

sustainable sanitation alliance

SuSanA factsheet

Integrating a gender perspective in sustainable sanitation

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1 Summary

The overall objective of this factsheet is to provide background information on the needs and methods required to integrate gender perspectives into sustainable sanitation. Access to safe sanitation is a basic human right for all women, men and children. Our objective is to offer guidance to those seeking to incorporate gender into the sanitation sector.

Integrating gender in sanitation requires comprehensive information about the gender specific local context provided by assessments such as socio-economic analyses and impact assessments of policies and programmes on females. Project managers should consider a gender balance in project teams and make budget allocations for gender strategies. The involvement of women in leadership and management training programmes and adequate support to enable women to be involved in the operation and maintenance of sanitation facilities needs to be integrated into sanitation projects.

Key messages from this factsheet are:

- Gender equality is an integral part of sustainable sanitation meaning that the sanitation system should consider the differing needs and should be suitable for women, men and children.
- Women are often involved in water, hygiene and sanitation but lack support to deal with these issues
- Planning, design and implementation of a sanitation programmes should not be regarded only as a male domain but can and should be equally undertaken by women.
- There is a widespread lack of suitable sanitation facilities compounded by a lack of privacy. This increases female vulnerability to violence and impacts their health, wellbeing and dignity.
- Data regarding gender needs should be disaggregated to give recognition and acknowledgment to women's needs and priorities.
- There is an unspoken but grave situation in the everyday lives of millions of school girls and women that make it difficult for them to walk freely and in a comfortable manner, to go to the toilet or to manage their menstruation sustainably.
- The special needs of menstruating girls and women need to be considered in appropriate sanitation programme designs by providing adequate female hygiene materials, discreet disposal and washing facilities.

2 Background on gender and sanitation

Access to safe and sustainable sanitation is essential to ensuring health and wellbeing. It reduces the burden of treating preventable illnesses and is a prerequisite for ensuring education for all and the promotion of economic growth in the poorest parts of the world. Access to adequate sanitation is a matter of security, privacy and human dignity.

Integrating a gender perspective into the sanitation sector does not only require addressing differences in gender relations, it also means uncovering and challenging uneven hierarchical structures based on gender. Consequently, a gender-sensitive approach seeks to equalise the uneven distribution of sanitation roles and responsibilities and the access to safe and appropriate facilities by considering the basic needs of all men, women and children.

One of the most significant divides between women and men, especially in developing countries, is found in the sanitation and hygiene sector. The provision of water, hygiene and sanitation is often considered a woman's task. Women are promoters, educators and leaders of home and community-based sanitation practices yet their own concerns are rarely addressed. Societal barriers often restrict their involvement in decisions regarding sanitation facilities and programmes (GWA, 2006).



Figure 1: Sanitation approaches can be more empowering if both women and men are involved in planning and training: Sanitation workshop in Central Asia (source: F. Jorritsma, WECF, 2010).

In many societies, women's views, in contrast to those of men, continue to be systematically under-represented in decision-making bodies (ADB, 1998). This lack of a

participatory approach is closely related to the uneven power structures in decision-making processes that characterise these societies and the sanitation sector in particular. Where sincere efforts have been made to integrate gender perspectives into the water and sanitation sector, these have unfortunately often failed to address strategic gender needs (Coles and Wallace, 2005).

Women suffer more than men when there is a lack of appropriate sanitation facilities. Women suffer more indignity from defecating and urinating in the open than men and in some countries are regularly at risk of assault and rape while going to the toilet (COHRE et al., 2008). In many countries, hygiene conditions in public toilets are poor and spread infectious diseases. In the absence of sanitary facilities or due to cultural reasons, women in many countries often have to wait until dark to go to the toilet or the bush. As a result, these women try to drink as little as possible during the day and often suffer from associated health problems such as urinary tract infections, chronic constipation and other gastric disorders (GWA, 2006; Milhailova and Diaz, 2007).

