Are awareness-raising activities being conducted on the rights of children and adults with disabilities? ☐

d. Are disabled persons organisations included in programme implementation activities? ☐

4 Programme monitoring and evaluation

a. Is the inclusion of children and adults with disabilities in programme activities monitored and evaluated (for instance, through the collection of disaggregated data)? ☐

b. Are any disabled children or adults (or their representative organisations) involved in your monitoring, evaluation and learning activities? ☐

c. Do the staff responsible for monitoring, evaluation and learning have disability awareness training? ☐

d. Is disability specifically measured in all programme and project evaluations (for example by being referenced in terms of references, method selection and outcome/impact analyses)? ☐

5 Comprehensive accessibility

a. Are the organisation's offices accessible to people with different activity limitiations? ☐

b. Are project venues accessible to people with different activity limitiations (for example, venues for community meetings, water committees, etc.)? ☐

c. Have any disabled children or adults visited the office to provide feedback on accessibility? ☐

d. Are information and education materials available in accessible and alternative formats? ☐

e. Are recruitment policies supportive of disabled people? ☐

f. Are staff attitudes positive towards disabled people – has there been any disability awareness training? ☐

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Key tool

Women's and men's daily activities

Time: 1 hour 30 minutes

WaterAid Timor Leste (2017). *A manual for facilitating dialogue between women and men in communities: Exploring the gender aspects of community water, sanitation and hygiene*. Module 1, Activity 1.[26, x]

Available at: washmatters.wateraid.org/publications/exploring-gender-aspects-of-community-water-sanitation-and-hygiene-in-timor-leste
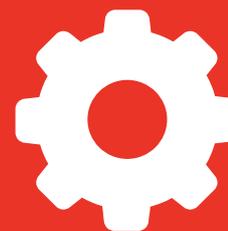
The purpose of this activity is to begin the process of building appreciation for women's daily work contributions and consider how workload might be shared more equitably.

Key information

- Designed to be used by **programme or project staff** with community-level groups

- Works well if the groups contain a range of community members of different age, gender, disability and health status

- Record the results on a blank daily activity record sheet at the end of the activity. Write the time and the different activities of women and men at each time. Note any significant differences between activities of young men compared with older men and young women compared with older women; and women or men with a disability or health condition compared with those without.

Resources

- One facilitator

- Pre-prepared flipchart versions of the daily activity record sheet (see diagram 10)

- Marker pens

- A5 cards/sticky notes for group discussion

- Daily activity record sheets for women and men

---

x   This exercise was adapted from the 24-hour clock activity in Halcrow G, Rowland C, Willetts J, Crawford J and Carrard N (2010).[35]

Facilitation guidance

Make sure all of the issues below are mentioned before ending the discussion.

- Men and women have an equal responsibility to contribute to the household work.

- Women and men recognise that women have an unfair burden of workload during the whole day. Because of this it is difficult for them to participate in programmes in the community.

- The importance of men allowing time for women to take part in any community activities.

- Women are able to understand that there should be sharing of household tasks between men and women.

- Men are also able to deeply recognise that there should be sharing of household tasks between men and women.

- Women and men able to recognise that women have equal rights to men.

If all the points above are not mentioned by participants, the facilitator will need to make the missing points very clearly at the end of the activity.

Method

1. Explain to the group that we would like to talk about the positive contribution of women and men in daily WASH activities and the expectation that women and men will contribute to the WASH programme.

2. Split into two separate groups – a women's group and a men's group.

3. Ask the women's and men's groups to think about and list all of the daily activities they do every day, from the time they wake up until the time they go to bed at night. List them all, not just those related to WASH.

4. Have the groups write each of their activities on sticky notes or cards indicating at what time of day they are done. Note, some activities may happen several times in a day – make sure there is a card for each time the activity happens.

5. Bring the two groups back together. Ask the groups to present for each other the lists of activities they do. Have them display each card on the pre-prepared flipcharts.

6. Next, ask the participants if they have any questions, comments or observations about the tasks that women do and the tasks that men do. You can prompt the discussion using questions such as:

   a. What is different between the daily life and work of women and the daily life and work of men?

   b. Is the work shared fairly and equally between the women and men?

   c. Has anything surprised you?

7. Ask the two groups to identify which of these tasks relate to WASH – they could circle or highlight the WASH-related activities.

