



Oxfam

IDEAS THAT WORK



-preventing violence against women
through
water and sanitation
interventions in
early emergency response

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INTRODUCTION



I. INTRODUCTION

Background

I am extremely distressed. I have lost all that I possess. You may lay the blame on the wrath of nature but I would say my misfortunes are a fall-out of my fate. I have walked several kilometers from my home to be safe and get help. But I have been compelled to live in a camp with unfamiliar men. I am terribly uncomfortable about living in such close quarters with them and it feels like living on the edge. My most private activities have suddenly become public. I live with the feeling of being constantly watched, especially when I go to the toilet or bathe, even though I try to go late in the evening or early morning. I really wish there was a way of putting a stop to my periods. If it is embarrassing at home, here it is far worse. I dread to step out of our little hut on ‘those’ days as my clothes are woefully stained. There is no way of washing my clothes and I live with the fear that the whole world is privy to my situation. I feel the eyes of the men in the camp follow me everywhere. The toilets in our camp do not have doors yet they remain dark and dirty. The situation is truly depressing. One of my friends recounted this story of a girl in a nearby camp who had gone to fetch water from the government tanker. One man offered to carry the jerry can to her house in return for ‘favours’. Hearing such tales has made me nervous and I am scared to talk to anyone.” (Based on narrations by affected women from Bangladesh, Sri Lanka and the Indian state of Bihar)

This could indeed be the story of Sita, Rukhsana, Mary or just any woman who is poor and has survived a natural disaster. Having suffered enormous personal losses already, such women are also assaulted by harsh situations in camps where even fulfilling simple daily needs often pose huge, intractable challenges. The experiences are oftentimes so severely traumatic in most camps that they cause further setbacks for women. “Ideas that Work” makes a bold assertion that this need not be so. It demonstrates how water, sanitation and personal hygiene needs of women survivors of disaster can be addressed to minimise risk to violence that they may otherwise face.

Ideas that Work

“Ideas that Work” provides a compilation of practical experiences that have attempted to reduce risk to violence against women (VAW) in the provision of Water, Sanitation and Hygiene (WASH) facilities in early response phase of an emergency¹. These experiences no doubt are neither perfect in themselves or the only experiences of such innovative thinking. These experiences have been compiled based on the information researched on the worldwide web and provided by individual agencies contacted for this study. This document would not have been possible without the commitment of the individuals and organisations that were willing to share their knowledge and experiences. We acknowledge their generosity in making this information available for wider use.

An initiative of Oxfam GB in partnership with Oxfam Australia, “Ideas that Work” attempts to identify and analyse innovative practices and key elements — incorporated into commonly used project designs — to help prevent VAW. The scope of the study is limited to violence prevention not redress and immediate response and relief not rehabilitation. The emphasis is to understand key elements of the practice

¹ For the purpose of this study, early response refers to the phase where rescue operations are over and disaster affected persons are in temporary shelters/camps and recovery phase has not been initiated

that can be replicated and adopted in future early response programmes.

This document comprises three broad sections. Section 1 provides an introduction to “Ideas that Work” study and its objectives. It establishes the relevance of VAW in early emergency response context. In particular, it looks at the relationship between WASH and VAW with reference to related international humanitarian instruments. Section 2 shares experiences on provision of toilets, bathing spaces, menstrual hygiene units and potable water. These experiences have been drawn from different geo-climatic contexts and disaster events to illustrate a range of possible solutions. Section 3 summarises key learnings and provides broad recommendations for the way forward.

VAW in early emergency response

The early response context of any emergency is highly complex. It is characterised by a variety of stakeholders working to meet the pressing needs of the survivors in the shortest possible time. There is a visible “tyranny of the urgent” that often pushes qualitative aspects such as gender based planning down the agenda or till the time when reflection is possible. But by then the moment to act has passed and a critical opportunity has been missed.

Gender inequality is usually viewed as a development issue. However, gender disparities are often exacerbated during a crisis with women and adolescent girls struggling to meet their basic needs under extreme conditions. Under the pressure to act urgently, humanitarian agencies tend to deliver a ‘one size fits all’ approach that limits women’s ability to manage these needs on their own. Studies have shown that in times of crises, either due to conflict, forced displacement or natural disasters, women’s risk to violence tends to increase due to social upheaval, disruption of traditional structures and safeguards and changes in gender roles, among other factors.

There are varying definitions and interpretations of VAW. For the purpose of this study, we adopt the definition from Article 1 of the UN Declaration on the Elimination of Violence against Women (DEVW), proclaimed by the UN General Assembly. It defines VAW as: “Any act of gender-based violence that results in, or is likely to result in physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life (UNESCO 1999 p.53)”² This definition not only refers to the forms of violence - “severe pain and suffering whether physical or mental”, but also focuses on the ensuing results of violence - physical, sexual and psychological suffering. The terms “coercion and arbitrary liberty deprivation” refer to all forms of isolation, arbitrary custody and strict control of women’s movements ranging from prohibition of movement to sexual slavery and detention. Research on psychological trauma highlights that threats of bodily harm in a generally violent context with verbal humiliation and degradation also results in persistent mental harm (Foy D. 1992)³.

Experience has shown that humanitarian interventions are more effective when they recognise existing gender-based inequalities in the local context and take concrete measures to counter these through interventions. This study advocates going beyond the ‘life saving dimension’ of emergency response, to adopt a

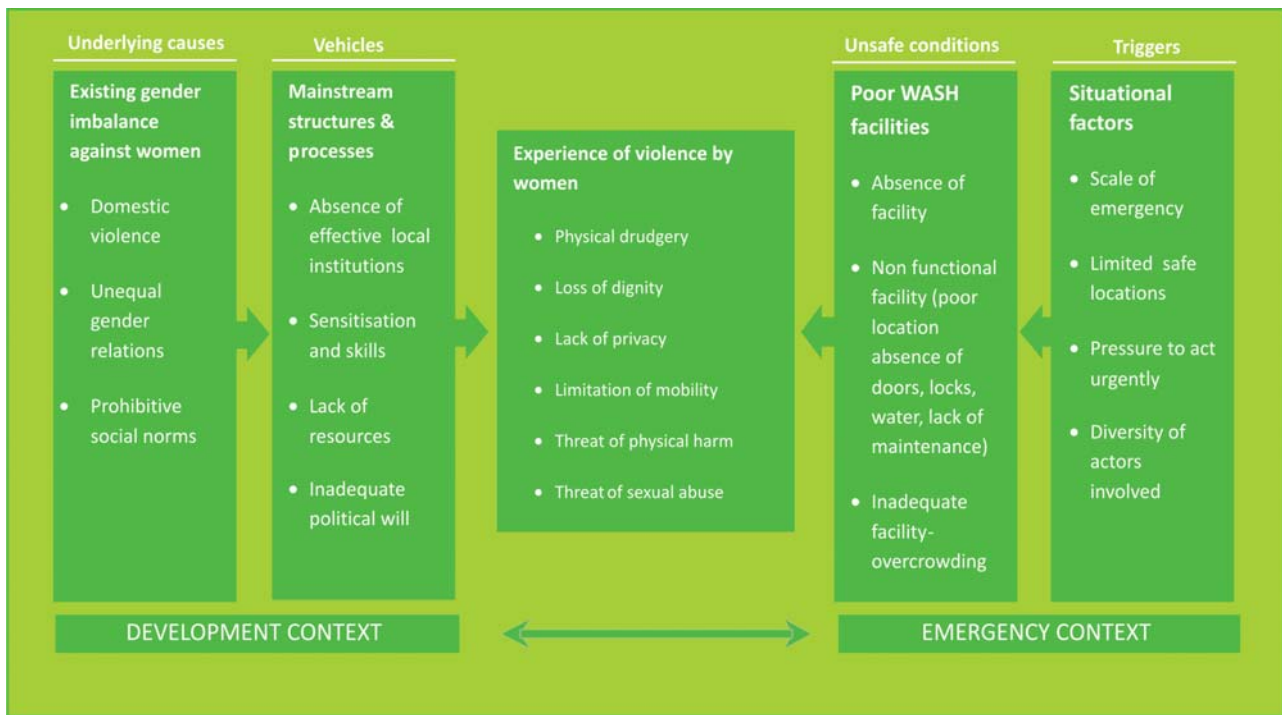
² <http://www.alrc.net/doc/mainfile.php/torture/149/> accessed on 04 September 2010

³ *ibid*

gender sensitive approach in the early phase through practical measures.

Through the experience of recent disasters, various forms of VAW have been observed. For example, tsunami-hit communities living in camps had to deal with exposure to risk due to inadequate infrastructure (such as deficient lighting in camps and during procurement of potable water, a task normally undertaken by women). Women felt heightened risk at the river or water points while fetching water; toilet blocks (especially when there are no separate toilets for women and men); queues for relief packages, medical services and at camp tents⁴.

This document argues for a consistent, systematic and institutionalised approach to violence prevention in WASH to reduce risks faced by women in the early phase of an emergency. Water, sanitation and hygiene promotion offer rich potential to minimise risk for women and the processes adopted can also give voice and shape to concerns of women and girls. Continued engagement of women and girls in assessment, design, implementation and monitoring of WASH programmes, would ensure effective delivery based on their needs for dignity, security and privacy and has the added merit of lending them a sense of worth and empowerment/leadership in longer-term recovery.



WASH in early emergency response and evolution in quality standards

Traditionally, water and sanitation engineering practices have been completely divorced from social development. These are two very closely related and complimentary areas of work separated by thin academic boundaries. Over the years, the complementarity of these two areas of work has begun to be recognised and multi-disciplinary teams have been promoted to seek solutions for WASH (Water, Sanitation and Hygiene) as against WATSAN (Water and Sanitation). Within WASH, gender issues have increasingly been recognised as critical components of

⁴ Violence Against Women in the Post-tsunami Context- People’s Report: India, the Maldives, Puntland (Somalia), Sri Lanka & Thailand- (*Draft Report*) - EKTA Resource Centre for Women, India; Care Society, Maldives; Women’s Development Centre, Sri Lanka

institutional frameworks and in the design of WASH solutions. However, many of these developments have been confined to individual initiatives and hence not institutionalised as practice.

This document has been developed for use both by WASH engineers as well as emergency personnel dealing with social processes for a more holistic approach to WASH programmes. “Ideas That Work” addresses twin components: delivery of efficient engineering solutions and effective processes for social renegotiation. The ensuing result is WASH infrastructure that addresses women’s needs in a manner that is dignified and promotes prevention of violence. Underlined below are examples of engineering design that were developed by teams of WASH engineers, public health promoters and gender specialists. The outcomes meet the basic requirements of WASH engineering design and quality criteria for social processes.

Institutional bearings on VAW in the context of WASH in emergencies

While it is agreed that VAW at the time of crises is in effect a manifestation of underlying gender disparities, it is important that emergency response duly recognises them and takes measures to prevent such violence. Although, WASH constitutes only about 10-20% of early response efforts in budgetary terms⁵, it is a critical sector which makes a marked difference to the quality of early response efforts especially in the way VAW is addressed or facilitated.

UN declarations and international instruments have, at the level of policy, provided guidelines for humanitarian practices to address the needs of women. The UN charter, 1945, is the first international document that declares the Principle of Equal rights for men and women.

The Humanitarian Charter and Sphere Minimum Standards in Disaster Response acknowledge that “inappropriate siting of toilets may make women and girls more vulnerable to attack, especially during the night, and ways must be found to ensure that women feel, and are, safe using the toilets provided. Where possible, communal toilets should be provided with lighting or families provided with torches. The input of the community should be sought with regard to ways of enhancing the safety of users women and girls who menstruate should have access to suitable materials for the absorption and disposal of menstrual blood. Women should be consulted on what is culturally appropriate ...”

The Excreta Disposal Standard 2, Design, Construction and Use of Toilets require agencies to ensure that “Toilets are sited, designed, constructed and maintained in such a way as to be comfortable, hygienic and safe to use”. One of the key indicators of this standard is “Users (especially women) have been consulted and approve of the siting and design of the toilet” and “they are sited to minimise threats to users, especially women and girls, throughout the day and night”

While institutional guidance on ‘what’ should be done to actively address the concerns of women and girls in emergencies is available, design of WASH facilities is often seen as a pure ‘technical’ hardware intervention disconnected from other social processes that could inform response decisions. It is hoped that this document will stimulate thinking and discussion on innovative approaches that will lead to further improvement of these models and their adaptation in different contexts.

⁵ Personal communication with Annie George, BEDROC and Tanaji Sen, Red R, India

The UN Inter-Agency Standing Committee (IASC) Task Force on Gender and Humanitarian Assistance has provided “Guidelines for Gender-based Violence Interventions in Humanitarian Emergencies.” The IASC Action Sheet for Water and Sanitation recognises that “... when using communal water and sanitation facilities, women and girls are vulnerable to sexual violence. To minimise these risks, it is important to actively seek women’s participation in water supply and sanitation programmes, especially when selecting sites, and constructing and maintaining the facilities. Design of water and sanitation systems, including information dissemination, must be based upon thorough understanding of the community, including sex-disaggregated data, gender analysis, and security considerations. Protection and security measures such as lighting and security patrols must always complement technically appropriate and equitable water and sanitation programmes.”