In rural areas, men avoid the stench of unimproved pit latrines and relieve themselves outside whilst women remain dependent on the pit latrines. Often in urban areas, women and girls face innumerable security risks and other dangers when they use public facilities which are open to both men and women. Research in East Africa indicates that safety and privacy are women's main concerns when it comes to sanitation facilities (Hannan and Andersson, 2002). Without safe sanitation, women's dignity, safety and health are at stake.

3 What does gender mean?

Gender identifies the **social relationships between women and men**. Gender is socially constructed; gender relations are contextually specific and often change in response to altering circumstances (Moser, 1993). Men and women fulfil a number of concurrent social roles and social relations that are influenced by other people. Race, ethnicity, age, culture, tradition, religion and an "individual's position" (wealth, status) also contribute to differentiating the experience of being a man or a woman within a particular society. Gender identity and gender roles are the result of learned behaviour and given the right impetus and motivation can change. The challenge in this context is that men's and women's gender roles determine their access to - as well as their power and control over - adequate water supply, sanitation facilities and hygiene. Unchallenged, these roles can continue to have a direct negative effect on communities, households and individuals, in particular women and children.

Gender equality (or equity) means equal visibility, opportunities and participation of women and men in all spheres of public and private life. Gender equity is often guided by a vision of human rights that incorporates acceptance of the equal and inalienable rights of women and men. Gender equality is not only crucial for the wellbeing and development of individuals but also for the evolution of societies and the development of countries. However, gender equality has not yet been achieved. Male

violence against women continues to be a cause of death and suffering worldwide. There are 600 million illiterate women compared to 320 million men worldwide. In South Asia and Sub-Saharan Africa in particular, girls have a lower chance of completing primary education compared to boys. Although important progress has been made, for example in respect of universal school enrolment, and women's access to the labour market and the political sector, gender inequality is still one of the most pervasive forms of inequality worldwide (UNFPA, 2005; UN, 2007; UN, 2011).

4 International commitments and goals for gender equality in relation to sanitation

Millennium Development Goal (MDG 3) calls for the promotion of gender equality and women's empowerment. Four indicators are used to monitor progress: education, literacy, wage employment and political representation.

In addition to the millennium development goals, resolutions, comments and expert reports recognising the right to water and safe sanitation there are some specific international instruments relevant to promoting a gender perspective within the sanitation sector (WEDO, 2003):

The Convention on the Elimination of all Forms of Discrimination against Women (CEDAW) (1979) is the most important legally-binding international instrument for the protection of women's rights. Addressing the living conditions of women in rural areas, the CEDAW states in article 14(2) (h), that parties shall ensure that women have "the right to enjoy adequate living conditions, particularly in relation to housing, sanitation, electricity and water supply, transport and communication." The CEDAW already asserts the right of rural women to water (article 14). However, because women often lack land rights, they are unable to assert their water rights.

The **UN Resolution** of the 23rd Special Session of the **General Assembly**, New York in June 2000 emphasised "Further actions and initiatives to implement the *Beijing Declaration and Platform for Action*". Actions should be taken by governments at the national level to: "Ensure universal and equal access for women and men throughout the life-cycle to social services related to health care, including education, clean water and safe sanitation, nutrition, food security and health education".

Human rights¹: In July 2010, the UN General Assembly recognised for the first time that access to water and sanitation is a basic human right. This right was confirmed in a resolution by the Human Rights Council in October 2010 and was declared legally binding. The content of the human right to water and sanitation is still under discussion. Five normative criteria (availability, accessibility, quality/safety, affordability, acceptability), and five cross-cutting ones (non-discrimination, participation, accountability, impact and sustainability) are used to define this right.

¹See also a compilation of relevant documents here: www.susana.org/lang-en/library?view=ccbtypeitem&type=2&id=1331

5 The role of women and men in sanitation

In most countries, cleaning toilets is primarily the responsibility of women, for any type of sanitation system. Men are generally responsible for the construction and technical maintenance of the sanitation facility (e.g. digging and repairing). In many households, women are responsible for making sure there is sufficient water for sanitation purposes which may involve carrying water for long distances. They are also involved in pit emptying activities; although this is a burden for men as well (anecdotal evidence suggests that e.g. in India and Pakistan, more women than men have to empty pits whereas in countries in Sub-Saharan Africa it is the other way around). Either way, the conditions under which such manual pit emptying is carried out are usually appalling, regardless of whether it is men or women doing the work.