8. Ask participants to discuss how women and men could share the household work more.

Diagram 10

Daily activity record

Time	Women	Men
Morning		
Afternoon		
Night		

Section 3
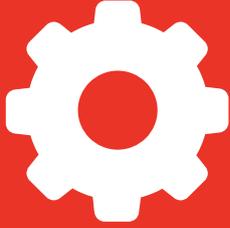
Key tool
Women and men in the past and now

Time: 2 hours

WaterAid Timor Leste (2017).[26]

Available at: washmatters.wateraid.org/publications/exploring-gender-aspects-of-community-water-sanitation-and-hygiene-in-timor-leste

The purpose of this activity is to understand that culture, including 'gender' roles and relations between women and men, can and do change over time, and that further change is possible.

Key information

- Designed to be facilitated by programme or project staff with groups of women and men at community level

- Involve equal numbers of women and men

- Should help women and men to think about what is involved in the process of change towards greater gender equality

- Best undertaken midway through projects to check the impact that changing gender roles is having on the community

- At the end of the activity, make sure you record the results of the discussions on the record sheet – *Women and men in the past and now*

Resources

- Two facilitators – one female and one male

- Pre-prepared flipchart versions of the record sheet – *Women and men in the past and now*

- Marker pens

- A5 cards/sticky notes for group discussions

- Record sheet – *Women and men in the past and now (p100)*

Facilitation guidance

- Each facilitator should read the instructions and be clear about the purpose and steps of the activity.

- Each facilitator should have suitable examples ready to share about changes in gender roles over time in their own family.

- Remember to prepare the way you will facilitate the exercise without using the term 'gender', which can provoke preconceived associations and may not be helpful.

Method

Step 1:

- Ask participants to form separate women's and men's groups with four or five in each. Give each group the pre-prepared flipcharts and A5 cards for recording their discussions.

- Explain the exercise and give examples:

  "My grandmother could not drive, or be in the military, or travel alone outside of Timor."
  "My grandfather could not sit together with women in meetings."

  Each facilitator should give a specific example from his or her own family.

- Each member of the group should think about the following question (you might find it helpful to write this up on a flipchart so people can refer to it):

  – Name one thing you can do now that your grandmother/grandfather (or mother/father) couldn't do, because s/he was a woman/man? Make sure you think about the grandparent/ parent of the same sex as you (women talk about their mother or grandmother, men talk about their father or grandfather).

- Ask participants to share the things that have changed within their own groups. Write each change up on an A5 card and place them onto the pre-prepared flipcharts in the columns marked 'now' and 'past'.

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Step 2:

Now bring the men's and women's group together. Ask the group to discuss:

● Thinking about the changes we have identified, why do you think these changes have occurred?

Write each factor on an A5 card. Some examples of factors that should be covered are:

– Change from subsistence to cash economy – means that men might be away from home and women take on men's roles at home – and women take on different kinds of paid work roles.

– Social, political, economic and other changes can interact with gender relations – for example, the shift to a 'market economy' has an impact on decision-making around land/changed rights access for women.

– Sometimes gender roles open up for women and then change again – for example, after war/resistance, women who may have taken on new roles during the conflict are often expected to go back to 'traditional' roles.

– Conflict – in times of resistance, women may also be activists and take up arms.

– Access to healthcare and/or support for disability.

Step 3:

● Explain that you would now like to discuss whether each of these changes has been *positive* or *negative*, and for whom:

– Who has gained from the change and how?

– Has anyone lost anything from the change? Who has lost and what have they lost?

● Ask the groups to mark on their card whether they believe the change is positive (+) or negative (-) and place them onto the flipchart under the column for change.

Step 4:

- When all the discussions have come to an end, bring everyone back together.

- First ask the women to share their responses about one of the changes they discussed. Ask the men if they agree.

- Next ask the men to share their responses about one of the changes they discussed. Ask the women if they agree.

- Continue asking the women and the men to give their responses to one change at a time until all of the changes have been discussed.

- Ask the group to consider whether the changes have been mostly positive or mostly negative.

Step 5:

Ask the women and men to go back into separate groups to think about the potential negative risks. Ask the two groups to think about what strategies might be developed to ensure that all changes are positive for women and men, and to avoid negative outcomes. Ask them to fill out the final column on their flipchart with ideas about how negative outcomes might be avoided.