Towards this end, it recommends the following key actions:

- Identify safety and security risks for women and girls that are relevant to water and sanitation systems to ensure the location, design, and maintenance programmes maximise safety and security of women and girls.
- Participate in the coordinated situational analysis; conduct a coordinated rapid situation analysis to gather relevant information about the community and situation related to sexual violence.
- Mobilise women and men to participate in the location, design, and maintenance of water and sanitation facilities.
- Do not let women be overburdened.
- Ensure all users, and particularly women and girls, participate in identifying risky hygiene practices and conditions, and that all users share responsibility to measurably reduce these risks.
- Establish water and/or sanitation committees comprise 50% women. The committees are responsible for the maintenance of water and sanitation facilities.
- Locate water points in areas that are accessible and safe for all, with special attention to the needs of women and children.
- As a guide, no household should be more than 500 meters from a water point.
- Times should be set which are convenient and safe for women and others who have responsibility for collecting water.
- All users should be fully informed of when and where water is available.
- Design communal bathing and washing facilities in consultation with women and girls to ensure that users have privacy and maintain dignity.
- Determine numbers, location, design, safety, appropriateness, and convenience of facilities in consultation with the users, particularly women and adolescent girls (including whether facilities for males and females should be near each other or further apart).
- Facilities should be central, accessible, and well-lit in order to contribute to the safety of users.
- Bathing facilities should have doors with locks on the inside.
- Design latrines in consultation with women and girls to maximise safety, privacy, and dignity.
- Consider preferences and cultural habits in determining the type of latrines to be constructed.
- Use sex-disaggregated data to plan the ratio of women’s cubicles to men’s.
- Location of latrines should ensure that women and girls feel — and are — safe using them.
- Communal latrines should be provided with lighting, or families provided with torches.
- Use/adapt information and promotional materials to ensure they are culturally acceptable and accessible to all groups.

A critical gap in this documentation is the limited information on the actual outcome and impact of these experiences. This could not be adequately researched/ documented due to access to documented material on this aspect. It is acknowledged that the case that this document tries to make would have been stronger if this information was also made available in the document. Nonetheless, we hope that this fact will in no way undermine the value of these innovations and it could become the subject of further enquiry with interested individuals and organisations taking this forward. Also, despite our best efforts the examples are largely from South Asia and Oxfam focused. It is hoped that through this document, it would be possible to set the process of dialogue going and a richer body of work emerges so that experiences and innovations thus developed becomes part of an ongoing process of learning.

CASE STUDIES



PROVISIONING ACCESS TO TOILETS, MENSTRUAL NEEDS, PRIVACY AND DIGNITY FOR WOMEN IN A CAMP SETTING

Location:
Kashmir, Pakistan

The devastating earthquake of 8 October 2005 caused massive damage and destruction to the existing water supply and sanitation systems in both urban and rural areas in Pakistan Administered Kashmir known as Azad and Jammu Kashmir (AJK) and the North West Frontier Province (NWFP), Pakistan. The sanitation solution evolved took cognizance of the cultural and social practices such as the practice of *purdah*⁶ observed by women.

The experience

In response to the crowded tented camps where women had to take refuge after the earthquake, Oxfam worked with local women to develop integrated sanitation units comprising toilets, bathing facilities and personal hygiene units as an integrated facility. The particular focus of this case study⁷ is design of women's sanitation units that incorporate women's menstrual needs for ensuring greater security and privacy.

Innovation

a. Integrated sanitary units comprising bathing, personal hygiene and toilet facilities

Integrated sanitary units were designed to meet the privacy needs of women users by providing all the sanitation facilities – bathing, personal hygiene (spaces for managing menstrual needs), toilets and hand washing within a single enclosure. This ensured that all the facilities were accessible to women while ensuring privacy.

b. Special treatment of the hygiene units⁸ to address the menstrual needs of women

Washing slab for menstrual cloths inside a screened block and washing lines for drying the cloths The programme demonstrated the use of special menstrual hygiene units in addition to bathing units for women to wash and in some cases dry their menstruation cloths. The (menstrual) hygiene units were strategically integrated with the sanitary unit serving the hygiene and privacy needs of women. In order to ensure privacy to the women using these facilities, door and locks were provided inside the units with a privacy screen at the main entrance. The screen ensured that gaps in the door if any, were adequately covered to ensure privacy and the screen complimented the privacy provided by the doors.

The roof of some of the units was covered partly to ensure privacy while allowing natural light into the units.

c. Design of outlets for dignified disposal of waste

The outlet of the bathing and hygiene unit was covered and connected to a soak



Washing slab for menstrual cloths inside a screened block and washing lines for drying the cloths

⁶ According to Wikipedia, *Purdah* refers to the practice of concealing women from men. This takes two forms: physical segregation of the sexes, and the requirement for women to cover their bodies and conceal their form

⁷ All photographs for this case study have been taken from OXFAM GB documents

⁸ Hygiene units are sanitation units that incorporate women's menstrual needs securing privacy and dignity

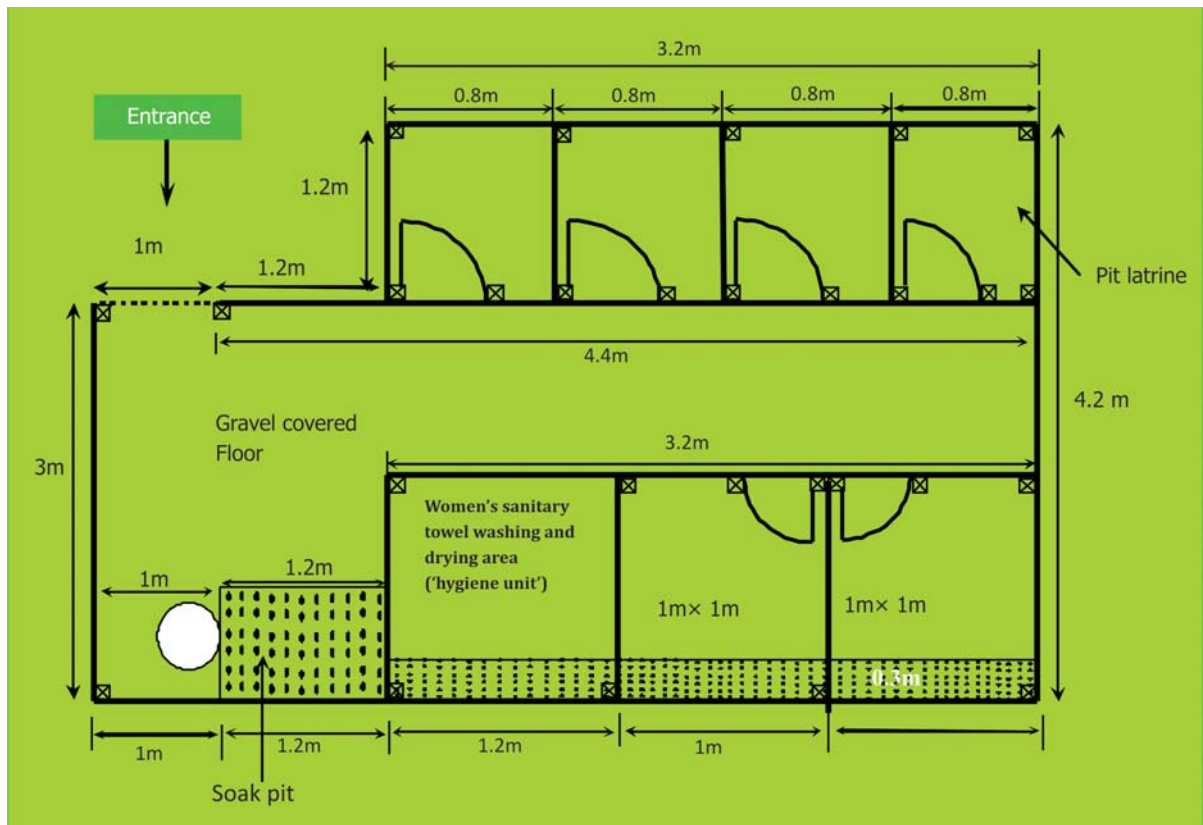
pit, ensuring that the blood/coloured waste water from the hygiene unit was not visible outside the hygiene unit/bathroom.

d. Design of prefabricated components for ensuring speed of installation

Designs of prefabricated components were used to ensure speed of installation.

e. Designs evolved through an iterative process

These designs emerged out of an iterative process and in discussion with men and women in the community. Thereafter standard designs were finalised that balanced minimum space requirements with standard sizes of materials available. This was done to optimise on costs and functional requirements. Some of the frame units were also manufactured off-site by the Rural Water Supply and Sanitation Programme, an organisation working in partnership with Oxfam, and later installed on the site. Water needs was met locally.



Schematic Design of Integrated Sanitation Unit

(Adapted from Oxfam Tech Brief- Vulnerability and Socio-cultural considerations form PHE in Emergencies)

Approach

a. Privacy and dignity as important criteria for design of sanitation facilities

One of the first issues enlisted in the design brief for the technical team was that privacy and dignity for women while using the integrated sanitation units has to be

ensured. With this prerequisite, the technical team developed the design of the unit, location of different functions within the units, the enclosure of the units, the detailing of the design in terms of heights of the enclosure, the addition of doors and locks, privacy screens at the entrance, the design of the outlet of waste water, the design of the roof that ensures privacy yet allows natural light in the absence of electric lights.

b. Iterative, process-based approach

The project demonstrated a clear commitment to the preferences and comfort of the women taking into account current norms to promote access of these facilities to women. Towards this end, the project followed an iterative approach towards design development and detailing. Lessons were exchanged between camps to arrive at the final locations of different functions within the unit and heights of the enclosures. Based on the outcome of these discussions the design was finalised.

Process enablers

- a. The prime focus in design of toilet blocks and bathing units was on ensuring the privacy needs of women users. After an intensive consultative process, toilets and bathing units for men and women were located at two ends of the camp to ensure privacy of women and adolescent girls as they were among strangers. In cases, where the toilets were closer, the units were provided with independent entrances at opposite ends of the block.
- b. The initiative had the advantage of having female staff as health promoters as well as engineers who worked together to arrive at an optimal design that satisfied both social needs and met technical criteria. Discussions were held within the Oxfam GB Public Health Engineering (PHE) and Public Health Promotion (PHP) teams, drawing on knowledge of local team members for siting (and separation) of men's and women's facilities. This was useful in preparing a basic layout for discussion with users of this facility. This iterative process of consultation resulted in the design and development of screened toilet and bathing units.
- c. The hygiene promoters spoke the local language and facilitated discussions between the technical team and the displaced women; the result was an outcome which was both technically appropriate and socially acceptable.
- d. Individual and focus-group discussions with the affected women helped the programme understand their needs for washing and drying their menstrual cloths. The women preferred to have 'menstruation units' included within the existing screened bathing blocks instead of having separate units in a more secluded area on the edge of the camp. This minimised any curiosity or unnecessary attention drawn to it from the men.
- e. In one camp, the hygiene units were added as a separate room abutting the toilet and bathing blocks. Although the door opened from inside the toilet, women did not use this 'hygiene unit' as it aroused curiosity in both men and women. The women would wash and dry menstruation clothes within the bathing units and cover them with other clothes while drying so as not to be visible.



- f. The provision of roof and enclosure in some units (to afford greater privacy to users) was a result of user feedback from one of the camps. Here the toilets could be seen from the higher grounds where men tended to congregate during leisure time. While most other blocks were open to sky to allow natural light in, the blocks in this camp were provided with roof covering and a higher enclosure to ensure privacy as well as natural light.

Lessons learnt

Women and girls living in temporary shelters in camps, among strangers, face critical challenges in meeting their basic needs. The problems are accentuated in societies where severe restrictions on women and girls mobility are practiced routinely. In these situations, it becomes necessary to ensure that security, privacy and safety are primary considerations in planning WASH along with ease of access and adequate numbers. Otherwise, inappropriately designed and sited sanitation facilities can expose women to increased risk of sexual assault. The following lessons emerge:

- ❖ Women have different ways of managing personal hygiene during menstruation. The materials used by women inform the exact nature and design of the space required for managing menstrual waste. For a facility to be used effectively, it is important that women are consulted during the design to ensure that the solution fits their needs. In addition, privacy is an important criterion in design of spaces for managing menstrual needs especially in camps. Given women and girls may have to share one room tents or shelters with men and sometimes even with extended family/strangers and there is a total lack of privacy.
- ❖ Well thought through planning and management processes for camps provide a critical base for any sectoral ideas to be implemented effectively.
- ❖ Consistent engagement with women and girls is important to ensure effectiveness of the interventions. Project personnel, especially women familiar with the local language and socio-cultural norms, help in breaking the ice with women and girls. Female staff at various levels — both within the social and technical teams — are a critical resource to develop solutions that are socially acceptable and technically sound. Adequate attention is required to this very critical aspect of programme management. In case female staff members are not available at any level, suitable women from the community could be engaged to assist in this dialogue process. In any case male engineers and other staff responsible for delivery of WASH infrastructure should be provided orientation to treat women as equal clients of their enterprise and therefore adequate attention to understanding and addressing their needs is desired.
- ❖ The cost of a separate menstrual hygiene unit and provision of the concealed drainage system was about 10-15% of the total cost of the unit. It is clear that providing women-friendly WASH facilities does not require huge dedicated budgets.

Detailed working documents are available as Annex

ASSURING DIGNITY OF WOMEN AND GIRLS THROUGH PROVISION OF COVERED BATHING FACILITIES

Location:

- i. Bihar, India
- ii. Gabura Union, Bangladesh
- iii. Soroti Municipality and Katakwi district, Uganda

Rapid onset emergencies do not allow women and girls to even pick up an extra pair of clothes before having to leave home. Displacement in large camps with new groups of people most often without any screened facilities for privacy during bathing, urinating and managing menstruation affects the safety and personal sanitation of women. As a result, women have to risk either compromising their privacy and dignity and bathe in the open with their clothes on, or risk going out at night or early morning into dimly lit areas. This case study demonstrates key components of initiatives for provision of safe bathing facilities for women that are basic, low cost and yet extremely valued by women using them.

