

***MAINSTREAMING GENDER IN
SANITATION AND HYGIENE IN UGANDA***

**A PAPER FOR PRESENTATION AT THE SANITATION AND
HYGIENE CONFERENCE In South Africa, 29TH July –1st august**

**WaterAid _Uganda
&
The Uganda Water and Sanitation NGO Network (UWASNET)
July 2002**

Mainstreaming Gender in Sanitation and hygiene in Uganda.

1.0. Introduction.

The theme of this paper is the mainstreaming of gender in sanitation and hygiene with a purpose to facilitate incorporation of gender in the African sanitation and hygiene conference. This paper therefore focuses on four issues presented as per structure given below;

- The concept of mainstreaming and the status of sanitation in Uganda
- The progress made by Uganda in this field, gaps and lessons learnt with reference to the given topics (Ref: attached TORs).
- Incentives/benefits for solving these problems with examples.
- Conclusions and Recommendations therefrom.

2.0. The Concepts of Gender and Mainstreaming.

Gender is a complex concept often with definitions as variable as the diversity of cultures, geographical location and state of advancement of a society. A more universal definition however depicts gender as a relational development concept that describes men and women's (boys' and girls') social and economic relations in society. Gender is socially and culturally determined and has nothing to do with capabilities and very little with the sex of a person. Gender mainstreaming is the incorporation of gender issues in development programs so that at all levels gender is automatically addressed (DANIDA, 2001).

Consequently gender mainstreaming demands a deep analysis of the policies, objectives, strategies and activities of a society to identify stakeholders at each stage, their roles and responsibilities and the dynamism created as a result of these people working together to meet the set objectives for development.

In a gender sensitive system of governance the requisite machinery is created to facilitate the process of mainstreaming so that both men and women are given opportunity to participate in the development process equitably. Similarly mainstreaming gender in sanitation and hygiene would redress gender inequalities in this sector that impede development.

Gender mainstreaming, for the purpose of this paper will be addressed within the context of the empowerment framework which addresses the practical (immediate) and strategic needs. It identifies five different levels of inequality namely welfare, access, conscientisation (i.e. understanding the difference between sex roles and gender roles), participation and control (Tina Wallace, 1991). The Welfare level reflects practical needs and the higher levels denote strategic needs.

3.0. The status of hygiene and sanitation in Uganda

The National Sanitation guideline (2000) define sanitation as a process where people demand, develop, and sustain a hygienic and health environment for themselves erecting barriers to prevent the transmission of disease. The process thus involves building, use and maintenance of latrines and other sanitation facilities; and also involves learning, behaviour change, organisation, and collective action with other community members.

In Uganda the basic unit for planning, financing, building and maintaining sanitation facilities is the individual household. The household members are supposed to discuss the existing situation and lay strategies to improve it with the support and encouragement of community mobilisers, the Watsan (water and sanitation) committees and the LC1 executives. Other participants in the sanitation process are the service providers, e.g.; landlords, land owners, community health committees, NGOs, CBOs, contractors, Sanplat (sanitary platform), Masons; and the implementation agencies like the district, Sub-county and Parish Councils and committees and the National level institutions responsible for policies, planning, resource mobilisation, training and co-ordination of all sanitation activities.

The responsibility for sanitation at household level has put women at the centre of the sanitation process, as they are the main managers and users of sanitation facilities.

By virtue of their reproductive roles women are responsible for proper maintenance and ensuring hygiene education of family members. Women, however have a low decision making status at household level and especially in rural areas they depend on men for financial support. This calls for conscientisation at the policy level in order to devise strategies for empowering women to participate beyond traditional roles.

Sanitation coverage in Uganda is still low with only 42% of the rural population and about 26% of the urban population lacking adequate sanitation (i.e. household latrine). There are wide regional differences; some districts having less than 10% while others have over 85% coverage. Most household pit latrines are tradition pit latrines providing minimal protection and privacy. The demand for improved pit latrines using sanplats is low largely due to costs involved, the inadequate supply and the poor quality produced by the private sector. A number of cultural taboos including sharing of latrines with in-laws have blocked the effective use of latrines.