Final discussion and debrief

Make sure the following points are covered:

- Gender roles change over time and across cultures.

- Culture itself is constantly changing.

- Be clear that there is still inequality between women and men – things have changed, but are still far from equal. We are looking at some of the things that have changed to help us to see that change is possible in gender roles. This is because they are not 'natural', instead they are based on learned behaviour.

- That change is inevitable – we need to be aware of changes that are coming and do our best to shape the future to be the way we want it to be.

- Ask participants to respond with their reactions to these ideas and what they learned from the exercise.

Record sheet
Women and men in the past and now

	Past	Now	+ change (who gains?) or – risk (who might lose)	For who?	Strategies to avoid negative outcomes
Women's group					
Men's group					

Bonus tool: Tools for more effective partnerships

Available at: washmatters.wateraid.org/partnerships

Making sure you select good partners with whom you can work on a rights-based programme agenda is key, but they might need some support in order to work effectively with new groups of people. You might find that partners are more needs-based in their experiences and skills, and less familiar with working with marginalised people. These tools can help you to map, select and work more effectively with partners at all levels.

Bonus tool: Working effectively with women and men in WASH programmes.[12]

Available at www.genderinpacificwash.info/system/resourcesBAhbBlsHOgZ mIjoy MDExLzAxLzI0LzE 5LzA0LzQyLz kzMS9XQVNIX2ZsYXNoY2FyZHNfZ mluYWw0d2ViLnBkZg/WASH_flashcards_final4web.pdf [35]

This resource contains tools for ensuring appropriate levels of participation from both women and men across the whole programme cycle, from design to evaluation. Although the focus is on ensuring women and men can contribute, the tools can also be useful for including people with disabilities, those who are older, and those who have chronic health conditions.
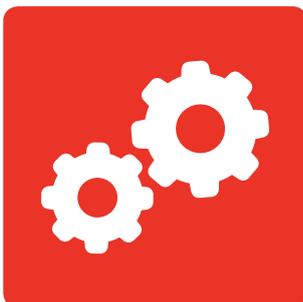
Bonus tool: Violence, gender and WASH: a practitioner's toolkit

Available at: washmatters.wateraid.org/violence-gender-and-wash-toolkit [12]

This resource is focused on issues around gender-based violence and WASH and is highly practical and participatory. It is especially useful if you want to address the issues that contribute to increased vulnerability to violence in the context of WASH.

Toolset 6 (TSA6) of this toolkit focuses specifically on marginalised people, to help you think about what additional vulnerabilities they may face.

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Section 3

3.4 Tools for programme monitoring – evaluating levels of participation

Although there are specific guidelines for programme monitoring and learning, it is important to consider equality, non-discrimination and inclusion when you are designing tools and indicators.

WaterAid/ Mani Karmacharya

Wall painting showing good hygiene behaviours, outside the girls' toilet block in Janata Higher Secondary School, Siraha, Nepal.

Key tool

The participation ladder

Time: minimum 20 minutes per person

Adapted and expanded from Halcrow G et al (2010).[35]
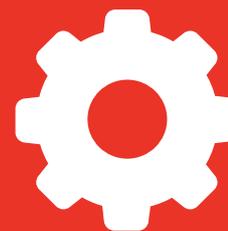
People representing all members of a community, including those experiencing marginalisation, need to be involved in monitoring. This is a really useful tool for monitoring participation over time. It assumes that participation can be assessed on a continuum from 'token participation', which essentially just means people are invited to meetings, through to 'decision-making' and eventually 'ownership and control'.

It can be used with a random or targeted selection of community members to test out how well they feel they are being included in programme activities. If used over time, it can help to show how participation changes through the activity and whether or not your efforts to increase the involvement of more marginalised people are having an impact.

The purpose of this tool is to monitor how effectively different people feel they are participating and involved in decision-making. The participation ladder diagram provided helps illustrate the different levels of participation and can be used during the interview.

Section 3

Key information

- Designed to be used by programme or project staff with households or members of groups/committees as part of regular monitoring.

- Results can be used at the time, to help adapt interventions to ensure everyone is feeling happy about their levels of participation, or they can be used to demonstrate changes over the life of an intervention, if results are compared with a baseline or control group.

- Make sure that you have a person's informed consent before conducting this interview (or that you have the informed consent of a parent/guardian or advocate/carer). That means you will need to explain the purpose of the interview, and how the information will be used.

