

WASH and gender equality

A lack of access to water, sanitation and hygiene (WASH) affects women and girls disproportionately, due both to biological and cultural factors. In addition to meeting women's needs around menstrual and sexual and reproductive health, WASH is also essential for their social and economic development, contributing towards gender equality and the realisation of their rights.

In any post-2015 framework, decision-makers must address the persisting inequalities between women and men, embracing the human rights principles of equality and non-discrimination to ensure universal access to water and sanitation for all women and girls everywhere¹.

Links between WASH and gender equality²

The role of WASH in maternal and newborn health

Countries with high maternal mortality rates are those where the burden of infectious diseases remains high, and health information and primary healthcare are difficult to access. Improving access to WASH, and providing expectant mothers with basic services and accurate hygiene information, is vital to reduce maternal mortality rates and meet global goals for ending preventable child deaths³.

Collecting and carrying water while pregnant can cause difficulties in pregnancy and other reproductive health consequences, such as uterine prolapse⁴. Women who lack safe water are more prone to WASH-related illnesses, such as hookworm infestation, which, when occurring during pregnancy, is linked to low birth weight, slow child growth⁵ and hepatitis⁶. Emerging evidence suggests that giving birth in a setting without safe drinking water or sanitation has a negative impact on the health and survival of both mother and baby⁷.

Hygiene promotion and supplies are key to safe delivery and breastfeeding. A lack of safe drinking water can be fatal for babies who must have infant feeding formula to prevent the transmission of HIV. Lack of safe WASH causes up to 50% of under-nutrition worldwide⁸, so improved access to safe WASH is pivotal for good nutrition during the first 1,000 days of life. This is a critical period for ensuring health and physical and cognitive development later in life⁹.

The role of WASH in education for girls and young women

Lack of access to WASH at home and school has a negative impact on children's education, particularly for girls. Opportunities for learning are lost when children have to spend time collecting water or finding a safe place to defecate or urinate in the open; this is especially a problem for girls due to their additional burden of menstrual

hygiene management (MHM). A lack of access to drinking water and toilets during the school day affects the learning environment for both students and teachers.

Adolescent girls in particular are disinclined to use school toilets that are dirty or lack privacy, especially when they are menstruating, and this affects their attendance.

Because menstruation is a taboo subject in many cultures and has negative connotations attached to traditional beliefs, effective education programmes need to be supported by fully accessible, child-friendly and gender-segregated WASH facilities. Without them, the resulting stigma, learned at a young age, exacerbates the challenges of managing menstrual hygiene in societies where there are no safe, private toilets with a water supply¹⁰.

Raising awareness about MHM among school-age girls and boys can reduce fear and discrimination. This is achieved by replacing the silence and shame of menstruation with pride and confidence; equipping women and girls with the knowledge and means to manage their menstruation hygienically and with dignity, and providing means for the safe disposal of menstrual waste¹¹.

The role of WASH in preventing violent behaviour towards women

Women are often vulnerable to harassment or violence when they have to travel long distances to fetch water, use shared toilets, or practise open defecation. Women and girls often wait until nightfall to defecate, which increases the risk of assault. Many choose to 'hold it' or limit their consumption of food and drink to delay the need to relieve themselves, which can increase the chance of urinary tract infections. The shame and indignity of defecating in the open also affects women's self esteem, as does a lack of water for washing clothes and personal hygiene¹².

The role of WASH in empowering women economically

Women and girls perform most of the unpaid labour associated with WASH in households and communities. This reduces the time they have available for education, economic activities and leisure. A lack of economic independence compromises their empowerment and perpetuates gender inequality.

With improved access to WASH, women have more time to undertake income generating activities. WASH programmes also provide women with the water needed to carry out economic activities and can create opportunities for paid work. Easier access to water can, for example, enable a woman to water a kitchen garden, improving her family's food security and providing an opportunity to earn money by selling the surplus. Women's involvement in decision-making about water resources and in WASH programmes is critical to their empowerment, but it is important that they are not overburdened with additional unpaid work on top of their existing responsibilities.