The experience

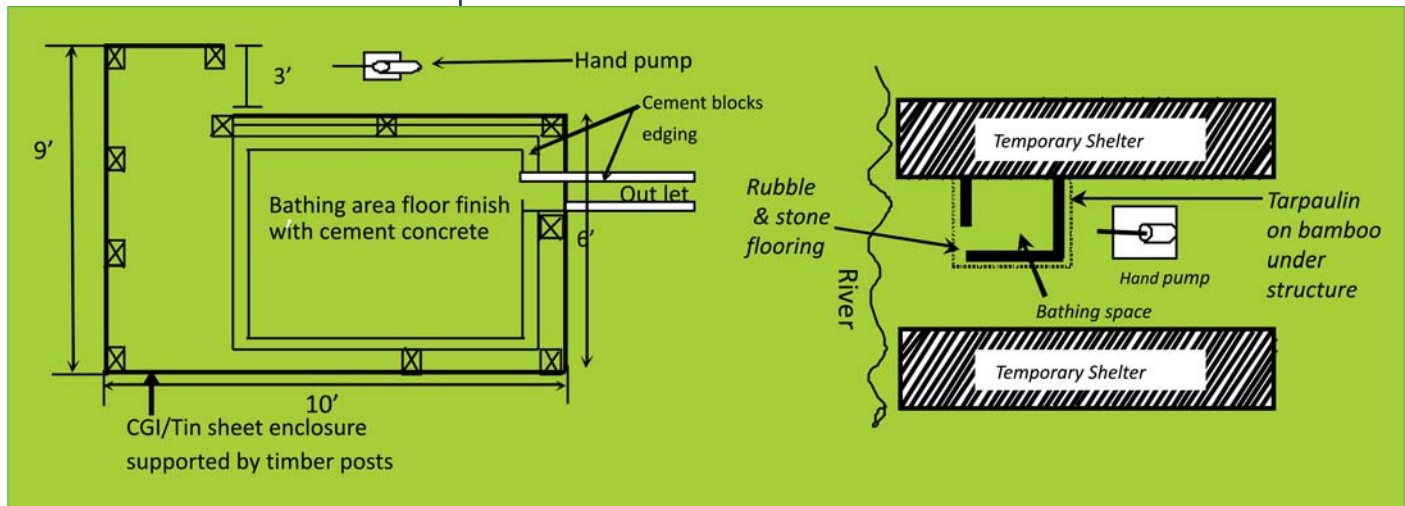
Cyclone Aila affected an estimated 3.90 million people in 11 coastal districts of Bangladesh. Tidal surges of 22 feet caused portions of embankments to collapse and washed away many houses. The cyclone rendered the entire population of the Gabura Union (300,345 people) homeless and wrecked 6355 households. It is also estimated that 80% of the livestock was killed and the entire cropland was laid waste.

The flooding caused by river Kosi in Bihar, India, affected three million people in 993 villages of five districts in North Bihar. Such high levels of displacements caused were unprecedented in Bihar, where people are used to the havoc of annual floods. The result: mega camps were set up with minimal infrastructure.

The internal conflict in Uganda worsened in 2003 as the Lord's Resistance Army (LRA) extended their operations to Katakwi, Soroti and Kaberamaido resulting in massive displacement of about 400,000 people into IDP camps. The case study draws from the experiences of Oxfam in response to cyclone Aila in Bangladesh, Islamic Relief after Kosi flooding in Bihar in India as well as the experiences of UNICEF and Concern Worldwide in Uganda.

These emergencies set in rapidly and people were caught unawares. Women were unable to handle their personal hygiene needs with the appropriate level of dignity, privacy and materials particularly due to overcrowding.

In all three experiences temporary bathing spaces that also served as washing and changing areas were constructed. Local material was used for constructing the enclosure with semi-permanent floor finish for ease of maintenance and access to water.



Schematic Designs of Facilities in Bangladesh (left) and Bihar (right)

(adapted from Technical documents sourced from Oxfam GB in Bangladesh and discussion with Grassroots India Trust in Bihar)

Innovation

- a. Availability of water at the bathing site with minimal drudgery and exposure, thus bringing together availability of water and access to private space for bathing

These interventions made water available to women at the bathing site, reducing risk (through having to fetch water) and minimising the attendant drudgery. Shallow tube wells were provided in Bihar and Bangladesh, while bathing spaces in the IDP camps in Uganda were connected to the municipal supply. This ensured that women had assured access to clean water.

- b. Ensuring privacy through appropriate detailing for multiple uses by women

The entrance was designed to ensure a visual disconnect between the outside and the interiors of the bathing unit ensuring privacy. The height of the bath facility was about seven feet – sufficiently above average eye level so that the women using the bathing space could not be seen from outside.

The bathing spaces in Uganda had individual cubicles with locks given the high rate of sexual abuse. In Bihar and Bangladesh the spaces were common and meant for use by a group of women.

- c. Use of low cost, locally available material

Bathing facilities were constructed with locally available material that could be sourced and assembled easily and quickly. In Bangladesh, bamboo mats on wooden support structure were used while in Bihar, tarpaulin sheets on bamboo support structure were used. In Uganda, tin sheets on wooden support structure were used. All of these were without a roof to allow daylight and direct sunshine to help quick drying of the space in between use. However, there was no provision



Oxfam/Progoti

of lights (in the absence of electricity in the camps) necessary for safe and secure access to these facilities in the night time

In Bangladesh and Uganda, slightly sloping concrete flooring was provided for easy drainage and maintenance. Women using the bathing spaces in Bihar themselves placed stone and concrete slabs salvaged from the rubble to serve as flooring, making it extremely cost effective.

d. Local knowledge of the facility for use by women only

The facilities in Bihar were dedicated solely for women's use; Uganda and Bangladesh facilities were also clearly sign posted as 'women only' with pictures at the entrance.

Approach

- a. UNICEF/Concern WW, Oxfam/Progoti and Islamic Relief/Grassroots India Trust acknowledged the need for privacy and safety for women while bathing and sought to minimise risk as a core objective of their intervention. In Uganda, sexual exploitation was a very real threat for women in meeting basic needs and access to facilities and was given due consideration. This is particularly important as many sanitation programmes in non emergency context do not recognise the need for bathing spaces for women.
- b. The fundamental approach adopted by all three cases was the intense process of user engagement throughout the intervention. As a consequence, women users of the bathing facility were able to express their need for the bathing facility, were actively involved in choosing location of the facility, its management and evolution over time.

Process enablers

Oxfam Progoti, Cyclone Aila, Bangladesh

- ❖ During the participatory needs assessment exercise undertaken by Oxfam, bathing spaces were identified as a critical need by women in Bangladesh after Aila. The team also observed that women were not bathing regularly due to lack of privacy on the embankments. They also recorded skin and eye infections caused by the use of contaminated pond water for bathing. The contamination was largely caused by use of pond water for body cleaning after defecation and washing of utensils. The pond was cleaned by the families under 'Cash for Work' and a hand pump was installed within the bathing space for ease of use.
- ❖ Using bamboo mats, a screened enclosure was installed over a concrete base. A gap in the design was no provision electricity connection in these remote villages limiting use and access during late evening. Future interventions may consider using solar lanterns or other suitable alternatives in the absence of an assured electricity connection. Over the following weeks, women used the facility more optimally as a changing area after a dip in the pond, private washing of menstrual cloth and occasionally for urinating.

Islamic Relief/Grassroots India Trust-bathing spaces driven by self initiative

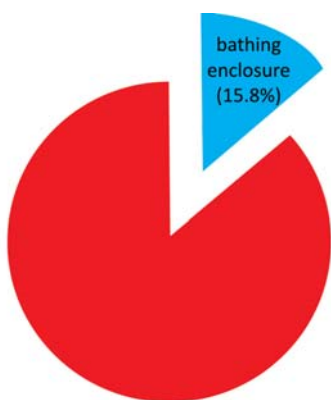
In the wake of massive flooding of Kosi river during 2008, intensive relief operations were carried out by Islamic Relief and Grassroots India Trust, along the embankment of Sursar river, for 400 displaced families. Two hand pumps were installed as part of the early response. However, women and girls expressed concerns over verbal abuse from men from other communities when they visited hand pumps located on the western side. This was particularly of concern in late evenings. The long narrow path about 1.5 meters wide between the temporary shelters along the two sides of the embankment also made them susceptible to physical abuse. The women, transcending caste and community barriers united to request Islamic Relief for an additional hand pump with an enclosure for bathing. A vacant space between two temporary hutments measuring about 2 meter X 2 meter on the western edge of the embankment was identified as a suitable location, women and their families arranged for bamboo poles for the support structure, and collected pieces of stone/concrete slabs for flooring.

A committee of five-six women took the responsibility of ensuring cleanliness in the bathing space and there was an understanding that the last user would ensure that the bathing enclosure is clean for the next user. As this facility was used by a small group of 36 families, it was possible for this arrangement to be enforced by the Committee.

Using bamboo mats, a screened enclosure was installed over a concrete base. A gap in the design was no provision electricity connection in these remote villages limiting use and access during late evening. Future interventions may consider using solar lanterns or other suitable alternatives in the absence of an assured electricity connection. Over the following weeks, women used the facility more optimally as a changing area after a dip in the pond, private washing of menstrual cloth and occasionally for urinating.

Lessons learnt

- ❖ The case study demonstrates that gender specific needs can be identified at the outset of the WASH programme and these need incorporated in programme plan and design. Towards this end, it is important to acknowledge that women and men have different needs in relation to WASH which may not sometimes be apparent even in a non-emergency context. Well functioning and private bathing spaces is one such need that makes a substantial difference to the well-being of women.
- ❖ Community-based approaches enable people to contribute to development of ideas and their implementation. It may take the shape of providing labour, material or cash contribution. Such instances are empowering and facilitate greater ownership by the people for management and maintenance of facilities.
- ❖ Making bathing facilities usable by women through provision of enclosures to ensure privacy can be done through locally available cost effective materials.



Cost breakup of bathing space in Bangladesh

In Bangladesh, the total cost of providing the bathing space was Tk 14155. While the platform and tube well accounted for a huge chunk of the total cost, 15.8 % (2243 Tk) was spent in providing the screened enclosure for bathing using locally available bamboo mats.

The cost of providing the enclosure for bathing in Bihar was approximately INR 1200 including the contribution made by the community in the form of labour and material they had put in. This is equivalent to six person days of semi-skilled earning as per minimum wage in India.

Detailed working documents are available as Annex

EMBEDDING VIOLENCE PREVENTION IN WATER AND SANITATION PROVISION TO ENGAGE MEN AND WOMEN IN IDP CAMPS

Location:
Northern Sri Lanka

The Indian Ocean tsunami on 26 December 2004 caused widespread damage to coastal districts of Sri Lanka displacing over 1.5 million people. The decade-long civil war which had briefly abated in the wake of the tsunami restarted with resumption of widespread hostilities among the different parties to the conflict.

Displacement of such a large number of people led to setting up of many IDP camps all over the Northern and Eastern Sri Lanka. These camp sites, some of them with more than 2, 20,000 IDPs presented tremendous humanitarian challenges. By June 2009, 40 such camp sites were set up by the government. Privacy and safety needs of women and adolescent girls were critical concerns in the camp situation.

This case study⁹ summarises key elements of water and sanitation interventions undertaken in Sri Lanka by OXFAM for prevention of VAW in the camps. The programme went beyond basic needs, to engage with women and men on VAW.

The experience

Oxfam's water and sanitation intervention comprised toilets, bathing spaces, menstrual hygiene units, washing *ghats*¹⁰ and water tanks for provision of safe drinking water. VAW, a key concern even before the tsunami, was exacerbated in the aftermath of the disaster adding further complexity. WASH infrastructure provision undertaken by Oxfam successfully dovetailed the ongoing "WE CAN END ALL VIOLENCE AGAINST WOMEN" campaign ("WE CAN" Campaign) to arrive at design solutions suited to the needs of women and served as an effective vehicle to message on issues of violence prevention.

Innovation

a. Diverse solutions for various WASH needs to minimise drudgery of women

Separate toilets and bathing spaces were constructed for men and women. In order to reduce bathing time and rush in bathing areas, washing *ghats* or common washing platforms were provided. These washing *ghats* were helpful in taking the load off the bathing units and reducing the waiting period for women.

The washing platforms were made of precast concrete slabs placed over brick masonry with inclined support on either sides of a drainage channel. The washing *ghats* had wooden enclosures supporting a tarpaulin roof.

b. Linkage of WASH infrastructure management with ongoing work on prevention of VAW

Oxfam's South Asia Campaign "We Can End Violence Against Women" ("WE CAN") focused on mobilising women and men to reduce acceptance to VAW

⁹ All photographs used in this case study have been taken from Oxfam documents

¹⁰ A *ghat* is communal washing space with ready supply of water

through practical actions to change attitudes, beliefs and practices that discriminate against women. The campaign had a visible presence in Sri Lanka through its alliance and change makers much before the tsunami hit.

During the initial phase of the tsunami, the “WE CAN” staff in the East and North offices of the Sri Lanka programme observed an increase in the incidence of VAW in camps as reported to them by “WE CAN” change makers from the community. A decision was taken by the response team to incorporate “WE CAN” messages on violence prevention in the WASH component of the response. These messages were painted prominently on WASH infrastructure such as water tanks and walls of bathing areas and toilets where men and women congregate. Change makers and social mobilisers in camps used these to initiate discussions among women and men camp members on how violence against women affects the whole family. In keeping with “WE CAN’s” philosophy, positive messages through pictures depicting families living together in equal relationships were also used.