In the design, location, selection and construction of sanitation facilities, too little attention is paid to the specific needs of women and men, girls and boys as well as their respective roles in terms of maintaining the facilities. Sanitation programmes, like many other development programmes, often assume a high degree of gender neutrality. This results in gender-specific failures such as toilets with doors facing the street in which women feel insecure, school urinals that are too high for boys, a lack of disposal facilities for female sanitary materials and pour-flush toilets that increase the workload of those women who have to carry the water needed for the toilets.

Sanitation blocks are sometimes used for other purposes as well such as washing and drying clothes and provision of shelter from rain. Despite the role of women in hygiene and sanitation at the household level, many programmes presume that it will be the men who will be more suited for such entrepreneurship. However, both women and men can benefit from income generation through sanitation related businesses if a sustainable sanitation chain system approach is implemented. Businesses may include production of sanitation hardware, installation of sanitation systems, operation and maintenance (O&M), promotion and advertisements, emptying of toilets, collection and safe disposal of faecal matter, training and education and reuse of nutrients, water, organic matter and biogas.

A combination of unequal and uneven power and legal structures based on discrimination and a lack of political commitment often leads to the neglect of women's needs and hinders their involvement in sanitation development and planning. The majority of the world's 1 billion people living in poverty are women and the feminisation of poverty, particularly among women-headed households continues to increase in a number of regions. Land tenure is a particularly significant stumbling block. It is generally estimated that men's landholdings average three times those of women. Women represent fewer than 5 percent of agricultural landholders in North Africa and Western Asia and an average of 15 percent in sub-Saharan Africa (IFAD, 2011). As a result women often lack access to related assets and resources for toilet construction (COHRE et al., 2008).

Experiences with gender aspects in water and sanitation projects in Armenia, Bulgaria, Romania, Ukraine and Mexico showed that stronger involvement of civil society, women and minority groups in decision making on sanitation and wastewater systems is necessary to make a breakthrough and to enhance participation and capacity building (Milhailova and Diaz, 2007).



Figure 2: School toilet in Tanzania: The special needs of girls and women during the time of menstruation – such as privacy, facilities for disposal of sanitary materials – must be brought to the forefront (source: M. Sommer, 2009).

6 Methods to assess the role and impact on females in sanitation

Although at the level of policy formulation there is no shortage of support for gender inclusion by official agencies and governments, the improvements in gender equality in the water and sanitation sector in a number of countries is still slow.

This lack of progress is partly due to the general absence of specifically collected data from and about females in water and sanitation. This lack of data causes issues such as:

- Difficulties to adequately *measure change over time*, and the impact interventions have had on gender equality and whether such changes contribute towards the Millennium Development Goals (MDGs) or other goals.
- Difficulties to make effective *analytical assessments* of the comparative situation of women and men.
- Sound policy formulation is hampered by the lack of information about the gender-related realities of water and sanitation access as well as the need and use of sanitation in private and public sectors. Gender-disaggregated data is crucial when assessing the effects of policy measures on women and men.

Monitoring data is essential in evaluating and tracking the pivotal role of women in development and understanding the specific contribution of women in society (UN-DESA, 2009). A closer definition of the gender-disaggregated indicators needed for data collection can be found in UN-DESA/UNW-DPC (2009).

7 Special needs of girls and women during menstruation

The disposal of female hygiene products needs special attention as tampons, pads, cloths or rags can lead to blockages in pipes (in the case of water-flushed toilets and septic tanks) or make reuse of excreta more difficult (if disposed in the faeces vaults of urine diversion dehydration toilets). Other hygiene-related needs also need to be taken into consideration. Therefore, wrapping materials and adequate bins to enable discreet disposal should be provided. This is particularly important in public places and in schools (WECF, 2006; Wendland and Dankelman, 2008; Sommer and Kirk, 2008).