There are sanitation issues peculiar to urban and peri-urban areas They have a bigger demand in towns because of the dense populations. The situation is even more grave in some peri-urban areas whereby the people have resorted to faeces disposal in “mobile toilets” or polythene bags which are discarded in banana plantations, drainage channels, or rubbish bins.

In towns there is provision for public latrines toilets and a number of families have to share such facilities. Institutional/ public latrines are inadequate and the majority are traditional pit latrines. There is increased demand School latrines in particular due to the increased enrolment following the UPE policy.

Public latrines bring to the forefront gender based privacy issues. Many schools do not have facilities for boys and girls and this is reported to be a big factor in the high drop out rate of female teenage students. Women in general have special sanitation needs.

The poor sanitation situation in the country has resulted in reduced health status, poverty at household level, environmental degradation and poor performance in education especially for girls. (MOH, 2000, PEAP 2000)

4.0. The progress made in gender mainstreaming in Uganda.

4.1. Formulating policies.

4.1.1. International and National policy framework.

The government of Uganda has in the last decade progressively developed its approach to gender equity in all sectors of development, that is, education, health, water and sanitation, agriculture, politics, etc. It has sought to redress gender imbalances through creation of an enabling environment through legal instruments and sector specific policies.

The government works within the international declarations governing equality and women's rights; the Nairobi forward looking strategy, 1975, the UN convention on the elimination of all forms of discrimination against women (CEDAW), 1994, the Platform for Action and the Beijing Declaration 1996, etc. All these frameworks advocate for the right of women to participate in the development processes on equitable basis with men.

At national level, some of the key legal frameworks addressing gender equity comprise of; The Uganda National Program of Action for Children (UNPAC) 1992, The National Women's Council Statute 1993, The constitution of Uganda, 1995, the Gender policy 1997 and the National Action plan on Women, 1999.

One of the major goals of UNPAC is to provide policy solutions that are equitable to all groups, "particularly, women, children and those in disadvantaged areas of the country." The National Women's Council Statute aims at engaging women in activities that are of benefit to them and the nation and to establish channels through which economic and social services and amenities may reach the women in all areas *inter alia*.

The constitution prescribes for equal rights of women in political, social and economic activities (Article 33) and affirmative action for women as a marginalised group (Article 32). The constitution also prohibits laws, customs and traditions that undermine women's status.

The Gender policy 1997, is an integral part of the national development policy. The overall goal of this policy is to mainstream gender concerns in the national development process in order to improve the social, legal/civic, political, economic and cultural conditions of the people especially women. A review process is in progress to bring this policy in line with the current macro-economic policy framework of poverty eradication.

The National Action Plan is formulated based on the Beijing Declaration and Platform for Action. It highlights actions to improve women's status in four priority areas, namely;

- Poverty, income generation and economic empowerment,
- Reproductive health and rights,
- Legal framework and decision making
- The girl child and education

While the earlier declarations and policies tended to take a "Women in Development" approach (WID) approach; targeting inequalities through women specific programs, the more common approach globally in the 90s and beyond is a mix of WID and "Gender and Development" (GAD). This is because women specific projects have in the past been found to create new obstacles, namely time and labour constraints for women.

The sector specific policy is still in draft form. However a number of actions have been undertaken since 1997, to revitalise the sanitation sector since its breakdown in the 70s and 80s due to political turmoil and civil strife. In the late 80s and early 90s various water and sanitation

projects were started; RUWASA, WES, STWSP etc. In these projects it is reported, sanitation still lagged behind the water supply component.

Such projects and NGOs (national and international) have established systematic approaches in addressing gender issues following accumulation of experiences through working with communities.

The NGO and projects (some) gender entry points include sensitisation of the nuclear family, capacitating civil servants at decentralised level, civil education, and advocacy at policy level.