Dovetailing with women’s empowerment processes

World University Service of Canada (WUSC) had been working in the IDP camps to impart training to women’s groups on building construction. These women trained by WUSC were involved in the Oxfam initiative for construction of wash facilities. Equal wages were paid to both women and men involved in different aspects of the construction process.

Approach

In terms of approach the team managed to address a practical need (WASH) and use it effectively to address a challenging issues such as VAW through positive messaging.

Multi-pronged approach that included WASH infrastructure provision as means to check VAW

The issue of VAW was an important consideration in the planning and design of WASH infrastructure. Conversely, WASH infrastructure was also used to further awareness, sensitisation and action for violence prevention. This was achieved through innovation in design of WASH infrastructure for ensuring privacy reducing drudgery as well as spreading messages on violence prevention. Colourful pictorial images of daily instances of VAW and possible actions to reduce these were painted prominently on the water tanks. This was very effective in bringing a sensitive issue out into a public space.

Flexibility for adapting to user needs

Secure and sensitively designed water and sanitation facilities were developed in consultation with the displaced women. These were suitably modified on the basis of feedback from women and adolescent girls to ensure that the facilities created fulfilled the various needs of women in relation to safety, dignity and privacy.

In Kilinochchi and Mullaitivu districts, for instance, there was issue of maintenance of community toilets. Hygiene promotion committees that consisted of 75 % women members decided to allocate one toilet for three families with a lock and key. This option put the responsibility on families to regularly maintain and clean the toilets.



‘My father is always hurting my mother. Why?’ Violence always destroys the whole family’ (Photo Credit: We Can/Oxfam GB)



‘Ensure women’s privacy and security. Look the other way when women are bathing outside.’ (Photo Credit: We Can/Oxfam GB)

Experiences of Women's Coalition for Disaster Management (WCDM), Batticaloa, Sri Lanka

Women's Coalition for Disaster Management (WCDM) was set up by a small group of international, UN and local organisations in 2005 in response to the extreme suffering of women and young girls after the tsunami struck the already war-torn areas of Batticaloa. Through the WCDM it was possible to highlight the issue of VAW as a central issue within the context of post-disaster response, based on the intense monitoring at camp and community level. WCDM provided a forum for directly engaging with national policy through its many network members who could span local district-level engagement with national policy advocacy.

In the early months after the tsunami, women from the camps raised the problem of not having protected and covered bathing space and their vulnerability as men and boys entered the facilities, watched and passed comments when women tried to bathe. Several international and local organisations in the network responded by providing coverings for separate bathing spaces for women.

The WCDM supported local women's organisations to work on gender issues, providing moral support, mentoring and encouragement, problem solving and crisis responses. Women reported being less afraid to respond to VAW because of the advice and support they got through WCDM – as there was collective responsibility taking for their work.

Through its engagement with women in communities and camps, the WCDM was able to develop key policies and guidelines on gender sensitivity which were made available to operating agencies and institutions in the east of Sri Lanka. These included, for example, the guidelines on protection concerns in the camps and a policy on women's land rights. Gender equity was made a core issue in all disaster response forums at the district level. The WCDM also lobbied successfully for women's inclusion in post-disaster structures, and for gender concerns to be made an explicit part of response.

The following narration is an example of the effectiveness of WCDM. During 2006-2007 there was heavy shelling in Batticaloa. WCDM visited the camps where displaced people were living and started to talk to the women about their experiences and their needs. Women shared issues in relation to quality and quantity of food relief. During this time women had a lot of problems with accessing food relief. Responding to this, WCDM linked them up with **the World Food Programme** responsible for providing food relief. Some WCDM members met with UNHCR representatives and made a written submission documenting the problems of women in the displacement camps especially in relation to the lack of proper tents and temporary shelters. In a bid to find solutions, WCDM put women in touch with human rights organisations at the national level. Their involvement in these matters lent impetus to gender concerns. Issues discussed at meetings were framed using the UN Guiding Principles on Internal Displacement, which then became a very useful document to focus on women's concerns during displacement and resettlement.

Source : *Sarala Emmanuel*, Women Organising Post-Tsunami – Ideas That Work!, 2009

Design adaptation to fulfil privacy needs of women

In one of the emergency camps in Sri Lanka, Oxfam built two sets of three toilets each back to back with a septic tank in the middle. One of these blocks was designated for use by men and the other for use by women. A bin was constructed close to the block meant for use by women.

The location of the toilets was perfect from a purely engineering point of view considering the ground water, table proximity to the shelters and functionality. However the toilets were not used by the women because of their proximity to the men's unit.

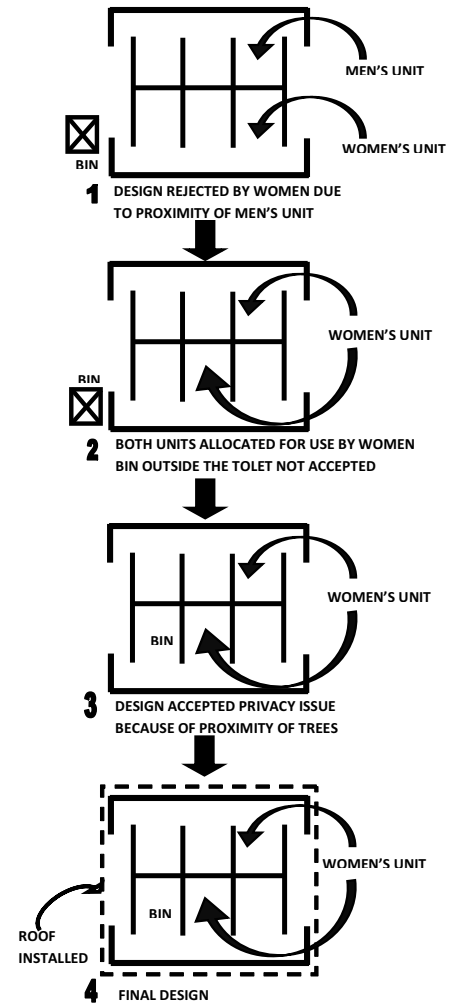
The toilets were then allocated for use by women alone. The bin was moved out of public eye into one of the toilets. However, a few days later it was discovered that every evening men were climbing trees in the vicinity of the toilets to extract sap to make toddy. Women once again stopped using the toilets. Although the WASH programme was over by then, the community under the guidance of project staff installed extended roof covers to ensure adequate privacy for the women.

Process enablers

In this case an important facilitating factor is that the design and development of response was based on a long term development programme. The programme team understood the needs of the community, had credibility and experience in messaging on VAW.

A key enabler in this instance was a capable and committed cadre of gender programme officers with considerable experience on “WE CAN” campaign. Their leadership and credibility both with the programme team and the community helped them identify an opportunity and promote violence prevention as an integral aspect of the WASH component. Their inclusion as part of the senior management team delivering on the response gave them the power and authority to challenge and question development of design and delivery. The willingness of the technical team to work with the gender leads and develop the innovation in design as well as the use of infrastructure as a social mobilisation space was commendable. The availability of “WE CAN” campaign material, with messages on violence prevention, which could be easily adapted and used widely made the task easier. With the support of facilitators (“WE CAN” change makers) a community-level dialogue on violence prevention was made possible as men and women congregated around the WASH infrastructure.

In Tricomalee district, SEDOT, Oxfam’s partner NGO worked with three village committees: The Hygiene Group, the Ending Violence Against women (EVAW) Group and the Livelihood Group. Although each group focused on different aspects, there was a referral system between the different groups and this came up during sharing sessions. Members of the EVAW group worked with both men and women and tried to create mutual understanding and respect amongst them. The EVAW group increased awareness about the ill effects of VAW that helped deter incidents of abuse.



(Source: Personal communication with Vikas Goyal, Oxfam)

Trainings of all stakeholders were conducted with a spotlight on gender protection in emergencies and rehabilitation. The “WE CAN” change makers in the camps were mobilised to report incidence of VAW and collectively strategise on how to mobilise the community on violence prevention. Informal “community watch” was maintained by volunteer groups of men and women. Referral and support was provided through reporting of issues and also through the working out of strategies for the prevention of VAW.

“WE CAN” change makers along with other volunteers also served as members of the “User Group” of the WASH facilities which had about 50% women members. Inspection schedule by project staff and IDP volunteers was adhered to and maintenance issues addressed - internal and external locks were checked, door shutters were regularly examined and the superstructure was checked for safety and stability. Lighting on latrine site and inside the latrines was maintained. In an effort to ensure equitable distribution of water, Oxfam’s Hygiene Promotion Team implemented a water conservation plan in specific blocks. In these blocks, people were made aware of their daily share of 10 litres/person/ day and block monitors were appointed to ensure that people got their share. This helped in reducing the queues at the water collection point and reduced women’s load of water collection.

Lessons learnt

The WASH programme implemented by OXFAM in Sri Lanka derived tremendous benefit from the ongoing “WE CAN” Campaign. The community volunteers involved in the campaign were well equipped to provide inputs on improving the quality of WASH infrastructure from a perspective of violence prevention. Similarly the women trained by **WUSC** were gainfully engaged in the construction of WASH infrastructure. Building on successful processes available in the context proved to be an effective strategy.

The programme had a promising gender resource group at the organisational level embedded in the team. This group had the benefit of community acceptance and was involved in the various stages of programme development and implementation. Multi-disciplinary teams that can work together to bridge socio-technical gaps are an effective medium for such interventions.

As a result of these and various other processes undertaken by other stakeholders concerned with VAW, there is empirical evidence that VAW is not being tolerated in silence any more. Families and communities are openly discussing issues of violence and reporting cases to the official duty bearers¹¹.

¹¹ Personal communication with Padmini Balachandran, formerly gender and “WE CAN” team member, Oxfam GB in Sri Lanka

IMPROVED SYSTEMS AND CAPACITIES FOR PREVENTION OF VAW

Location:
Democratic Republic of Congo

Over 18 years of conflict between armed groups and the government in the eastern part of the Democratic Republic of Congo (DRC) has led to displacement of millions of people and killing of several thousands. VAW and girls has been used as a means to disempower and terrorise populations. In addition, flooding and epidemic in 2007 along the Congo River further aggravated the situation. Minimising the vulnerability of women and girls especially in WASH was therefore a key consideration for humanitarian agencies working in DRC.

The experience

This case study explores institutional arrangements deployed in DRC for gender sensitive programming as a means to violence prevention in WASH programmes. Specifically, the deployment of a dedicated gender resource in the form of a gender consultant and then of a GenCap¹² advisor to work with UNICEF (as the WASH cluster lead) contributed to much of the ensuing results.

An important outcome of this initiative has been the design and adoption of management instruments for design, implementation and monitoring of sectoral initiatives. These include non-negotiable minimum standards for the security and dignity of women and young girls as well as men and boys in provision of water, sanitation and hygiene facilities which translate to ‘action points’ by WASH actors. In addition, gender markers have been developed and instituted to rate the level of gender sensitivity of projects to be funded. During the review, attention is paid to ensure that gender related action points are integrated in design of funded projects for WASH as well as other sectors. These instruments dictate contractually binding actions by the agencies and organizations involved in WASH programmes when accessing funds from UNICEF or the Pooled Fund¹³. The result of these efforts along with other initiatives for reinforcing the capacity of other stakeholders has been a visible awareness on issue of VAW. In WASH over 50% of the projects funded had clearly gender disaggregated objectives and plans.

Innovation

a. Definition and adoption of minimum standards for the dignity and the security of young girls and women and boys and men in water, hygiene and sanitation

The extremely complex and violent nature of the context warranted WASH responses take cognizance of this fact and reduce risk. However, WASH cluster members had inadequate experience, skills and motivation to translate this intent into programme practice. The gender Advisor worked with the WASH cluster members to identify and agree on strategic and programmatic changes which could be made to existing programmes. The key objective was securing safe access to WASH facilities while minimising vulnerability to violence. Through the process, five minimum standards were developed for systematic application in designing response. The standards were simple, measurable, context specific, required minimum training or orientation and were worded more as “actionable steps” in WASH infrastructure provision.

12 GenCap is a standby roster of gender experts managed by the Inter-Agency Standing Committee (IASC) Sub-Working Group on Gender in Humanitarian Action and the Norwegian Refugee Council.

13 The Pooled Fund (PF) for the DRC is a common fund fed by various capital partners, managed by the Humanitarian Coordinator through OCHA and UNDP. Piloted in 2005, the PF has become the most important funding mechanism within the DRC, and thus an important entry-point for improving the quality of interventions coordinated by the Humanitarian Coordinator.

For instance, one of the standards aimed at preventing violence against girls and women in particular while accessing water and sanitation facilities lays down, “Consult girls and women in priority at all stages of the project, particularly about the physical placement and the design of water points, showers and toilets in order to reduce time spent waiting and collecting water and to mitigate incidences of violence. Ensure that evaluation and translation teams include female staff.”