Box 1: Menstrual hygiene management (MHM) in Magadi Secondary School, Kenya, a town in the Great Rift Valley, located southwest of Nairobi

Menstrual Hygiene Management is an enormous challenge for the 45 girls in Magadi Secondary School. The number of girls receiving education is very low in Magadi as the Maasai tribe restricts girls from attending formal education.

Most of the girls at Magadi Secondary school don't have money for sanitary towels therefore most do not go to school when they are having their period. Even if the girls get sanitary towels, they have no underwear. They therefore use old pieces of rags and jeans to hold the sanitary towels up. The boys regularly tease the girls when their clothes are stained.

Most of the girls drop out by the time they are 15 because they already have 1-2 children. Another difficulty is that most undergo Female Genital Mutilation (FGM) when they are about 13 years old. Therefore if alternative solutions such as menstrual cups are to be incorporated in MHM, this should be combined together with awareness raising, education and addressing the cultural factors that form barriers when including the girls in finding sustainable solutions to address MHM.

The girls face further challenges in disposing the sanitary towels. Before, they used to litter the sanitary towels all over the school compound behind bushes. The teacher then told the girls to collect all the sanitary towels weekly and they would collectively burn them behind the school.

The solution here should include sustainable approaches to addressing MHM such as menstrual cloths and cups. Educational materials on MHM that can be understood by the girls should be incorporated in the school curricula. In addition, all stakeholders need to be involved in the decision making processes so that cultural barriers that negate approaches towards sustainable MHM can be addressed.

Source: Doreen Mballo, personal communication, 2011

School sanitation is a neglected issue in many parts of the world². After the onset of menarche in puberty, many girls miss school or even drop out partly, because of lack of sanitation facilities or the absence of separate toilets for girls and boys. A study of 20 schools in rural Tajikistan revealed that girls chose not to attend school when they have their period because there were no toilets available (Mooijman, 2002).

² See also the SuSanA factsheet "Sustainable Sanitation in Schools": www.susana.org/library?view=ccbktpeitem&type=2&id=1188

In rural Pakistan, more than 50% of girls drop out of school in grade 2-3 due to a combination of religious rules and a lack of separate toilets for girls and boys. When a Muslim girl reaches 7 years of age, she needs to use a toilet specifically for females as the mixing of sexes is not allowed from that age onwards (UNICEF, 2003).

The lack of adequate toilets and hygiene in schools is a key and critical barrier to school attendance and education for girls (COHRE et al., 2008). In addition, if there are inadequate sanitation facilities, women might decide not to attend (vocational) training and meetings. Simple measures such as providing schools with safe toilets, promoting hygiene education in the classrooms and ensuring private hand washing facilities are located very near the toilets increases school attendance amongst girls and reduces health-related risks (UN Water, 2006).

There is a long overdue need for the water and sanitation community to address the need for menstrual hygiene management (MHM) in schools in low-income settings as it has been overlooked in the past³. Key components of a girl friendly school environment include:

- Well-designed, clean, safe, private toilets in sufficient numbers for female students with locks on the inside of the doors;
- Clean water inside or very near to the toilets so girls can wash menstrual blood off their hands and stains from their clothing without boys watching;
- Adequate and culturally appropriate disposal systems for used menstrual materials, including dustbins inside latrines and an incinerator or pit where materials can be burnt;
- A private location for girls who use menstrual cloths so these can be washed and dried;
- Availability of credible and empowering puberty and menstrual management guidance, such as the girl's puberty book "Growth and changes" developed through participatory activities with girls in Tanzania (Sommer, 2009) or the guide to menstrual management for school girls "Growing up at school" developed in Zimbabwe (Kanyemba, 2011);
- Sensitising school administrators and teachers to challenges associated with menstrual hygiene management;
- The provision of menstrual adaptable underwear for girls (with removable sanitary pads).