In 1997, a Sanitation Task Force was formed which developed a draft sanitation policy, Guidelines on technical options and promotional material. The activities of the task force culminated into the national sanitation forum in October 1997 attended by political leaders country wide, representatives of ministries, NGOs and donors agencies. The aim was to build commitment to sanitation at all levels. The output of the forum was the Kampala Declaration on Sanitation 1997, (KDS), which endorsed the guiding principles and provided a ten-point strategy for action at district level, as spelt out below:

- Exemplary leadership and commitment
- Full community mobilisation
- District, Sub-county and urban authority focus
- Coordination and multi-sectoral approach
- Focus on schools
- For a at districts
- Central role of women
- Private sector/NGOs development and service delivery
- Capacity building at district level
- Policies, Guidelines and Standards

The activities identified under “central role of women” address issues of representation of women, youths and persons with disabilities, involving these categories in sanitation promotion activities while ensuring gender balance; and the recruitment and deployment of women field workers.

The KDS is thus a comprehensive implementation guideline for the districts, developed through a wide consultative process. However, it does not treat gender as a crosscutting issue, rather the emphasis is on numbers of women participating.

4.1.2. Links To Poverty and Economic Development.

Uganda’s key policy and planning framework is the Poverty Eradication Action Plan (PEAP) which aims at reducing income poverty to 10% by the year 2017. All sectoral policies are evolved within this context.

The government’s major goal within the PEAP framework that addresses sanitation and hygiene, is the undertaking to improve the quality of life of the people. Under this goal objectives and activities are set out geared at achieving 100% safe water coverage within the country by the year 2015. It is at this level that sanitation and gender are relegated to a subsidiary position in relation to water. Objectives and strategies describe quantifiable targets and are glaringly gender blind. In

the PEAP there is no detachment of sanitation from safe water the former being sub-summed in the latter. Coverage of gender issues is inadequate in that it only stops at pointing out heavy workload of women for the water collection activities. **The PEAP also makes reference to the possible negative effect of the involvement in water and sanitation activities on girls' education implying that they are more involved, in water collection than the boys, alongside mothers.**

The PEAP states that the household is expected to cater for its own facilities with government and other stakeholders playing a facilitation role mainly in terms of software (mobilization and training). It is a documented fact that women are traditionally responsible for the daily practices related to household sanitation, maintenance and cleaning (MOH, 2000, DANIDA, 2001). The allocation of the responsibility to the household at this level right away imposes a burden on women, especially considering that the PEAP is silent on gender sensitive objectives and strategies for sanitation and hygiene.

The relatively low key status accorded to sanitation in relation to water provision, among other factors pointed out later in this paper, may have well contributed to gender inequality through enhancement of the woman's traditional household chores, that is, cleaning, health care, washing, water provision, etc. The theme of women's specific roles and subsequent workload, as a basis for incorporation of gender issues in various sectors runs through the PEAP. PEAP-related programs and activities therefore should be correctly focussed to reduce inequalities in household division of labour.

It is thus an important **entry point** for tackling gender issues in the related sector planning and implementation processes.

It can be said at this point that if women are to be effectively involved in poverty eradication, alleviation of the chores that take up their productive time should have been addressed in the PEAP water and sanitation objectives and strategies. The PEAP pointed to links between poverty and lack of access to water and adequate sanitation, which lead to high disease prevalence resulting in high medical bills, a drain on household finances. The poor health traps the people in a cycle of diseases, health and poverty.

Overall, the PEAP and other national policies have provided a basis for redressing gender imbalances. Positive results are illustrated by the increase of women in politics and high decision making positions. Enrolment and qualification of women at institutions of higher learning and in professions originally dominated by men has increased and gender focussed structures (e.g. Local Councils and grass-root committees, gender responsive NGOs) have been created by government and civil society specifically to correct gender imbalances. To this effect **several entry points** have been created to mainstream gender in the development process.

The gap in the PEAP is emphasis on creating strategies that free time and energy for women so that they can engage in economic activities other than solely carrying out domestic roles from which they do not earn income.