The five minimum standards that were adopted are:

- I. **Analyze and take into consideration gendered division of tasks** within households and communities and the different needs of women, men, girls and boys in water provision, sanitation and hygiene.
- II. **Consult girls and women in priority at all stages of the project, particularly about the physical placement and the design of water points, showers and toilets** in order to reduce time spent waiting and collecting water and to mitigate incidences of violence. Ensure that evaluation and translation teams include female staff.
- III. **Encourage an equal representation of women and men in the committees and in trainings** so that all users have an equal mastery of facilities. Involve men in hygiene maintenance and in hygiene programmes.
- IV. **Separate by sex the blocks of latrines and showers** by using a pictogram, respecting a ratio of six latrine and shower stalls for women to four for men. Doors can be locked from the inside.
- V. **Respond to the specific hygiene needs of menstruating girls and women** by the construction of special washing facilities and by the provision of female hygiene kits.

b. Working with other clusters and institutional mechanisms to promote and ensure wider and mutually reinforcing actions on preventing violence

The WASH cluster in this case, initiated a multi-sectoral dialogue with the protection cluster. As a result a sub working group was set up to develop designs for protection friendly WASH facilities such as provision of separate toilets segregated by sex and lockable doors. Further, the cluster ensured that partners funded through the Pooled Fund incorporated these standards in their work. The standards are “sine qua non” and are integrated in the results promised in the project document.

c. Development of gender markers to reinforce accountability of WASH actors

Gender markers were developed in 2009 for appraisal of projects submitted to the pooled fund as well as for monitoring and evaluation of the projects. Gender markers are an appraisal tool for objectively assessing gender sensitivity of projects and practice. Prior to the introduction of gender markers, all projects were required to include a paragraph on gender but evaluators would tend to verify its presence in project description and did not systematically assess its quality or content. Revision of the project document and introduction of the gender markers was effective in assessing the extent to which the project addressed gender issues and empowerment of women and girls or reduced discrimination through targeted actions based on gender analysis. Through a system of scoring different components of a project document, real gender intent could be assessed with the highest score being given to projects that have the prevention of/response to gender based violence as a principle objective.

Projects were rated based on the analysis of the entire project – objectives, targeting of beneficiaries, needs analysis, activities and expected outcomes. Based on this assessment, project designers were requested for further details explaining various activities, expected results and analyses in the project proposals and logical frameworks. Through this process, every possible effort was made to ensure that gender based needs of individuals were given due priority in project design and formulation.

Process enablers

a. Institutional improvement in response to local needs

Support to the WASH cluster in DRC was first provided within the framework of UNICEF’s ‘Gender in Humanitarian Action’ global pilot initiative in 2008-2009. Empirical evidence and informal discussions with field actors revealed that community consultation was weak in WASH emergency response, especially with regard to the location and design of the facilities. WASH committees were often

gender blind/neutral in their composition and approach. WASH facilities were sometimes of alarming poor quality: Shower and latrine blocks were not systematically separated, pictograms were not always used while doors had sometimes no locking system. Consequently, there was a need for further guidance within the WASH cluster led by UNICEF on ways and means to address the dignity and security of displaced girls and women as well as boys and men. Originally, a list of 10 standards were discussed, amended and validated by the WASH cluster actors during the spring of 2009. The standards became a contractual part of UNICEF's Partner Cooperation Agreement with their partners in the summer of 2009. In the fall of 2009, the Pooled Fund Unit agreed to include the standards in its project review process to assess the quality of gender sensitivity and orientation of projects submitted for funding. In order to support this process, examples of activities, expected results, indicators and means of verification for each standard were provided by the cluster lead. A Gencap Advisor was deputed to, among other priority areas, work with the WASH cluster in DRC as a short deployment. The role of the advisor was to facilitate translation of gender standards into programmatic actions and develop measures to ensure accountability in application of the standards.

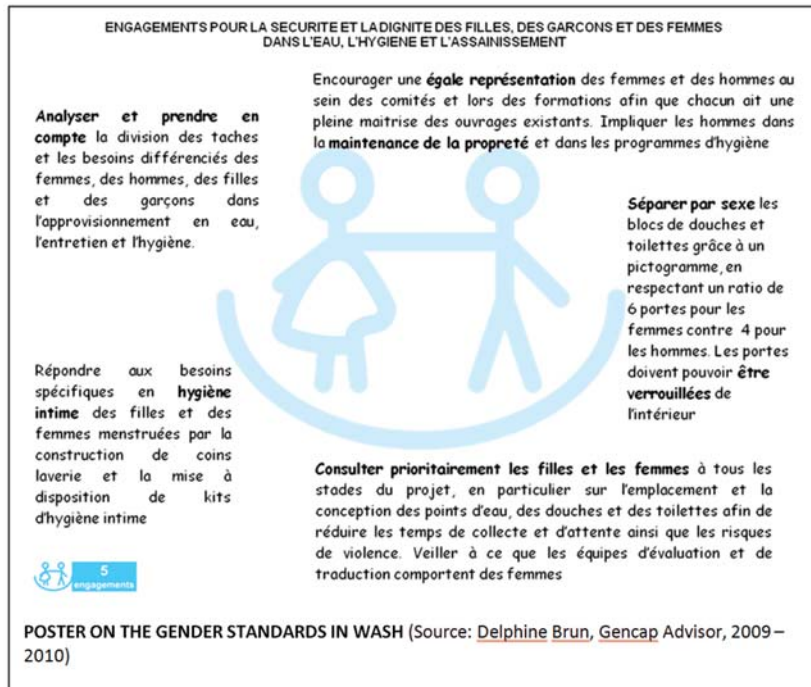
It is important to note that the Programme Manager of UNICEF Gender in Humanitarian Action Pilot initiative was deployed as the GenCap Advisor. This was instrumental in maintaining the consistency in effort that resulted in the institutionalisation of standards and provision of necessary support to the WASH cluster actors for taking these up meaningfully.

b. Capacity building of cluster members

Many of the members of the WASH cluster had no previous experience of working on gender issues. In order to familiarise cluster members with the standards and to ensure their effective and systematic implementation, several trainings were conducted. Capacity building was first provided to the organisations involved in the Rapid Response Mechanism (RRM), the flagship programme managed by OCHA and UNICEF, for rapid evaluation and humanitarian assistance. Early in 2009, gender equality and protection became a specific objective of the RRM programme. This was a combined result of UNICEF's own commitment to the issue as the cluster lead agency as well as the availability of a dedicated gender resource to work with the cluster.

c. Engagement of a wide range of sectoral actors in the process of developing standards

The standards were finalised through a wider consultative process. A list of 10 standards was provided that were discussed, amended and validated by the national WASH cluster and sub clusters. Cluster leads were requested to co-facilitate sessions to reinforce their understanding and ownership of the initiative. Appropriate IEC material was developed to disseminate information on the standards and to aid easy recall.



d. Continuous engagement with other institutional processes

The sector lead took the additional opportunity of the GenCap advisor engaging with other processes such as the Pooled Fund mechanism to ensure implementation of standards so WASH programmes systematically adhered to agreed gender standards in design and implementation. This was useful for influencing practice on ground as well as for sensitising donors.

Approach

This institutional initiative was developed with a clear objective of reinforcing the understanding and programming capacity of WASH cluster actors in DRC for preventing gender based violence. Towards this end, a dedicated gender resource was deployed and given the task of facilitating tools and processes that could be carried forward by the cluster. Standardisation of gender sensitive design and planning norms such as separate toilets for men and women, six for women and four for men and installation of lockable doors for ensuring privacy and security were some of the key achievements of this process.

Within this institutional frame, the process of engagement adopted for the definition and adoption of the DRC WASH standards helped cluster members understand gender differentiated analysis of the needs and rights of girls, boys, men and women in emergency programming. This has been a critical input at an operational level for better programme design and outcomes. An interesting outcome of this process is nearly half of the WASH projects submitted to the Pooled Fund's 2009 allocation analysed potential risks of violence against women and/or integration of violence prevention into response.

Lessons learnt

Definition of operational criteria on gender helps improve programming

Successful application of minimum standards requires appropriate capacity building and programme support interventions. Meaningful translation of these standards to actions on the ground requires capacity building of actors engaged in implementation as well as support to project designers for development and formulation of project proposals.

Standards need to have a time-bound action plan and monitoring and evaluation framework. It was observed that “the RRM partners who had drawn up an action plan, with regular monitoring and evaluation of progress made, were more successful than others at implementing the standards. For instance, the fact that the implementation of separate consultations for women and men was regularly monitored encouraged the team to systematise the approach. In turn, the exchanges that took place during the non mixed discussion groups gave value to that new consultation process: staff realised that protection from sexual violence was an inherent part of their work while participation provided additional sense and durability to their interventions.”¹⁴

Contractual agreements and funding mechanisms help reinforce accountability. UNICEF and the Pooled Fund promote/require application of the standards as a part of the contractual understanding with the agencies and humanitarian organizations initiating and implementing the project being funded. This has proved powerful in promoting gender sensitive programming at a more formal and measurable level.

¹⁴ Brun, D, 2010, Demystifying Gender in WASH, GenCap Experience, Document No. 9

SAFE WATER AND SANITATION FACILITIES FOR YOUNG AND ADOLESCENT GIRLS DURING EMERGENCIES

Location:
Save the Children, Bihar and Bangladesh
Oxfam, Bangladesh

Cyclone Sidr in November 2007 and Cyclone Aila in May 2009 struck coastal Bangladesh, affecting about nine million and four million people respectively. Despite the small number of deaths reported as compared to previous disasters, damage to houses, livestock, crops, educational institutions, roads and embankments was widespread resulting in large scale displacement. The storm and resulting floods left many families homeless and estranged resulting in children being separated from their families and/or orphaned. Kosi floods in Bihar in India had a similar impact with the additional threat of trafficking of destitute women and orphaned children.

This case study focuses on Child Friendly Spaces (CFS) developed by Save the Children alliance and Oxfam in Bangladesh and by Bal Raksha Bharat (Save the Children) in India. These facilities provided safe and hygienic conditions to young boys and adolescent girls to help them recover from the trauma. These spaces were equipped with water, food, recreational activities and trauma counselling and care.

The experience

The primary purpose of Child Friendly Spaces (CFS) was to provide a safe environment for boys and girls to recover from the mental distress and trauma of the disaster event. The CFS in Bangladesh had water and sanitation units attached to the facility. This enabled a self contained and safe environment for children and young adults. Peer support and counselling by trained counsellors facilitated psychosocial recovery in a protected environment.

Innovation

a. Multipronged strategy to alleviate suffering and facilitate protection

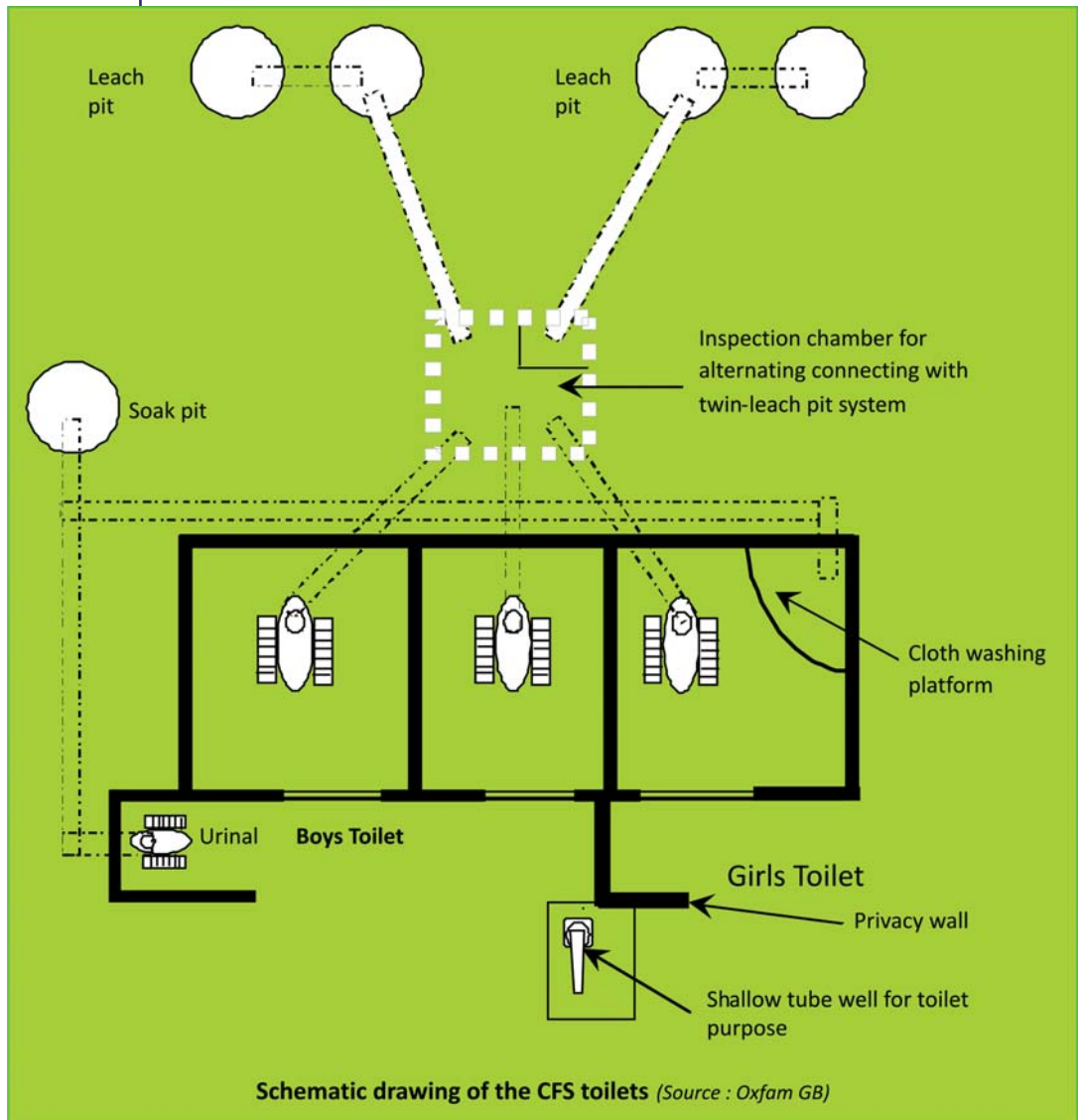
While the CFSs were being set up, the agencies ran parallel programmes for meeting the basic need of families of children. Water purification tablets, hygiene kits, bleaching powder and water containers were distributed. Repairing /replacement of destroyed latrines and water sources were undertaken. Dedicated bathing spaces were created for girls and women to bathe. Additionally, repair of school latrines and construction of new school latrines was undertaken.

b. Suitably designed toilets for boys and girls

In Bangladesh, each CFS and school was provided a toilet with two sections, one for girls and one for boys, with a bucket for hand washing inside each. The girl's toilet had a privacy screen as well as a washing slab for washing of menstrual cloth. Hand pumps were installed outside to provide water. All school latrines were of the "off-set type," with latrine superstructures located away from the latrine pits and connected by a plastic pipe for increased safety and ease of maintenance.