The role of WASH in realising women's rights

Water and sanitation are recognised as fundamental human rights, incorporated in the International Covenant on Economic Social and Cultural Rights. The rights to water and sanitation require that these basics are adequate, accessible, safe, acceptable and affordable for all without discrimination, and violations of these constitute a violation of women's rights.

Participation is key to claiming rights. A lack of informed participation by women often results in WASH services that are inappropriate, inaccessible and unaffordable¹³. Programmes that include women at all stages of planning, implementing and monitoring are more efficient, effective and sustainable than those that do not prioritise equitable participation and decision-making.

WASH programmes need to work in collaboration with other initiatives that address discrimination and women's rights violations. Programmes must strengthen the connections between the rights to water and sanitation and other rights, including to health, education, food, work, land, freedom from violence, and the right to information. Equipping people with knowledge of their rights and the skills to undertake advocacy for themselves, by themselves, really can shift the balance of power.

Addressing gender inequality post-2015

While progress has been made towards achieving the Millennium Development Goals (MDGs), this has not yielded equitable results. Addressing this must be a priority for the post-2015 framework. For poor women in poor places, sizable gender gaps remain¹⁴. While they stem from gender-based discrimination and human rights violations, these disparities are even larger when poverty combines with other forms of exclusion, such as remoteness, ethnicity, disability, chronic illness and age¹⁵.

For many women, multiple disadvantages mean that they are unable to use water and sanitation services; these barriers may be physical, institutional (such as a lack of information and participation in policy and programme planning), attitudinal (such as stigmatisation), or economic (they may be unable to pay for services). It is vital to focus on reaching the most marginalised populations, providing adequate, affordable and accessible WASH services, and challenging discriminatory legal frameworks, policies, practices and beliefs that prevent some people from using facilities.

Within the WASH sector, significant work has been conducted by the WHO/UNICEF Joint Monitoring Programme (JMP) Post-2015 Equity and Non-discrimination Working Group expert panel to present a series of targets and indicators that include addressing

specific issues of gender inequality in WASH provision, such as menstrual hygiene management¹⁶.

WaterAid's vision is of a world where everyone, everywhere has access to safe water, sanitation and hygiene by 2030. We are calling for an integrated approach to delivering this vision. With specific reference to WASH and gender equality, the post-2015 framework should:

- Ensure targets focused on eliminating gender inequalities and WASH are represented under a health goal with a target to increase access to toilets and other sanitary facilities for women of reproductive age and girls.
- Include targets and indicators in a standalone water and sanitation goal focused on reducing the time spent by women and girls collecting water and finding a place to defecate.
- Include specific targets in a standalone water and sanitation goal focused on delivering improvement in hygiene, particularly handwashing and menstrual hygiene management.

WaterAid's post-2015 vision

WaterAid's vision for post-2015 is an ambitious new development framework unifying poverty eradication and sustainable development objectives, supported by a renewed global partnership ensuring effective resource mobilisation and mutual accountability for progress achieved. To ensure that everyone, everywhere has access to safe water, sanitation and hygiene (WASH) the framework should:

1. Include a dedicated goal on water and sanitation and set ambitious targets to achieve universal access to WASH by 2030 that prioritise the following¹⁷:
 - No-one practises open defecation.
 - Everyone has safe water, sanitation and hygiene at home.
 - All schools and health facilities have safe water, sanitation and hygiene.
 - Water, sanitation and hygiene are sustainable and inequalities in access have been progressively eliminated.
2. Recognise that universal access to water, sanitation and hygiene is an essential component of an integrated approach to tackling poverty, hunger, ill-health and inequality.

3. Recognise that achieving and sustaining universal access to WASH depends on establishing accountable systems for equitable and sustainable management of water resources.