4.1.3. Sector specific policies framework.

4.1.3.1 Equity, demand and hygiene promotion

In accordance with the national policies the sector specific policies have tended to address gender equity with reference to women's roles and representation. The relevant policies are; The Uganda

Water Action Plan (WAP), 1994, the Gender Policy of the water sector (GPWS), 1994, The Water Statute (WS), 1995, The National Water Policy (NWP) 1999. While the WAP highlighted the role of women in provision, management and safeguarding of water, it pointed out that special efforts were necessary to facilitate their effective participation in decision-making fora concerned with water resources thus identifying the importance of gender equity in this regard.

According to DANIDA, 2001, the GPWS provided for gender sensitivity and mainstreaming in the water and sanitation sector related planning, training and education, implementation strategies and activities. This policy however seems to have been overtaken by events contrary to its objectives as illustrated by the subsequent NWP 1999, which is currently the policy framework for water and sanitation. The NWP among its policy directives provides for the promotion of “sustainable provision of clean safe water within easy reach and good hygienic sanitation practices and facilities, based on management responsibility and ownership by users, within decentralized governance.” This policy is to a large extent gender blind and only refers to women with reference to WAP guiding principle as mentioned above, and also mentions “women’s participation” under institutional development strategies.

The above policies highlight women’s traditional role and advocate for their participation therefore helping to visibilise them in this sector. **This is a means of anchoring them in the process of hygiene promotion, and what is lacking at this stage is the emphasis on participation along men.** Thus hygiene promotion is portrayed as the responsibility of women entirely.

A comprehensive policy on sanitation and hygiene is still in the making and is only in draft form. Presently the sanitation policy under the ministry of health basically adopts the goals of the UNPAC as priorities for social sector development (MOH sanitation guidelines). It sets out targets for improved health and nutrition, water and environmental sanitation and basic education. The National Sanitation Guidelines spell out the policy, institutional framework, strategies, implementation steps and technical options based on these targets. The goals highlighted in the guidelines only make reference to gender equity with regard to increasing the survival rate of girls in schools and reducing malarial morbidity of pregnant mothers.

Although the guidelines refer to the household as a homogeneous entity thus failing to disaggregate it by gender under the strategies, they recognize the central role of women in sanitation management at household level. Consequently the guidelines undertake to ensure women’s representation among others, at all levels of the sanitation delivery system, again implying pursuance of gender equity.

Sanitation has been delegated to the household as per national policy. This should therefore be the focus for gender responsive policy objectives, strategies and activities especially considering that the women’s role at this level has been identified. There is a gender gap to this effect that has tended to be filled through representation on delivery structures. This has had the positive result of creating working relationships between men and women but has also created difficulties for women in mobilizing the male members of some communities where gender biases are deep seated, as reported by DANIDA, 2001.

The above state of affairs calls for addressing the wider gender concerns of access, conscientisation at policy level, effective participation of the female mobilisers and strategies to increase women’s control of resources by women at community and household level. The purpose is to increase women’s empowerment and therefore their effectiveness.

Other related policies are the; Public health Act 1964, National health policy 1999, Local government Act 1997 and the Universal primary Education policy.

It is evident that the sector related policies did not capitalise on the enabling framework earlier described to integrate gender concerns at that level beyond recognition of women's role and the need for representation. This constitutes a gap in gender mainstreaming at both national and sector policy level. Gender equity is not perceived in terms of relations between men and women but more from the angle of targeting women specifically. This approach falls within the concept of WID, which though effective in uplifting women with regard to basic needs may be harmful to their strategic position in the development process. It tends to confound women in their traditional roles thus increasing their workload instead of introducing ways of sharing responsibility and roles. The long-term implication is that gender imbalances will continue to be mainstreamed in the water and sanitation sector.

Restructuring of institutions responsible for water and sanitation in the MWLE and policy reviews are in progress for example, the sanitation and gender policies. This opportunity should be used to advocate for clear gender integration in policy and structure, which will facilitate lower level implementation.

On the other hand, since policy reviews and amendments tend to be long and time consuming the best option is to take an interim action to redress the gender gaps at the implementation level as pointed out below.