It is critical to engage adolescent girls in the decision making process right from the initial stages of designing appropriate facilities and in identifying and ensuring that they have adequate MHM support and guidance (Sommer, 2010).

However this is not sufficient on its own. The water and sanitation community is encouraged to collaborate with education and health communities within each country and context in an effort to provide a holistic and interdisciplinary response to ensure menstruating girls continue to attend and

³ For further information and discussions about MHM, please visit the MHM section of the SuSanA discussion forum: <http://forum.susana.org/forum/categories/24-menstrual-hygiene-management-mhm>

complete their education. Relevant stakeholders such as education departments and ministries, school authorities, WASH sector departments, politicians, leaders, teachers and most importantly parents need to be involved to make a significant and long term change to the situation.

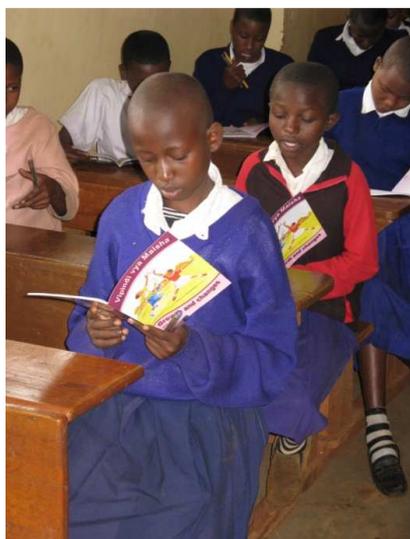


Figure 3: Hygiene education at school for both girls and boys in Tanzania (photo by M. Sommer, 2009).

Urine diversion dehydration toilets (UDDTs) have one distinct difference compared to flush toilets and pit latrines when it comes to use by women during menstruation: Traces of blood can be visible in the urine section of the bowl or pan. Therefore, the users must be given an option to clean off the blood. A simple solution to the problem is to provide a cup with water to wash the toilet in the eventuality that blood is left. There is no harm in adding a little water to the urine jerry can or soak pit (WECF 2006).

8 Integrating gender in sanitation

There is an urgent need to prioritise gender in the sanitation sector whilst addressing strategic gender needs. The process of thoroughly integrating gender concerns into institutional operations is called gender mainstreaming.

According to the Ecosoc (UN Economic and Social Council) definition, **gender mainstreaming** can be understood as "the process of assessing the implications for women and men of any planned action, including legislation, policies or programmes, in any area and at all levels. It is a strategy for making the concerns and experiences of women as well as of men an integral part of the design, implementation, monitoring and evaluation of policies and programmes in all political, economic and societal spheres. That way, women and men benefit equally and inequality is not perpetuated. The ultimate goal of mainstreaming is to achieve gender equality." (Ecosoc, 1997).

The concept of integrating gender should be free from discrimination against either sex to ensure balance and equality. Gender mainstreaming therefore works best through an adaptive, process-oriented approach that is

participatory and responsive to the needs of women. Specific institutional arrangements are needed to ensure that gender is considered an integral part of efficient and effective planning and implementation. This includes, for example, the development of gender policies and procedures, commitment at all organisational levels and the availability of – internal or external – gender expertise (GWA, 2006). Gender must be addressed in policy formulation and by-laws. The following elements of the gender mainstreaming process can safeguard a gender perspective in sustainable sanitation (ADB, 1998).

a) Gender analysis

A socioeconomic gender analysis is required to explore the cultural concerns and the sociological and economical roles of men and women in a project area. There is a list of guideline questions in the following section that can provide a framework for such an analysis. A gender analysis facilitates an understanding of the demands and needs of women and men, their respective knowledge, expertise, attitudes and practices and it clarifies the constraints that hinder the participation of women and men in specific activities (Asia Water Watch, 2006).

b) Impact assessment

It is also important to assess the impacts of policies and programmes on women and men from different social and age groups. Here it should be questioned who benefits and who bears the burden or faces the drawbacks of these policies and programmes (Asia Water Watch, 2006).