- If you are recording names for the purpose of following individual progress during an intervention, make sure the names and ID numbers are held in a secure way so that individual details are not recognisable during data analysis.

You will need

- One facilitator per interview
- One interview questionnaire per person
- Copy of the participation ladder diagram (larger size works well)
- Clipboard
- Pens
- Waterproof document wallet (for keeping questionnaires safe)

Tip: Before starting, ensure you are familiar with the definitions used to describe marginalisation and can deal sensitively with this type of investigation. In particular, ensure you are familiar with the human rights-based approach to development.

Variation

Using the universal markers for marginalisation is the minimum requirement for this questionnaire. If you want to monitor additional context-based factors, you can add those markers into Section P, but do not remove any questions. All the other questions should remain the same.

Interview questionnaire

A1 Date:	Universal markers for marginalisation (mark all that apply):
	P2 ☐ **Disability** (do they have a lot of difficulty in walking, seeing, hearing, communicating or self-care, or find these things impossible?)
A2 ID number:	P3 ☐ **Older person** (are they 60 years or older?)
	P4 ☐ **Child** (are they 18 years or younger?)
Note: If you want to return to interview the same people, it's important you keep a record of names and ID numbers.	P5 ☐ **Chronic health condition** (do they have a health condition that impacts on their daily life which has lasted for more than three months?)
	P6 ☐ **No marginalisation marker**

P1 Gender:	L1 District:
a) ☐ Female	L2 Sub-county or ward:
b) ☐ Male	L3 Village
c) ☐ Other	*Please fill in all levels*

Q1 Are you always invited to participate in community-level meetings?

    a) ☐ Yes

    b) ☐ No

Q2 How do you feel about the overall quality of your participation during community meetings? Please tell us whether or not you feel your participation makes a difference.

Please fill in all levels

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Q3 During meetings, do you get the chance to fully express yourself?

a) ☐ Yes

b) ☐ No

Q4 During meetings, do you feel that your ideas and opinions are considered or valued?

a) ☐ Yes

b) ☐ No

Q5 If possible, please provide us with examples of where a result or action can be attributed to an input or suggestion made by you during a community meeting.

PL1 Using the participation ladder, describe which level of participation matches your experiences for **participation in community activities**.

a) ☐ 0 – no participation

b) ☐ 1 – token participation

c) ☐ 2 – active participation

d) ☐ 3 – decision-making participation

e) ☐ 4 – ownership and control

PL2 Please list what **community activities** you have taken part in during the past three months.

PL3 Using the participation ladder, describe which level of participation matches your experiences for **participation in household-level water, sanitation and hygiene activities**.

a) ☐ 0 – no participation

b) ☐ 1 – token participation

c) ☐ 2 – active participation

d) ☐ 3 – decision-making participation

e) ☐ 4 – ownership and control

PL4 Please list what **WASH activities** you have taken part in during the past three months.

End of interview – thank you for taking part

Diagram 11: The participation ladder

Refer to levels in PL3 above.

Set own rules

Make the decisions

Influence decisions

Listened to

Speak up

Attend meetings

Allowed to join (others' rules)

Ownership and control

Decision

making

Active

participation

Token

participation

Collecting data

One of the more challenging aspects of monitoring inclusion is ensuring that everyone who is tasked with collecting data does this in a way that is both consistent and sensitive. Definitions of gender, disability, age and chronic health conditions can lead to uncertainty (see Section 2). It is important that those designing, implementing and monitoring programmes understand and use the same language to define people in these groups. Otherwise, people will make their own judgements about who should be included, leading to inconsistent implementation and monitoring of activities.

If you want to ensure that inclusion is measured appropriately during external evaluations, be as specific as possible in the terms of reference you create. Ensure you define all of the marginalisation factors you want to be evaluated, and make sure the evaluators have demonstrable experience of working with these factors. For example, do not assume that because an evaluator has experience of working with women they will also be able to assess issues in relation to disability or older age. Look to ensure the evaluation team uses sensitive and appropriate methods for data collection, and be ready to assist them with ensuring accessibility.

Disability disaggregated data

A key group for whom it is very important to be consistent is disabled people. Disability is not something that can easily be identified. Simply asking if someone has a disability will not necessarily give you a true reflection of people's activity limitations (see Disability text in Section 2).