4.2. Institutional arrangements.

The structure for implementation of sanitation and hygiene comprises of three key ministries namely the Ministry of Water Lands and Environment (MWLE-DWD), the Ministry of Education and Sports (MoES) and the Ministry of Health (MOH). The sanitation function under the ministry of health is guided by the National Sanitation Guidelines described above. According to the guidelines, the Environmental Health Division of the MOH coordinates sanitation. It is responsible for coordinating the formulation of software and hardware technologies, training materials, policies, guidelines and standards and is the secretariat of the Sanitation Task Force. It also provides technical support to the district and urban councils, carries out monitoring and evaluation and dissemination of information on sector activities. The environmental health division (EHD) is poorly staffed and is severely under funded compared to other divisions in the MOH. Such a situation reflects the low priority accorded to sanitation and hygiene as mentioned earlier in this paper, in which case gender and other crosscutting issues will automatically be under looked.

The National Health guidelines do not make a clear demarcation of roles between the DWD of the MWLE and the EHD of the MOH as both are depicted as lead agencies in this sector by the different policies. The guidelines do mention however that the DWD of the MWLE also has a responsibility to promote sanitation and hygiene. In practice the Directorate of Water Development (DWD) is charged with safe water provision for the rural sector and small towns, and the National Water and Sewerage Corporation (NWSC) under the same ministry, water provision and sewerage systems for the large towns. The DWD's role in sanitation and hygiene is mainly through community mobilization by hygiene education and technical support for provision of basic sanitation facilities.

The Directorate for Water Development (DWD) is the lead agency for water and sanitation provision in the country. At this level an institutional framework has been created to ensure women and men's participation. A multi-sectoral approach to planning that is part of the new

principle of sector wide planning (SWAP) engenders the participation of all stakeholders including the NGOs and the private sector.

Within this context the Ministry of Water Lands and Environment (MWLE) formed a Water Sector Working Group (SWG) that is responsible for the planning, budgeting and monitoring for the sector. The SWG is the linchpin between low-level plans and top planning machinery at the center and would therefore be a **strategic entry point for gender**.

In the DWD, of particular importance are the Technical Support Units (TSUs) created to support districts to manage investments in water and sanitation. The functions of these units should provide **entry points** for gender integration although at the moment gender issues were not explicitly covered in the capacity building process by DWD. It is therefore hoped that with decentralization progress the relevant gender issues will be brought into the planning framework.

The MOES is responsible for promotion of sanitation in schools and the MOH mainly for community/household sanitation. In the past the issue for these three sector ministries has been the weak inter-linkage such that there has been duplication of efforts and wastage of resources. **Of recent however the three have come up with a strategy to strengthen the inter-linkages and clearly define the functions of each sector.**

The three sectors do not seem to have incorporated structures to facilitate mainstreaming of gender at the national level, rather such arrangements are concentrated at district and community level as will be explained in this paper. This may be due to the fact that the roles of the different institutions have been focussing on service delivery directly to the user level hence incorporating gender at this level through facilitation of women's participation. This has been reinforced by specific donor funded projects which emphasis gender integration in their approach.

However the role of DWD has been reviewed by government to take on a more facilitating approach, therefore emphasis is more on planning and policy than direct implementation. **This is an entry point in form of an opportunity to use lessons earlier learnt in the field to integrate gender issues at this level.**

The other agencies at national level are;

- The Sanitation Task Force, STF (1997) an inter-agency working group whose roles are promotion, guidance and monitoring. **This is another key entry point for gender balanced representation but unfortunately the STF has not been active.**
- The inter-ministerial steering committee, IMSC, comprised of Permanent Secretaries from relevant ministries. Its role is to review overall sectoral policy, co-ordination and promote inter-sectoral activities and promote appropriate policy changes of individual sectoral projects. **Again this is an opportunity for gender mainstreaming that has not been fully exploited.**
- The Ministry of Gender, Labour and Social Development responsible for overall gender responsive development and promotion of women in leadership and decision-making. This ministry continues to concentrate its efforts on mobilisation through gender awareness creation, identification of women specific issues and causes of imbalance and skills training.
- The ministry of local government which through the decentralized system supports the training of local authorities and develops their management systems.
- The health division and education promotion division responsible for developing and disseminating health education materials.