Endnotes

NB This paper is directly based on a WaterAid and Water Supply and Sanitation Collaborative Council (WSSCC) publication: WaterAid and WSSCC (2013) *Women and WASH: How can water, sanitation and hygiene help realise women's rights and gender equality*. It has been produced with the kind cooperation of the publishers.

¹ Satterthwaite M et al (2012) *JMP Working Group on Equity and Non-discrimination final report*. WHO/UNICEF Joint Monitoring Programme

² By gender equality, we mean that girls, women, boys and men have equal rights, responsibilities and opportunities.

³ World Bank (2012) *World development report on gender equality and development*

⁴ Sultana F and Crow B (2000) Water concerns in rural Bangladesh: A gendered perspective. In Pickford J (Ed) *26th WEDC Conference – Water, Sanitation and Hygiene: Challenges of the Millennium, Dhaka, Bangladesh*, pp 416-419

⁵ Beach et al (1999) Assessment of combined ivermectin and albendazole for treatment of intestinal helminth and wucheraria bancrofti infections in Haitian schoolchildren, *American Journal of Tropical Medicine and Hygiene*, no 60, pp 479-486

⁶ WHO/UNICEF (2005) *Water for life: Making it happen*. WHO/UNICEF, Geneva

⁷ Ali T, Fikree F, Rahbar M and Mahmud S (2006) Frequency and determinants of vaginal infection in postpartum period: A crosssectional survey from low socioeconomic settlements, Karachi, Pakistan, *J Pak Med Assoc*, no 56, pp 99-103. See also: Darmstadt G, Hasan M, Balsara Z, Winch P, Gipson R and Santosham M (2009) Impact of clean delivery-kit use on newborn umbilical cord and maternal puerperal infections in Egypt, *J Health Popul Nutr*, vol 27, no 6, pp 746-54

⁸ World Health Organization (2008c) *Safer water, better health: Costs, benefits and sustainability of interventions to protect and promote health*. Available at: http://whqlibdoc.who.int/publications/2008/9789241596435_eng.pdf

⁹ Bhutta Z A, Ahmed T, Black R E, Cousens S, Dewey K, Giugliani E, Haider B A, Kirkwood B, Morris S S, Sachdev H P S and Shekar M for the Maternal and Child Undernutrition Study Group (2008) Lancet series on maternal and child undernutrition: What works? Interventions for maternal and child undernutrition and survival, *Lancet*, no 371, pp 417-40

¹⁰ Fisher J (2006) *For her it's the big issue – Putting women at the centre of water supply, sanitation and hygiene*. WSSCC and WEDC

¹¹ House S, Mahon T and Cavill S (2012) *Menstrual hygiene matters – a resource for improving menstrual hygiene around the world*. WaterAid et al

¹² International Women's Development Agency and WaterAid (2012) *Now we feel like respected adults – Positive change in gender roles and relations in a Timor L'este WASH programme*. ACFID

¹³ Freshwater Action Network (2010) *Rights to water and sanitation, a handbook for activists: Using a human rights approach for advocacy on access to water and sanitation*

¹⁴ UN (2010) *Resolution adopted by the general assembly, 64th session, agenda item 48*

¹⁵ Special Rapporteur on the Human Right to Water and Sanitation

www.ohchr.org/EN/Issues/WaterAndSanitation/SRWWater/Pages/SRWWaterIndex.aspx

Further resources can be downloaded from: www.inclusivewash.org.au/resource-library-gender-women-and-girls

¹⁶ WHO/UNICEF Joint Monitoring Programme (2012) *Final report of the WHO/UNICEF JMP Post-2015 Equity and Non-discrimination Working Group*. Available at:

www.wssinfo.org/fileadmin/user_upload/resources/JMP-END-WG-Final-Report-20120821.pdf

¹⁷ WHO/UNICEF Joint Monitoring Programme shared vision for progressive realisation of the human right to water and sanitation. See www.wssinfo.org/post-2015-monitoring/overview/ for full technical proposals for post-2015 WASH targets and indicators.