Maria in the disabled toilet cubicle at her school in Kampala, Uganda.

WaterAid/James Kiyimba

Key tool

Collecting disability disaggregated data – 'the Washington Group questions'

Time: 2 minutes per person

Washington Group on disability statistics (2018). Short set of disability questions.[36]
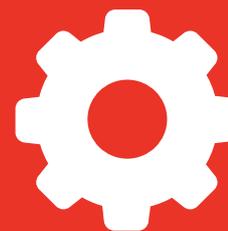
Section 3

Further information and guidance available at: www.washingtongroup-disability.com/washington-groupquestion-sets/short-set-of-disability-questions

This is the best tool to use for collecting data on disability during any monitoring exercise. It has been widely tested and validated, and a set of internationally comparable data is available against which you might want to compare your results. It is also possible that the country in which you work uses a version of this tool as part of national data collection exercises, such as household censuses or living conditions surveys.

The purpose of this tool is to enable data to be sensitively collected on disability prevalence, giving programmes a better understanding of the numbers and types of disability that are present in target populations.

Importantly, this question set (and others designed by the Washington Group) has been created to measure disability from a human rights perspective, so rather than focusing on individual medical details it concentrates on the impact of the interaction between a person's physical condition and the environment in which they live (grouped into 'domains'). This barrier approach means that it's possible to collect disability prevalence data without having to use the term 'disability' – a factor that has significantly improved the accuracy of this type of data.

The Washington Group short set of questions (often just called the 'Short set') concentrates on six core domains, and is designed to capture the majority of disabilities.

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Key information

- Designed to be used by programme or project staff as a short questionnaire.

- Can be used as a set of questions embedded within larger-scale surveys, such as a household survey or community mapping exercise. Can also be added to any questionnaire where you are recording demographic information.

- Should only be used by people who have undergone disability awareness training and have read the detailed accompanying notes and advice provided below.

- Make sure you have the person's informed consent before conducting this interview (or that you have the informed consent of a parent/guardian or advocate/carer). That means you will need to explain the purpose of the interview, and how the information will be used.

- If you are recording names for the purpose of following individual progress during an intervention, make sure the names and ID numbers are held in a secure way, so that individuals' details are not recognisable during data analysis.

You will need

- One facilitator per interview (plus data entry capacity)
- One interview questionnaire per person
- Clipboard
- Pens
- Waterproof document wallet (for keeping questionnaires safe)

Tip: Before starting, ensure you are familiar with the definitions used to describe marginalisation and can deal sensitively with this type of investigation. In particular, ensure you are familiar with the human rights-based approach to development.

Methodology

The Washington Group short set of questions are very basic and simply ask if a person experiences any difficulties in six domains, which are ranked on a scale from 'no difficulty' to 'cannot do at all'. Asking the short set of questions will take approximately two minutes, and is best done by asking the respondent directly. However, it can be administered to a proxy (for example, a parent, primary carer or teacher) by adjusting the wording of the questions.

The results produce a continuum along which everyone can be placed. It is possible therefore to record information about how many people experience 'no difficulties', 'some difficulties', 'a lot of difficulties' or 'cannot do at all', which can be helpful in considering what kinds of equity adjustments might be required.

Defining prevalence

In order to define and record disability prevalence within the population using either tool, a cut-off point needs to be set. The population identified as having a disability should include all those with difficulty in **at least one** domain recorded as 'a lot of difficulty' or 'cannot do at all'. This cut-off point will provide the most accurate representation of the population that has an impairment significant enough to cause some level of activity limitation (in other words, a disability).

Translation

Before using this tool, it is important to stress that the way the questions have been written is very specific – **to provide valid and comparable data on disability the questions must not be altered in any substantial way, including the introductory sentence** (note: changing the wording to accommodate the use/non-use of a proxy is acceptable). This is especially relevant if it needs translation. There are already a number of certified translations available on the Washington Group website www.washingtongroup-disability.com but if you need to do your own, then please use the translation protocol provided by the Washington Group (who will be able to help you).

Training

Another important consideration is that anyone tasked with delivering and interpreting these questions should first undergo a briefing so they fully understand why these questions are being asked in this way (they are familiar with the human rights-based approach to disability) and why it is important not to refer to the term 'disability' at any point during the interview. There are e-learning modules available on the Washington Group website www.washingtongroup-disability.com which can provide detailed guidance for those who are planning to carry out a survey.