c) Composition of project teams

Project teams in the field should strive for a gender balance and be sensitive to gender and related cultural concerns. This can be enhanced by selecting field team members with gender awareness, local knowledge, cultural understanding and a willingness to listen (ADB, 1998).

d) Empowerment

To ensure women's participation and involvement, leadership and management training for women are important project components. Additionally, training women to help run and maintain sanitation facilities forms an important part of the empowerment process (ADB, 1998).

e) Financing and budget allocations

Adequate resources should be allocated to implement gender strategies in the sector (Asia Water Watch, 2006). This however is not enough. Institutional arrangements and policies coupled with budgeting that ensures that both men and women benefit from hygiene and sanitation efforts is indispensable in ensuring integration and participation.

f) Income generation

Opportunities should also be given to women to earn income through sanitation projects as builders, suppliers of materials, health and hygiene educators, and as contractors.

g) Involvement of boys and men

In order to successfully incorporate gender perspectives into sustainable sanitation policies and programmes, it is imperative that boys and men are also involved. This will enable them to share their views on gender issues and promote their gender sensitivity and awareness.

Box 2: The Global WASH campaign: lessons learned

The Global WASH Campaign (Water, Sanitation and Hygiene for all), which was initiated in 2001 by WSSCC, has delivered significant results. Putting gender issues at the centre of water, sanitation and hygiene, the activities led to

- better health and wellbeing for women, men and children;
- greater privacy and dignity for women;
- increased number of girls attending schools;
- improved economic and social status of women;
- improved service provision.

For further information see WSSCC (2006)

When mainstreaming gender in sanitation, one has to be aware of a few pitfalls:

- Women are often encouraged to take on sanitation management roles and additional work, but they may not have received the necessary resources (i.e. time, capacity, resources) to perform these tasks.
- The introduction of a “user pays” system for sanitation facilities may create a considerable burden for women, particularly for those living in poverty. On the other hand, there are also studies that show women are willing to pay for hygienic and safe sanitation (GWA, 2006).
- If hygiene education is identified solely as a “women’s area”, men may be reluctant to be involved and as a result, sanitation components in a project may be seen as less important. Therefore men must also be included in the decision making process regarding hygiene education so that they understand the challenges that women face.
- Women may receive more training but may be prevented from putting their own skills and knowledge into practice by cultural or social norms.

9 Guiding questions for integrating gender perspectives into sustainable sanitation

The following guiding questions can be helpful in the process of integrating gender perspectives into sustainable sanitation planning, designing and implementing (ADB, 1998; Van Wijk-Sybesma, 1998; UNICEF, 2003; Asia Water Watch, 2006; UN Water, 2006; UN, 2007; COHRE et al., 2008; UNICEF, 2008). The authors consider a critical engagement with the following guiding questions crucial to identifying strategic gender needs.

a) Gender aspects

- Has a socio-economic and cultural profile of the target population been developed including the different roles and tasks assigned to men and women?
- Have the particular issues of concern to females related to sanitation provision and use in the project area been investigated?
- Have the separate sanitation needs, interests and priorities of men, women, boys and girls been considered?
- Define the gender-specific elements in the sanitation policies and strategies of the government, company or institution.

- Use a gender perspective to gather information and generate information so that it is possible to understand the specific needs and policy implications for females.

b) Institutional aspects

- Ensure expertise in social development, sanitation and hygiene education is available in the organisation, project or programme team.
- Are women and men fully integrated at all levels in the organisation and have external and internal discriminatory factors been tackled successfully? Are there any constraints for women and/or men in accessing and controlling resources?

c) Gender impact assessment

- Will the programme’s objectives and activities have an impact on existing inequalities between women and men, as well as between boys and girls?
- How will females and males be affected by the programme? For example, will their work burden increase or decrease? Will their health be affected? What are the economic benefits? Is there a gender balance in the burdens and benefits?
- Does the budget reflect the needs and wants of both genders?