Y. Panigrahi/SCF India



Approach

a. Recognising special needs of young and adolescent girls and provision of a safe environment for them

The initiatives recognised that young and adolescent girls were extremely vulnerable to various forms of violence in the emergency situation and worked towards providing safe and self-contained spaces for them during day time where their basic needs could be met.

Taslina lives with her father, a fisherman and small farmer, in Bangladesh. When the cyclone struck, Taslima and her parents took shelter in a local school building. Taslima lost her mother when a tidal wave hit the school. As the storm subsided, her father struggled to look after her as he worked to meet their needs while also trying to rebuild their home and fishing boat. The CFS set up in his village was a blessing. According to the CFS facilitator, a community member recruited and trained by Save the Children, “when Taslima started to come to the space she was lonely and silent. She cried frequently.” The space provided her with food three

times a day along with basic medical care. Perhaps most importantly, she was in a healing environment. The space facilitators talked to her, played with her, bathed her and encouraged her to participate in games, art and other group activities. Gradually, Taslima began to play and laugh with other children again. (Source: Save the Children, Rebuilding Lives After Cyclone Sidr, November 2008)

b. Provision of life skills training

Hygiene awareness drives were conducted in schools with pictorial tools and demonstrations to explain proper hand washing techniques, appropriate use of latrines, and the importance of drinking and cooking with safe water. Women and girls were provided training on protection issues and peer support was facilitated through joint exercises. Practical skills to manage menstruation, adolescent sexual health were taught to adolescent girls in the CFSs.

c. Community-based processes

The design and management of the CFS was community based. The involvement of children and youth themselves, and parents, teachers and local leaders in the management of the CFS was a useful exit strategy for the initiatives. Local school administration was also another important stake holders involved for ensuring that child protection continued to be an important agenda.

Process enablers

a. Rigorous process of needs assessment with young girls and boys

Save the Children alliance undertook an assessment and periodic review of needs of the children in Bangladesh. Child protection rapid assessment findings suggested that the cyclone had not only left a deep impact on children's emotional wellbeing, but also exacerbated endemic protection concerns which existed before the cyclone. The increased protection risks that children faced had been aggravated by the lack of access to basic needs - adequate food, shelter, water and sanitation facilities and educational opportunities.

Many children felt permanently insecure since the cyclone, citing fear of another cyclone, and the



Taslima lives with her father, a fisherman and small farmer, in Bangladesh. When the cyclone struck, Taslima and her parents took shelter in a local school building. Taslima lost her mother when a tidal wave hit the school. As the storm subsided, her father struggled to look after her as he worked to meet their needs while also trying to rebuild their home and fishing boat. The CFS set up in his village was a blessing. According to the CFS facilitator, a community member recruited and trained by Save the Children, "when Taslima started to come to the space she was lonely and silent. She cried frequently." The space provided her with food three times a day along with basic medical care. Perhaps most importantly, she was in a healing environment. The space facilitators talked to her, played with her, bathed her and encouraged her to participate in games, art and other group activities. Gradually, Taslima began to play and laugh with other children again.

Source: Save the Children, Rebuilding Lives After Cyclone Sidr, November 2008

To support water, sanitation and health activities, Save the Children conducted school-based awareness sessions for children and community-based sessions for women.

Save the Children and its local partners used pictorial tools and demonstrations to explain proper hand washing techniques, appropriate use of latrines, and the importance of drinking and cooking with safe water. A total of 25,000 women and 73,000 children participated. During the awareness sessions, 10,000 women were provided with soap and cloth napkins for hand washing. Additionally, 300 water point management committees were formed, trained and provided with tool kits to ensure the long-term maintenance of community tubewells.

Source: Save the Children, Rebuilding Lives After Cyclone Sidr, November 2008



exposed nature and inadequacy of the temporary shelters. Girls and boys were particularly afraid of night intruders or being left alone while parents fetched relief, and felt insecure with the increase in number of ‘outsiders’ in their villages.

The needs assessment found that damage to houses and sanitation facilities made women and children especially vulnerable to abuse. Women and girls gave examples of sexual abuse after the cyclone. Orphaned girls and boys were identified as particularly vulnerable because they were often sleeping in the same bed with cousins and other extended family members as part of their new care arrangements.

b. SCF’s child-focused mandate

Save the Children consortium developed a joint response programme under a common management structure, sharing resources and expertise. Approximately 190 Child Friendly Spaces (CFS) were set up as a protection mechanism, to meet the immediate basic needs of boys and girls and to provide play and learning support to help them cope with the changes in their lives. Facilitators, 657 in number, including adolescents and parents, were recruited to protect and supervise the children. The agency wide commitment to protection of children — boys as well as girls and adolescents — was one of the strongest forces that focused attention to the issue.

Over 270 adults, both men and women, and more than 280 children, both girls and boys, ranging from 8-17 years old, were involved in focus group discussions and participatory rapid appraisals or one-to-interviews conducted by Save the Children. The assessment team reported several instances of sexual abuse being raised in the discussion. Cases of teachers extracting sexual favours from children in return for higher grades were also reported. With no toilet facilities, girls had difficulty finding appropriate places during the day, forcing them to step out in the dark for the purpose. Lack of privacy or separate space for women and adolescent girls was reported as a serious concern.

c. People-based process of delivery

The CFS’s set up by these agencies were designed as per the feedback received from the adults and children. This is perhaps why they were well accepted. CFS Management Committees comprising parents, school teachers, and local leaders were established to support children and facilitators and to promote long term, community-based protection system.

Lessons learnt

During assessment and need identification children need to be treated as an independent category and their needs/interests prioritised

The initiatives demonstrate the value of consulting with children — boys and girls to understand their various needs — both physical and emotional after a disaster.

CFSs are practical strategies that can be integrated into an early response programme. The community-based nature of this intervention has strong potential for sustainability and mainstreaming the protection agenda in non-emergency context as well.

ENSURING ACCESS TO SAFE WATER FOR WOMEN AND THEIR FAMILIES IN TEMPORARY SHELTERS

Location:
Satkhira and Khulna districts, Coastal Bangladesh

Large scale rapid onset disasters leave behind a trail of devastation. Under the circumstances access to potable water is a major challenge for women. In their role as carers of the family, collection of water most often rests with them imposing both physical hardship and the potential risk of violence due to the long distance to be covered, often several times a day. This case study outlines the immense value that provisioning of safe drinking water at the community and household level brings to women affected by disasters.

The experiences of Tearfund in Sudan, Wateraid in Bangladesh, CARE India in Bihar, Banchte Shekha and Oxfam GB in Bangladesh and UNICEF in Andaman & Nicobar Islands offer replicable approaches to solve this problem.

The experience

The examples include water trucking and subsequent rehabilitation of source through 'Cash for Work' linking relief with recovery. In areas where no water source existed, prevailing water sources were stretched or the population was dispersed over a wide area, household level rainwater harvesting was undertaken as a cost-effective approach.

Innovation

COMMUNITY LEVEL

a. WASH based 'Cash for work'

There was widespread damage in the immediate aftermath of cyclone Aila in Satkhira and Khulna districts of Bangladesh. Among the first interventions as response in the area was the need to clear ponds of debris. The affected women and men received much needed cash assistance under 'Cash for Work', small but timely support that put them on the path to recovery. A Project Implementation Committee (PIC) was formed in every location with a minimum of 30% women members. For carrying out the work, equal wages were paid to men and women among a group of 20-25 persons. The leader of the PIC maintained muster roll. The number of days for which wages were paid depended on the size of the pond to be rehabilitated.



Oxfam GB in Bangladesh

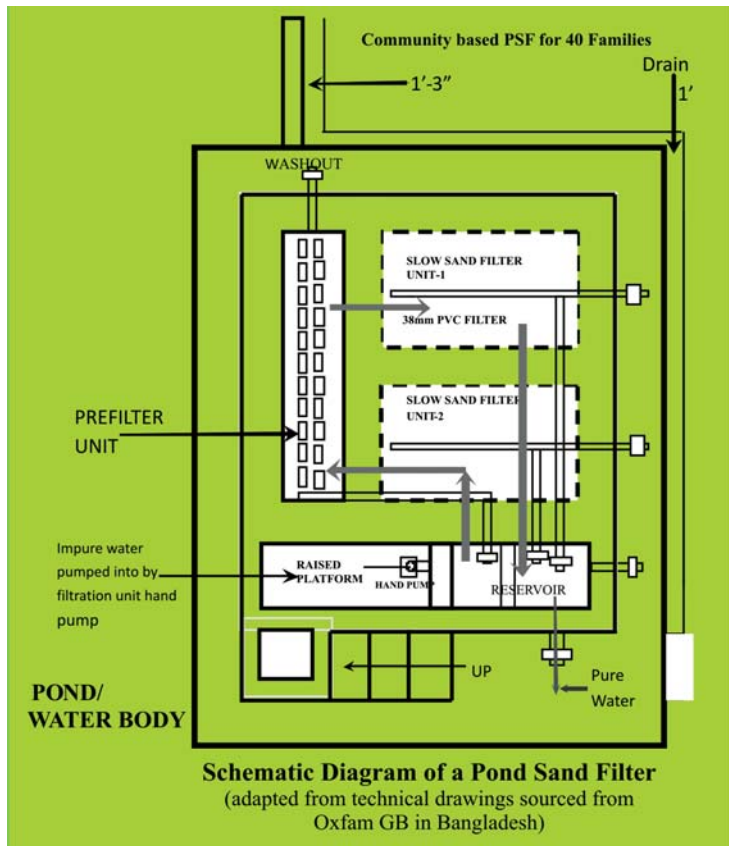
b. Deep hand pumps raised above potential flood levels

Tube wells were raised above highest flood level so that clean water supply was not hampered due to water logging during future floods to counter the problem of arsenic contamination in shallow tube wells. Deep tube wells were installed and raised above the High Flood Level in the region (in general, the plinth was raised by three inches or more, refer above diagram for details). A Project Implementation committee with women and men was formed to oversee the implementation of this activity.



Oxfam GB in Bangladesh

c. Installation of Pond Sand Filters (PSF)



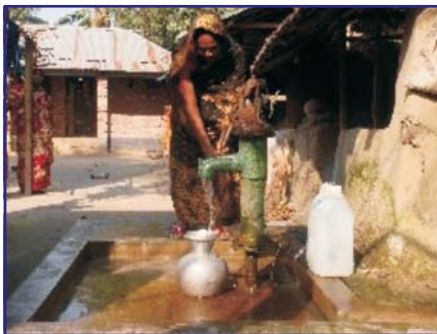
PSF is a low cost option for treating surface water, usually pond water for domestic consumption. It is used especially in the coastal belt and arsenic-prone areas. PSFs are installed at rehabilitated ponds at the community level in locations where pond water is currently being used for drinking purpose. This slow sand filter is usually installed near or on the bank of pond, which does not dry up in the dry season. Water from the pond is pumped by a manually operated hand tube well into the filter bed, which is raised from ground, and the treated water is collected through taps at the bottom of the filter. It has been tested and found that treated water from a PSF is in most cases bacteriologically safe or within tolerable limits.

d. Water purification at the point of consumption and tankered supply to locations of displacement

Huge displacement of people took place as a result of the massive floods caused by the river Kosi in Bihar in August 2008. The flooding submerged many of the water sources in the affected area and caused extreme hardship. Care India along with Aditi mobilised water purifying machines at the point of consumption in the camps together with water tanks for transporting water from a water source to the camps. As a result, widespread occurrence of water borne diseases was avoided in the

mega camps in Supaul district in Bihar, India. (Source: CARE India)

Before the construction of the PSF, women were consulted in terms of size and height of platform, tap height, size of step etc. A Water Management Committee was formed at the start of the Project- typically 9 to 11 members (min. 30% women mandatory).



Rahul Pathak

e. Online chlorination system¹⁵

A third alternative piloted in Bangladesh after Cyclone Sidr to ensure safe drinking water at the community level was online chlorination used in shallow tube wells submerged under water (with arsenic free water)

HOUSEHOLD LEVEL

Rainwater harvesting in difficult to reach areas in the Andaman and Nicobar islands (ANI), India:

In the immediate aftermath of the tsunami, there was ingress of sea water, dug wells turned saline and potable water became scarce. On some of the islands there was absolutely no source of water. The local Public Works Department was also challenged. However in some of the big islands such as Car Nicobar, source wells were chlorinated and some villages could be supplied water. However since

¹⁵ Online chlorination system is a method to introduce dissolved chlorine at source and is applied at the hand pump itself. Polluted hand pump water can thus be made safe for human consumption. Chlorine is introduced into the hand pump from a jerry can through I V tube when pumping action is performed.

the region gets six-nine months of rainfall, water harvesting over corrugated iron sheet roof of the temporary shelters was a feasible solution.