Limitations

It is important to be aware that the Washington Group questions are designed simply to identify disability prevalence in populations – they are not designed to diagnose and assess disability in individuals. These questions will not provide any information in relation to causes of impairments or age of onset. Further, they will not give you any details about the impact or use of assistive technology on individual functioning. You cannot therefore use the questions alone as the basis on which to develop programme interventions aimed at the inclusion of disabled people.

However, what they will do is provide information on the extent to which disability (impairments and severity) is likely to be a factor in marginalisation, and enable you to focus more on identifying and mitigating the barriers that might be excluding some people from accessing services. An important follow-up activity is to use a **barrier analysis tool** (see p59).

If your programme wishes to go into more detail, assessing individual impairments and the impact they have on functional ability, then you will need to use a disability assessment tool. We recommend the World Health Organization's **Disability Assessment Schedule** (WHODAS 2.0) which has been specifically created for carrying out disability assessments within a human rights framework. A copy of the assessment tool is available for download from the WHO website www.who.int/classifications/icf/en

Washington Group short set of questions

A1 Date:	A2 Name of enumerator
A3 ID number: Note: If you want to return to interview the same people, it's important you keep a record of names and ID numbers.	L1 District: L2 Sub-county or ward: L3 Village (state all):
P1 Gender: a) ☐ Female b) ☐ Male c) ☐ Other P1 Age:	**Informed consent:** Hello, I am interviewing on behalf of XX. I would like to talk to you today and ask for your permission to interview you. Feel free to consult other people if needed before you respond. I will record your answers to use them in our research but will not mention you by name or share your personal details with anybody outside of the team. When we write up the data and results from this survey we will ensure that it is not possible to identify you as the person who has provided these answers. Is that acceptable?

Introductory phrase: Do you have difficulties doing certain activities?

	(a)	(b)	(c)	(d)
SS1 Do you have difficulty seeing, even if wearing glasses?	☐	☐	☐	☐
SS2 Do you have difficulty hearing, even if using a hearing aid?	☐	☐	☐	☐
SS3 Do you have difficulty walking or climbing steps?	☐	☐	☐	☐
SS4 Do you have difficulty remembering or concentrating?	☐	☐	☐	☐
SS5 Do you have difficulty (with self-care such as) washing all over or dressing?	☐	☐	☐	☐
SS6 Using your usual (customary) language, do you have difficulty communicating, for example understanding or being understood?	☐	☐	☐	☐

(a) No difficulty **(b)** Some difficulty **(c)** A lot of difficulty **(d)** Cannot do at all

End of questionnaire

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Variations

There are other Washington Group tools that are useful in different circumstances. There is an extended set of questions for use with adults (age 18 or older) which captures a wider range of domain limitations that can be useful for planning accessible structures and services (and complement the access and safety audit tools).

If you want more detailed information in relation to disability prevalence among children, there are two specially designed tools: the Child Functioning tool for age 5–17 years, and the Child Functioning tool for age 2–4 years. It is more difficult to identify disability in children, especially young children, so the standard short set of questions is less reliable for anyone under the age of 18 (it will tend to underestimate the numbers). If your programme is specifically targeted at children and young people, you should use the Child Functioning questions (CF 5–17 years) rather than the short set. They take a little longer to administer (about 10 minutes) and, again, training would need to be provided to anyone tasked with administering or interpreting the tool.

New tools are being developed all the time so it is worth checking the Washington Group website to see what is currently under development.

For more detailed guidance, information, support and other data collection tools, visit www.washingtongroup-disability.com

Monitoring indicators

In general, monitoring indicators need to reflect some important principles, for example:

- **Participation** of people experiencing marginalisation in appropriate ways, such as their active involvement in WASH programmes with responsibilities. This could include involvement in committees, but also the extent to which they take on leadership roles and have an influence in decision-making.

- **Inclusive technology** to ensure WASH services are accessible, used by everyone, and continue to be delivered to a high quality.

- **Mapping** to monitor the equitable distribution of services, and expose weaknesses where certain communities or members within communities may have been left out.

- **Numbers of the most marginalised people** lacking access and use of facilities.

🔴 **Barriers (attitudinal, institutional and environmental)** to identify the causes of exclusion, and to ensure the WASH rights of all are being met.