d) Gender specific monitoring and evaluation

- How do you measure and monitor the specific effects on females and males?

e) Location and design

- Does the design and location of sanitation facilities reflect the differing needs of children, women and men?
- Are toilets and hand washing facilities situated in such a way that the physical security and wellbeing of women and girls is ensured?
- Is the toilet location in the home (ideal case) or close to home and is the path to the toilet easily accessible, secure and well-lit?
- Have separate toilets for females and males been constructed and are these being operated and maintained (for example in schools, factories and public places)?

f) Technology and resources

- Does the technology used reflect women’s and men’s priorities and needs?
- Is the technical and financial planning for the on-going operation and maintenance of facilities in place? How are men and women involved?
- Have funds been earmarked for separate sanitation facilities for girls and boys and for hygiene education in school curricula?

g) Empowerment and decision making

- Has the capacity of women been developed and their participation in training encouraged?
- Have women and girls been enabled to acquire access to relevant information, training and resources?
- Are both men and women actively participating right from the initial stages in the decision-making process in the sanitation sector?
- Are men and women involved in planning, the location

choice, quality selection and management of sanitation services on an equal basis?

- Have hygiene education messages been promoted through women's groups, schools and health clinics?

10 Productive sanitation and UDDTs

Productive sanitation is a new term for sanitation systems which focus on increased crop yields by using treated excreta and greywater in agriculture⁵. It is important to closely monitor sustainable sanitation projects and the way they operate in a gender specific way. However, gendered perspectives of productive sanitation projects have not been fully explored yet. In many parts of the world, women are primarily responsible for food production and food security. In terms of its impact, it will therefore be women who will benefit directly from the increased availability of soil nutrients that can be used for rural and urban agriculture (Hannan and Andersson, 2002).

The urine diversion dehydration toilet (UDDT) is one type of technology that is often used within productive sanitation concepts. UDDTs require no water for flushing and this will reduce the workload of women if they have to fetch the water for sanitation. In Zimbabwe, women in some rural areas preferred the ecological sanitation alternative – the “Arborloo” – to the conventional pit latrines because they can be built closer to their home. When the pits are full, the women plant fruit trees on the full pits. Men also preferred the Arborloo because the pits are shallower and require less labour to dig.

Anecdotal evidence seems to suggest that women's attitudes towards UDDTs are more positive than those of men. In one project in rural Romania for example, women preferred the UDDTs while men had a distinct preference for water flush toilets. Women would like to have the toilet in their home, as this would reduce walking distances while also increasing security. Studies show that women are also willing to use the fertiliser derived from these toilets in their fields and gardens.

Demonstration projects that centre on local women's groups can have the effect of stimulating rapid and sustainable change (Mihailova and Diaz, 2007). Some experts however point out that UDDTs may require more work for women as far as cleaning, maintenance and the subsequent application of urine and faeces as fertiliser are concerned (Samwel et al., 2006b).

⁵ See also the SuSanA factsheet on “Productive sanitation and the link to food security” available here: <http://www.susana.org/lang-en/library?view=ccbktypitem&type=2&id=101>

Box 3: Are UDDTs resulting in a heavier work load for women?

The *Centro Mujeres Tonantzin* in Mexico carries out women's empowerment and leadership training amongst the very poor in the slums of Ciudad Juarez, close to the border between Mexico and the USA. Here 700,000 people live in poverty in desert-like conditions without any water or sewage facilities. The women work in factories, clean houses or sell second hand clothes in order to support their families. Between 2001 and 2007, 250 in-house bathrooms with UDDTs were built in this area. However some women stopped using their UDDTs because the compost and urine containers have to be emptied out which meant heavy work for the women especially as they got no help from the men. In such a case, a urine infiltration system would have been the better option so as to decrease the work load for the women.

It is important to provide follow-up for at least one year on the use and maintenance of the toilets but people complained about community workers checking on their toilets (Ramirez and Penan in Mihailova and Diaz, 2006).

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