Physical components in Rainshine initiative of UNICEF in the Andaman and Nicobar Islands (ANI) included PVC gutter and pipe fittings for harvesting, aluminium buckets with filtering mediums of gravel, sand and charcoal and High Density Poly Ethylene (HDPE) Storage Tanks with taps, drain outlets and overflow pipes. (See details in Annexure 3). Tearfund in Sudan and Wateraid in Bangladesh used extremely low cost and locally available materials such as plastic sheets and bamboo poles to assemble the rainwater harvesting systems.



Subrat Dash

South Sudan faced incredible strain on the existing safe water sources due to a huge population displaced during the civil war. In response, Tearfund implemented an innovative rainwater harvesting programme to develop simple and ultra-low cost use of household rainwater. This can be applied in emergency and post emergency situations to minimise reliance on groundwater sources and contaminated surface water sources. A novel 'ultra low cost' approach to rainwater harvesting without rooftops was researched recently and adapted as part of the pilot project. It involved intercepting rainwater using plastic sheets.



Palm leaf tied to the tree trunk for collecting and channelling rain



Using split bamboo as gutter and a rope to channel the water into the container- an indigenous practice from Shyam Nagar, Satkhira, Bangladesh

Hasan Hamou

Approach

In addressing women's care giving role in providing potable water for the family, all the interventions followed a people-based approach. Women users were consulted to varied extent in the design and location of the facility; in some cases they were also given an opportunity to leverage income opportunities, and participate in empowering processes although to a varied extent. In addition, the interventions made use of locally available resources and developed them as dependable sources of water for the emergency phase. PSF interventions were based on the revival of the local ponds. Similarly, the location of the tube well was selected in consultation with the village level Water Resource Management

Committee (WRMC) which had at least 30% women. The list of selected places was handed over to local Department of Public Health and Engineering (DPHE) by the village *panchayat*. An agreement was drawn up between the owner of the place where the tube well was located and WRMC to ensure future maintenance. Water quality and arsenic testing was done and handover to community completed.

Similarly, selected shallow hand tube wells were installed with chlorination system, making water safe for drinking.



Subrat Dash

Operation Rainshine aimed at providing safe water to the tsunami affected women and their families at the point of consumption to reduce time taken in fetching water. Most of the areas were dependant on tanker based supply while some select pockets had limited piped water supply. As a result, accessing potable water was an arduous task for most families.

Several designs were successfully piloted in different contexts to collect rainwater and channel it into jerry cans and drums using locally available alternatives. All the materials used were locally available, including storage containers which in many cases were locally made clay pots. The most successful design piloted was to simply tie the plastic sheet at its corners to four poles buried in the ground. Water was then channelled into collection containers, positioned at the edge of the sheet, or through a hole at the centre of the sheet.

The above mentioned interventions provided women the opportunity to participate in decisions related to location of the facility and final detailing in relation to functional aspects such as the location and height of the taps as seen in the case of PSF though the extent of participation varied between locations and communities and was guided by the initiative and motivation of the people implementing the project, both -engineering and non-engineering. Community volunteers involved in Operation Rainshine were trained in fitting of the rainwater harvesting systems and plumbing. They were also involved in assembling the filtration system using coconut charcoal. In other examples, cash for work was also an opportunity for women to gain financially as well by participating in the construction process.

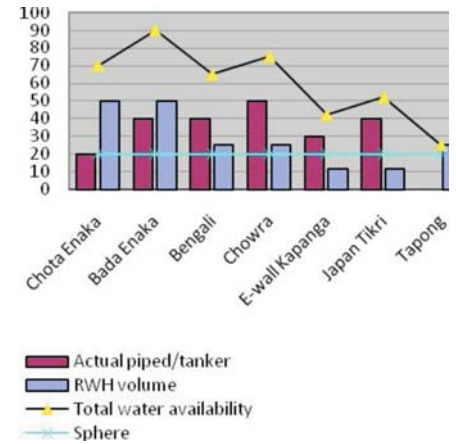
Process Enablers

Popular technologies such as rainwater harvesting, Pond Sand Filters and deep tube wells and solutions that meet a practical need based on locally available resources were applied. As women and men had knowledge and experience of these they readily accepted them.

For the demonstration phase of Rainshine, UNICEF engaged a resource institution SEDF, Kerala, with the technical expertise to set up demonstration structures and provide training to local women and men. Hygiene promotion for both men and women was also undertaken. It included cleaning the rainwater harvesting surface, first flush diversion, use of clean collection containers and appropriate storage of harvested rainwater. While there was no direct attempt at influencing gender division of roles, men were trained at management of water so that they could effectively help if required.

Lessons learnt

- By providing safe drinking water, making use of locally available resources and through the use/restoration of existing resources, women's basic needs can be attended to. These steps can also promote women's decision-making and ownership through their involvement (as was seen in the case of PSF construction in some of the communities in Bangladesh)
- Besides ease of access to clean drinking water and ease of management, such solutions reduce risk of physical abuse that women and children may otherwise encounter during water collection
- Some of these solutions can further contribute to the lives of women by engaging them in processes that empower them and build their capacities. Opportunities for participating in decision making on the design and location of facilities, access to income opportunities in construction and skill building activities are some of the processes that can empower women. For instance, young women participating in Operation Rainshine were trained on production of coconut charcoal based filter media and assembly of filters. This helped them effectively participate in the initiative as well as earn.
- Rainwater harvesting techniques offer a simple cost-effective alternative for procuring water using local material, for example, plastic sheets distributed through Non-Food Initiatives; these can be set up and managed by women and men in the community themselves. Such solutions have a high potential for scaling up given the lack of technical skill required in assembling of plastic sheet based collection systems. Such systems are relatively extremely low cost. A plastic sheet based system approximately costs 1200 Takas that is equivalent to about three days of cash for work payment.



At the end of three weeks after the tsunami in Andaman and Nicobar islands, the volume of water from rainwater harvesting was higher than piped/tanker supply
(Source : UNICEF)

CONCLUSIONS



CONCLUSIONS AND THE WAY FORWARD

Ideas that Work is a documentation of experiences of WASH interventions that show how these can contribute towards reducing risk of vulnerability to VAW. This document is by no means exhaustive. It is a live and a learning document that has attempted to bring together experiences from different disaster contexts to capture innovative and workable approaches to WASH.

In compiling these innovations a major challenge has been the limited documented material on the subject of violence reduction and WASH in early response. We believe that there is a wealth of experiences and innovative practices often driven by individual or organisational commitment. However, these are often not institutionalised and remain in the realm of isolated experience. It is important that these experiences be adapted and built upon based on contextual needs.

One of the most fundamental lessons that have emerged from the case studies is that safety while accessing and using a WASH facility is an important criterion for judging its adequacy and functionality as far as women are concerned. Only those facilities that can be accessed safely without being exposed to any form of violence or abuse can be considered to be functional. This has been sufficiently demonstrated by scores of humanitarian emergencies where resources have been invested for constructing toilets for women and these remain unused. It is important that emergency WASH programmes recognise this and integrate safety as a design objective as well as an indicator of quality. For a more meaningful handling of this issue, gender based performance criteria demonstrated by the case studies in this document, such as, privacy while use (menstrual hygiene units in Pakistan), safe access to facility anytime during day or night (bathing spaces in Bangladesh and Bihar), ease of management (rainwater harvesting in Bangladesh and Andaman and Nicobar Islands in India) could be integrated into donor agreements and design contracts.

Reducing risk to violence is a core element in design, delivery and management of WASH facilities. There are clear choices that have to be made while designing WASH facilities such as the location of menstrual hygiene units within toilets meant for women. Another case in point is the enclosed bathing facility for women. Both of these are critical to the well-being of women and are mostly missing in WASH response.

The case studies highlights that personal hygiene and sanitation facilities, that is, toilets, bathing areas and private spaces for managing menstruation, when combined as a unit is a workable strategy that allows privacy, dignity, safety as well as peer support for those undergoing emotional stress. An equally important issue is deciding the detail of the facilities for instance:

- ❖ Lighting – integration sanitations must have lighting for use in the night. The path leading to the sanitation units must be lit as well. In case electricity is not available due to damage to electrical infrastructure or unavailability of electricity, alternate sources of light such as solar lights and torches are recommended for inclusion in the list of non food items provided as relief.



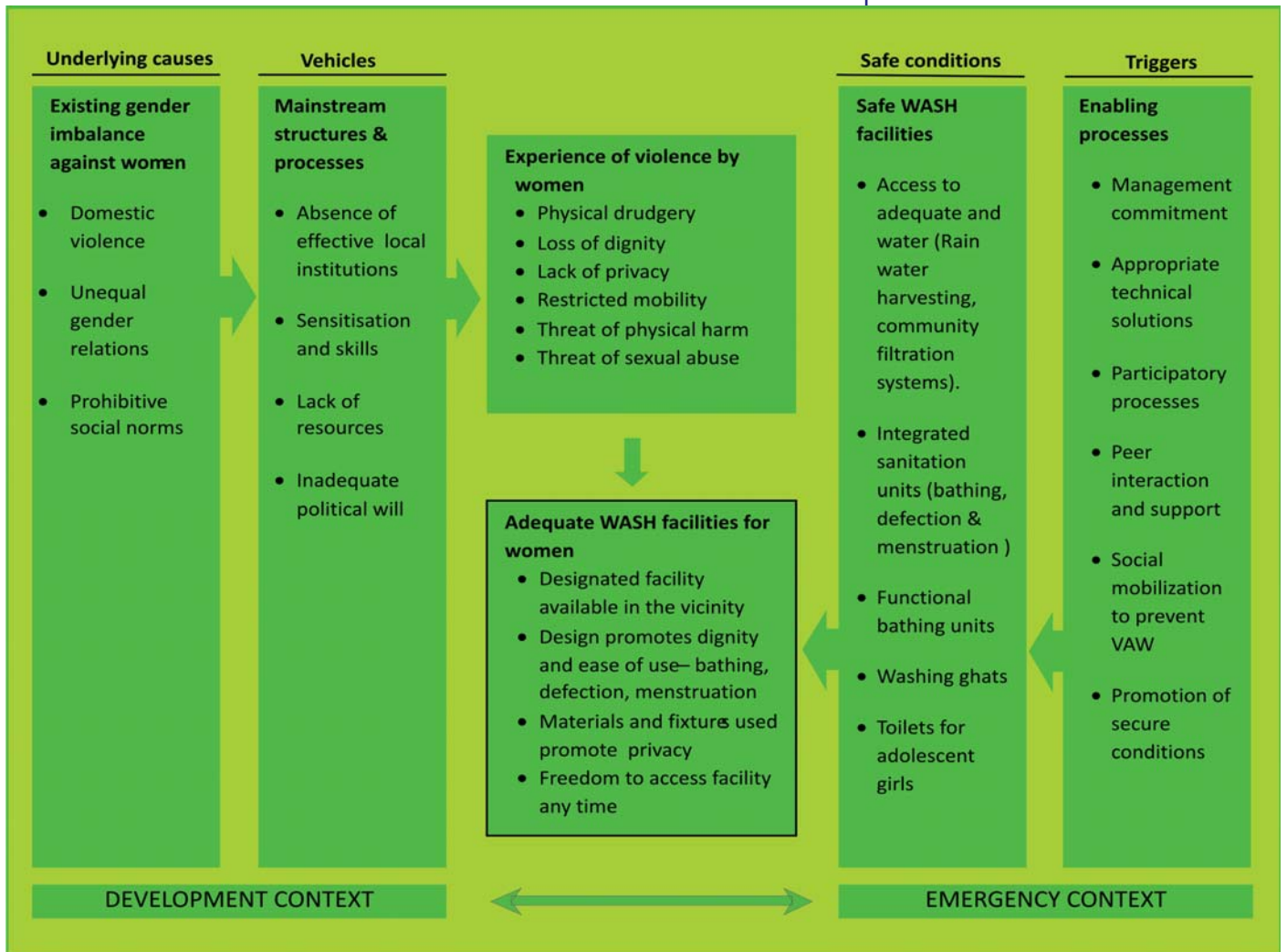
Oxfam

- ❖ Locking from inside – latches and any other hardware components for securing the door while using a toilet make a huge difference to the feeling of privacy and safety that women need.
- ❖ Choice of materials – opaqueness in the material used, however ‘temporary’ the structure is important towards ensuring privacy of the user.
- ❖ Treatment of waste water from bathing and hygiene units – this is particularly important for the bathing and hygiene units to ensure that waste (colour) water can be disposed off in ways that ensure the privacy and dignity of the user.
- ❖ Washing slab in girls toilets in CFS – this is useful as CFS toilets are relatively less crowded. As young and adolescent girls spend more of the day time hours at the CFS, it is important that such critical and private needs are met sufficiently.
- ❖ Balance between internal spaces and material use – the internal functional space has to be optimized with the standard sizes of materials available to minimize wastage yet ensuring functionality.

The exact design and detail of each facility will vary based on the location, its topography and its relationship with the planning of the rest of the camp. Nonetheless it is important that WASH is not seen as a pure technical and infrastructure led programme. In order to go beyond the ‘utility’ of WASH facilities to effective utilisation by women users, it is important to recognise the barriers that women and girls face in accessing basic services and facilities. First step in this process would be identification of gender specific needs of women based on the social roles and responsibilities played by them. This understanding can then feed into the design decisions as it is finalised with the women users of the facility. The case studies have demonstrated that, wherever women have been actively engaged in the programme and WASH provision has been used as an opportunity to reduce risk/vulnerability as a pro-active agenda, delivery of WASH infrastructure has been valued. This approach enabled user women to not only contribute to development of ideas and their implementation through contribution of labour, material or cash. Such instances are empowering and facilitate greater ownership by the people for management and maintenance of facilities.