Monitoring indicators should be carefully selected, and comprehensively monitored to ensure programmes remain inclusive over time; sometimes barriers can re-emerge or new ones are created. In addition to the above examples, others may be necessary depending on the findings from situation, barrier and power analyses, and the subsequent aims and objectives of the programme.

Participatory monitoring helps ensure that the programme is inclusive, by involving those who initially may have faced barriers, and who can then monitor whether these barriers are being addressed.

Endline (and midline) evaluations can be a great opportunity for finding out how well your programme has been able to address the barriers and power issues associated with marginalisation. Make sure that anyone tasked with carrying out these evaluations (especially if they are externally contracted) is familiar with a rights-based approach and understands the way you define marginalisation, barriers and inclusion.

WaterAid/ Laura Summerton

Keo Vannary serving porridge at her roadside cafe, Pursat, Cambodia.

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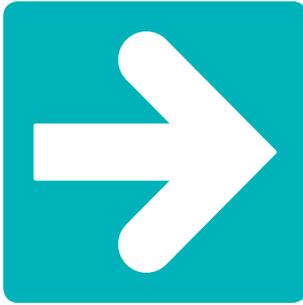
Conclusion

This toolkit is designed to help you practically and progressively tackle and challenge inequalities in WASH by:

a) refreshing your understanding of what marginalisation and exclusion look like and how they relate to WASH

b) reminding you of WaterAid's approach and priorities

c) repackaging in one easy-to-use toolkit some of the tools and techniques that can help you to understand and then tackle issues of exclusion, discrimination and inequality in your WASH work.

There is no easy or magic solution for achieving inclusion and equality. It is an ongoing process that requires commitment of time, resources and will. Inclusion cannot be limited to just one part of your programme or achieved through a one-off activity. It requires a combination of activities and processes, and a willingness to learn from the experience of the people who are marginalised.

This includes, but is not limited to:

- uncovering and challenging any negative and discriminatory attitudes among staff, partners, communities and governance institutions

- working with more rights-based partners and collaborating with groups such as disabled people's organisations and women's groups to ensure our work is genuinely helping to positively transform their experiences of WASH

- using the breadth of our programme portfolio – work that focuses on water, sanitation and hygiene; our work in urban, rural or disaster-prone geographies; the work that integrates WASH with health, education and other areas of development – to see what we can do differently or better to overcome the barriers to WASH for those furthest away from power and influence.

Good luck in your work. Remember to keep sharing with and learning from your colleagues across WaterAid and the sector. Our approach should never be static, but rather continue to broaden and deepen depending on the needs of the people who we work for – those who are most excluded from their rights to water, sanitation and hygiene.

This diagram shows how this toolkit fits with WaterAid's strategies, policies, frameworks and guidelines.

WaterAid Global strategy

Programmatic approach (Our approach / How we work)

Accountability framework (Our commitments)

Quality standards & programme policies

Programme frameworks & delivery models/approaches

Guidelines / toolkits / resources

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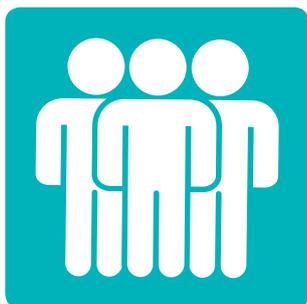
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Many others have contributed their ideas and experience. We hope the toolkit will help to inspire others to continue the struggle to ensure that everyone has water and sanitation as human rights by 2030.

WaterAid

Julianne and her daughter Zara, 4, at their home in Ambatoantrano village, Madagascar.

We work with national stakeholders and communities to improve access to sustainable water and sanitation services as human rights, and to promote good hygiene behaviour.

We campaign to bring about a world where these essentials are normal for everyone, everywhere by 2030.

Cover: Rhoda Chikanda speaking on behalf of her community at Joint Parliamentarian Committee meeting with the people of Kapyanga, Malawi. WaterAid/ Dennis Lupenga

This toolkit gives practical guidance and support on reducing inequalities in your programme and advocacy work.

It introduces the most important equality, non-discrimination and inclusion principles, and includes practical activities, tools and checklists for you to apply to your work with partners and communities.

WaterAid 2018

Download the guide at washmatters.wateraid. org/equity-non-discrimination-inclusion-toolkit

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