There are barriers however right from this stage of national institutions. Gender does not appear to be a key issue on the agenda of participation at this level. There is no mention of affirmative action to ensure inclusion of gender sensitive structures or individuals. Worse still the Ministry of Gender, Labour and Social Development (MGLSD), which has the overall responsibility of mainstreaming gender in developmental programs, has not been a member of the Sector Working Group, SWG, (a position now under review).

The SWG being a strategic point in the planning process it is necessary to include gender aware and gender skilled individuals other than women per se. It is the stage where gender practical and strategic needs would be addressed i.e. the short- term and long- term interests.

There are elaborate structures further down the ladder up to community level responsible for planning, coordination, supervision, budgeting, promotion and monitoring sanitation activities on cascading levels and as described briefly below. These provide **gender entry points**, which are yet to be fully exploited.

- The district or urban council-LC5.
- The district management team (DMT)
- Sub-county council-LC3
- Sub-county action committee (SCAC)
- Parish development committees (PDCs)
- Community (village) level.

At community level, the key structures are;

- The households: planning, financing, building and maintenance.
- Water and sanitation (Watsan) committees: represent community, plan and conduct surveys, promotional and monitoring activities, organize support for the elderly and disabled.
- LC1 Executive: overall leadership at community level.
- Urban areas land lords, landowners, and community health committees: provision of adequate sanitary facilities, adequate room for construction of facilities and management of public latrines (e.g. in market), respectively.

Others involved in service delivery at all levels are NGOs, contractors, sanplat producers and masons.

4.3. Implementing Policies.

The implementation of policies follows the institutional arrangements described above. DWD and EHD emphasizes participation of women alongside men in the water and sanitation decisions at community level in line with the affirmative action of the decentralization policy that encourages women participation for at least 30% of the positions on local council structures Local Government Act 1997. Gender sensitivity in both EHD and DWD is thus operationalised through gender sensitive structures like the water and sanitation committees for which the practice is inclusion of at least 30% women on the membership. In addition DWD has institutionalized source caretaker teams, which are gender balanced in terms of one-man one- woman membership per team.

The above arrangements are important to ensure that gender specific interests and needs are addressed and has yielded positive results as mentioned later in this paper. It does not necessarily address strategic needs unless accompanied by the requisite gender training. Hence the importance of addressing the wider gender concerns mentioned under section 3.1.3.

It is a contention among gender scholars that such measures of inclusion of women, have created new obstacles in form of added workload and burdens for the women members who are finding difficulties in enlisting support for sanitation programs from the community members and in some cases the cooperation of the male members of the community. In terms of work load as earlier pointed out women are already in-charge of sanitation at household level and so the extra duties create more work. In addition effective influencing of decisions is hampered by women's lack of empowerment in the household and community due to their lack of income generating capacity.

In a number of communities where success has been enlisted men and women working together have provided role models for their communities.

The community being an important implementation stage frustrations of gender balance policy can be avoided with appropriate skills training and empowerment as elaborated in the section on conclusions and recommendations.

In addressing gender the rural- urban divide has been identified as an important factor by the water sector gender study. This is consequent upon complexity of the livelihoods of the urban populations as opposed to the rural populations who are mainly involved in agriculture as a means of livelihood.

In towns both men and women in most households are employed outside the home. This introduces a time constraint for the community and an added burden for the mobilisers responsible for securing the participation of members in the water and sanitation activities. It is also said that with wives working, men tend to leave the burden of contribution to the wife as the responsibility of sanitation rests with her traditionally. This is supported by a world bank study (WB 1993) which established that men tend to abdicate responsibility once the wife starts earning income.

In addition, female-headed households are proportionately higher in towns compared to the rural. This situation poses a further problem to the policy of financial contribution to construction and maintenance, as female-headed households are normally poorer than male headed households. In most households women do not have the capacity to contribute. This is an obstacle that should be addressed when setting up gender mainstreaming strategies.