Such an approach requires consistent engagement with women and girls through the different stages of the programme. Project personnel especially women familiar with the local language and socio-cultural norms help in breaking the ice with women and girls. Role of gender specialists in setting standards and indicators of achievement, programme design, technical design development as well as maintenance and management systems is critical. Presence of women staff at a senior level for taking part in decision making is a critical enabler. These case studies have consistently demonstrated the value of multidisciplinary teams that bring together social and technical expertise for delivering effective WASH solutions. It was also observed that previous experience of individual’s involved as well as mandatory compliance by organisations to gender related standards were useful in realisation of gender objectives of WASH interventions.

There is also a need to develop the capacity of all stakeholders for recognising and addressing VAW. Technical staff responsible for design and delivery of WASH

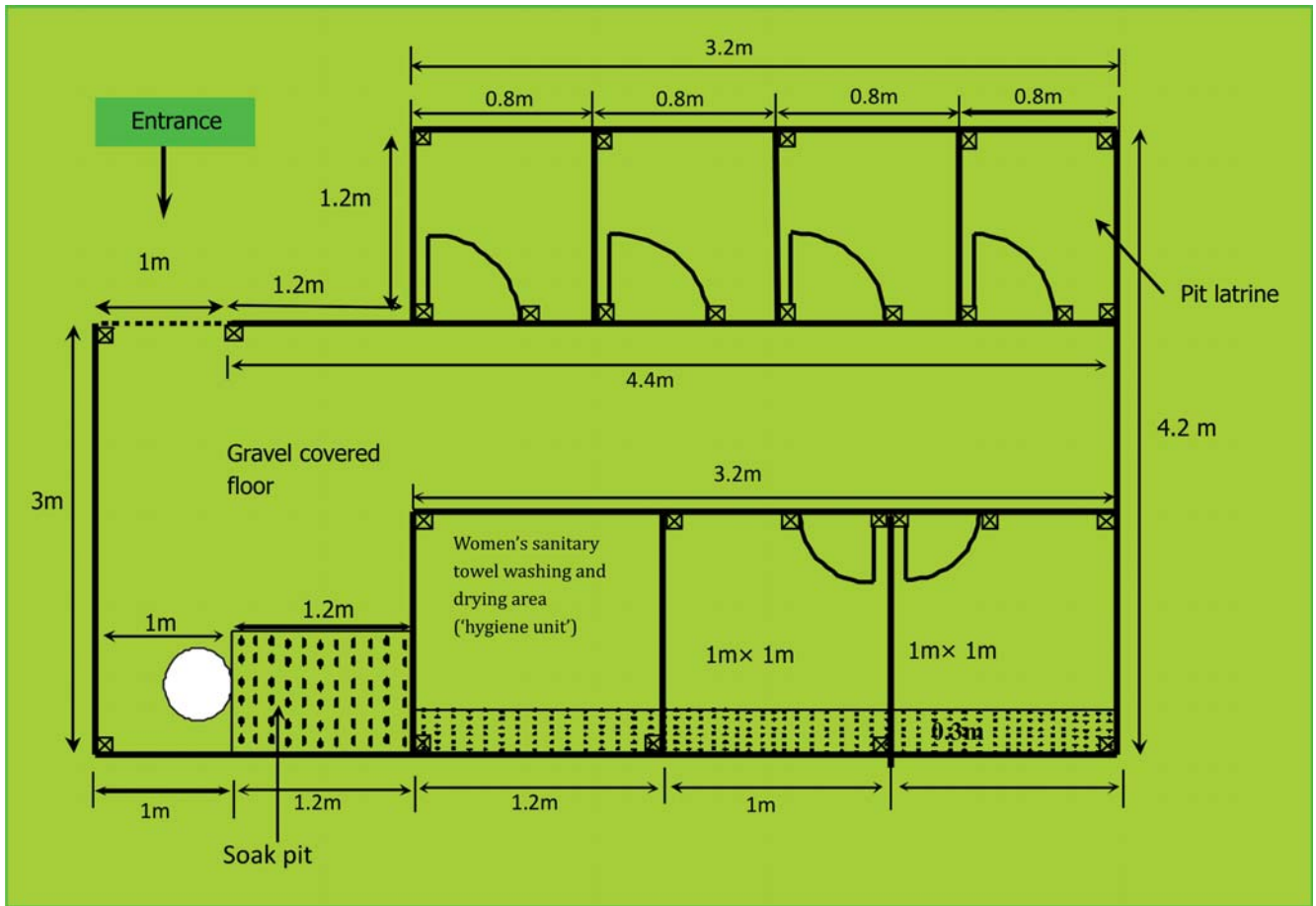


infrastructure, as well as the larger community needs to be oriented to VAW and ways of minimising risk to violence. As each of the examples will testify incorporating violence reduction in WASH does not detract from delivering on outputs – number of structures/facilities. However it does require a change in the ways of working, flexibility, willingness to think outside the box and working collaboratively with non-technical staff to find workable solutions.

The exercise of putting together “Ideas that Work” did bring out experiences that worked, equally it highlighted the major gaps in practice that deliver water and sanitation infrastructure so that the opportunity to actually make a difference to women and girls affected by disasters is not missed. We hope this contribution will help inspire and engage humanitarian and development practitioners committed to making lives of displaced women and adolescent girls safer, despite the extreme and sometimes inhospitable conditions under which they undertake their enterprise.

The journey has just begun.....

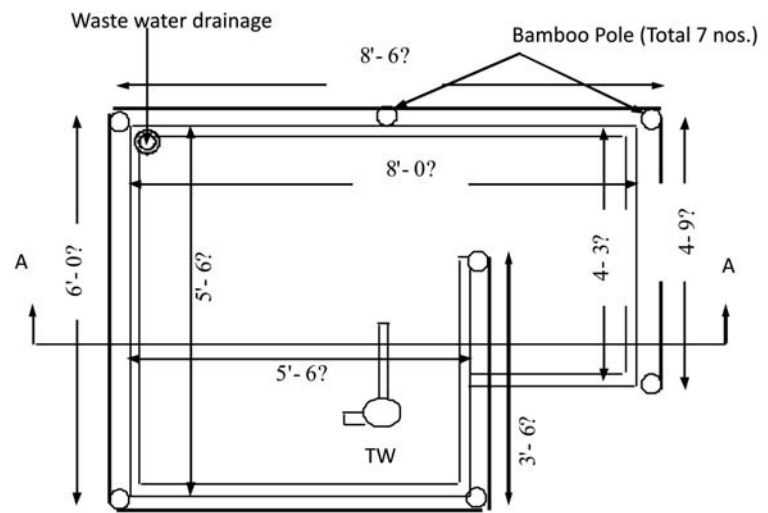
Annexure for case study 1



(Source : adapted from Oxfam 'Technical Brief Vulnerability and socio-cultural considerations for PHE in emergencies')



Oxfam GB



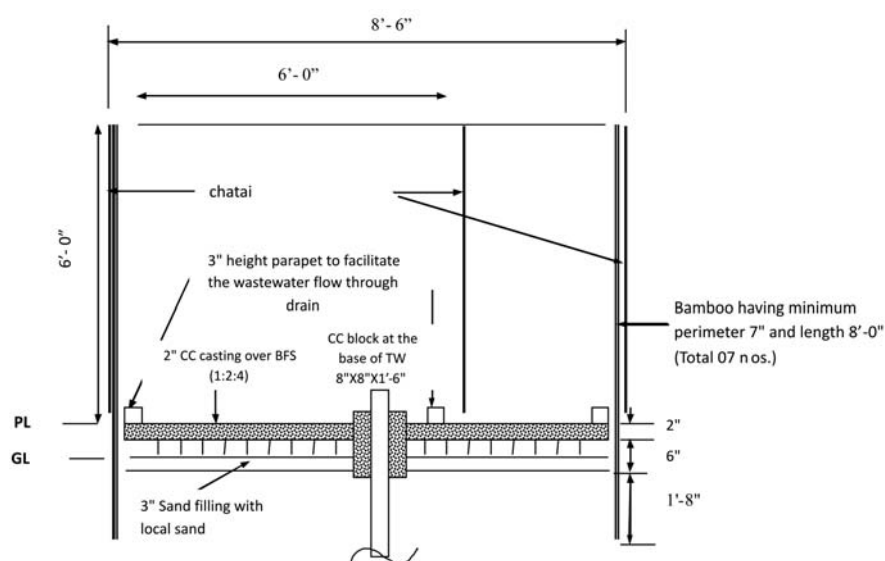
PLAN OF FEMALE BATHING AREA

Source : Oxfam GB in bangladesh

Bill of quantities for the latrine/washroom arrangement with screened area/courtyard (women’s version with menstruation/hygiene unit) - four latrines, two washrooms and one hygiene unit

Item	Detail	Quantity	Unit
1	Wooden posts 2" x 2" x 8ft (2.4m)	14	Nr
2	Wooden posts 2" x 2" x 7ft (2.1m)	9	Nr
3	Wood 2" x 1" x 7ft (2.4m) – used for cross bars and bracings for latrines, bath units and screens	36	Nr
5	Wood 6" x 2" x 1.6m - wooden frame for supporting the latrine slabs at the top of the pit	9	Nr
4	Small gravel chippings – no fines – for the ground surface, the stone drain for bath units and the top of the soak pits	0.6	m ³
5	Large stones/rocks for filling soak pit	1.2	m ³
6	Tarpaulin/plastic sheeting (thick, ideally coloured / not white, with fabric weave where possible)	100	m ²
7	‘Washels’ (washers to use with standard 2" nails – could be replaced with roofing nails, or rubber washers)	3	Kg
8	Nails 3"	1	Kg
9	Nails 2"	5	Kg
10	Nails 1"	1	Kg
11	Binding wire – for door locks and additional bracing for screen if required	2	Kg
12	Sand – for bedding to form the slope for the marble bathing slabs and for constructing the edging for the hygiene unit	0.5	m ³
13	1m x 1.2m OXFAM slabs (produced in India)	4	Nr
14	1m x 1.2m x 3/4" marble sheets – with rough surface – for bath units and base of hygiene unit	3	Nr
15	Cement – for plastering brick edges to hygiene unit and forming connection to UPVC pipe outlet	0.5	25 kg bag
16	Burnt bricks – for constructing edging for the hygiene unit to direct water into the pipe	30	Nr
17	3"UPVC pipe	0.5	M

Note – For ease of bulk supply the wood has been kept to standard lengths and the pieces cut to size on site. The remaining cut off pieces can be used as marking out pegs (source: Oxfam GB in Pakistan)



SECTION A-A

Source : Oxfam GB in bangladesh

Oxfam GB

BoQ of the Female Bathing Corner along with hand TW (200' depth)

Item no.	Description of work	Unit	Qty.	Rate	Amount
Platform construction	Brick required in the BFS, Parapet etc.	nos.	180	4.5	810
	Cement for CC casting, plaster work, CC block, Net cement finishing	bag	2	370	740
	Pakshi sand for 1/2" thick plaster work (1:6)	cft	2	25	50
	Khoa (1" downgraded) required to construct CC block at the base of the TW & 2 inch thick CC works (1:4)	cft	8	50	400
	Sand filling with local sand under the platform	cft	12	8	96
	Mason charge for construction of platform	L.S.	1	400	400
	2" dia PVC pipe for waste water disposal	ft.	8	25	200
	Subtotal				2,696
Tube well	Boring by using 50 mm dia cutter to suitable aquifer using 38 mm dia G.I pipe) From 0.0 ft. to 230 ft.	feet	200	4.5	900
	Supplying, carrying, fitting, fixing and lowering of tube well set completely as per standard specification and direction of Engineer-in-charge as given below -				
	a) 38 mm dia G.I. pipe: 3 ft length (Basundhsra Gold)	no.	1	300	300
	b) 38 mm dia PVC pipe, D grade (RFL/National Polymer)	feet	170	17	2,890
	1.5" dia G.I Socket (Bashundhara Gold)	no.	1	100	100
	Supplying, fitting and fixing 38mm dia and 10 ft long screen (RFL uttam)	nos.	2	225	450
	5 ft. long sand trap of dia 1.5" dia PVC pipe RFL	ft.	5	17	85
	Supplying fitting, fixing & fitting # 6 hand pump (RFL light)	no.	1	1450	1,450
	Supplying of fitting and fixing e.g. solvent cement, adapter/ plain socket, end cap, sylhet sand etc	no.	1	200	200
	Subtotal				6,375
Chatai	Bamboo mate (Chatai) of size 6 ft. X 8.5 ft. as per supplied design	nos.	1	540	540
	Bamboo mate (Chatai) of size 6 ftX 6 ft as per supplied design	nos.	2	400	800
	Bamboo mate (Chatai) of size 6 ft. X 4.75 ft. as per supplied design	nos.	1	310	310
	Bamboo mate (Chatai) (6 ft. X 3.6 ft.) as per supplied design	nos.	1	230	230
	Bamboo pole of best type, 8 feet long and minimum dia 2.25"	nos.	7	35	245
	Nails, wire etc.	L.S.	1	18	18
	Labour charge for fitting and fixing of Bera	L.S.	1	100	100
	Subtotal				2,243
Others	Carrying of all materials to the site	L.S.	1	1000	1,000
	Subtotal				1,000
	Total				12,314
	Contractors Profit				1,231
	VAT & Tax (4.5 %)				610
	Grand Total				14,155

Source : Oxfam GB in Bangladesh

Total cost of the female bathing corner is Tk 14155. While the platform and tube well are the major components, of the total cost 15.8% (2243 Tk) is spent in providing a screened cover to the bathing space in the form of locally available bamboo *chatai*.

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