The payment policy of some projects, to access public toilets in towns, introduces another gender barrier again due to the differential in affordability by the different households, hence affecting women more than male household members because their demand is higher.

Privacy of public toilets in towns is more difficult to ensure than in rural areas as a number of households sometimes have to share a pit latrine. In some towns, water points are sited in a manner that opens girl children to sexual abuse to or from the water collection points. In addition the youth in the urban areas are a menace in that they vandalize the water facilities.

Thus with changes in geographical locations, cultural setup and livelihoods practical and strategic gender needs change necessitating different strategies for gender mainstreaming to suit specific situations, in order to eliminate the above difficulties.

Nevertheless for both rural and urban the needs of women, men, girls and boys are different and should be identified in that context. This has to be addressed at the planning stage of the sector-working group, the Sanitation Task Force and the interministerial committee.

The water and sanitation sector policy advocates for a demand driven approach, which envisages increased participation and ownership of the programs/projects. Currently the inequality issue of concern as identified by the UPPAR is the divide between better off and the poor who cannot afford the capital cost contribution of facilities. It is evident that gender inequality is also an issue as demand is based on affordability, which is in turn based on income generation capacity a gender issue at household level.

A review of this policy could also be an entry point for gender mainstreaming at the community and household level.

Due to the fact that women are affected differently from men, their demand for facilities, safety and privacy when using these facilities, is higher than that of men. Women's gender specific needs in this context make it difficult for them to reveal their needs. On the other hand, men who are less inconvenienced by lack of sanitation, are relatively less interested in the facilities.

This differential demand should be an entry point for gender mainstreaming in sanitation provision, so that women's views about siting, type of structure and access are collected.

4.4. Hygiene Promotion

Promotion like demand is based on the existing policies and structures. Sanitation being a household matter has lead concentration of activities at community level. One of the objectives of the PEAP for the water and sanitation sector is to increase community participation. To realize this objective the structures described above have been put in place for mobilization and implementation.

As already noted, in Uganda there are several sanitation and hygiene promotional channels just as there are several implementation structures for implementation. These comprise of the central level organs like ministries, NGOs and the media, and the district and community level.

The organs seen to be promoting sanitation at community level are part of the MWLE, MOH and MoES. The former two, MWLE and MOH, work through the decentralized structures and Watsan and health committees. The MoES works mainly through primary and secondary schools with a strategy to use children as **change agents** through practicing new habits which, parents particularly mothers eventually adopt.

It is important that this approach does not enhance the gender bias against the girl child through overloading her with responsibilities but rather the strategy should be to give equal responsibility to the boys and girls to promote improved sanitation in their families.

At community level, the strategy is to create ownership and sustainability. Household meetings and competitions are the major channels of promotion and they are seen to be working and introducing change according to DWD reports of increasing coverage of improved facilities.

Leadership in promotional activities is not strong enough in that community influential groups, e.g., local politicians, religious leaders, are not active in advocating or even practicing safe sanitation in their homes. The national guidelines on sanitation spell out the roles of such groups, which requires follow up through sensitization.

Targeting, leaders for gender sensitization would facilitate mainstreaming gender in the promotional activities. Otherwise with such apathy sanitation could easily be an area relegated more and more as women's activity in light of their household roles and responsibilities.

4.5. Financial sustainability and building capacity.

For sustainability of improved sanitation and hygiene participatory training methods are promoted by the MOH, as these create commitment to the self-planned and self initiated activities. Meetings, discussions, problem solving techniques resource mapping and other participatory techniques, which instill the practice of bottom up planning, produce common thinking and collective responsibility for actions. This lesson should be extended to gender training in that it helps to build confidence and self-esteem in women thus empowering them with skills in planning and decision making alongside men.

The change agents identified at the various levels are a strategic entry point for mainstreaming gender through repeated gender sensitive messages through the above training techniques.

Financial sustainability is envisaged through the policy strategy devolution of responsibility; for construction, operation and maintenance of sanitation facilities, to the household. This is in line with the demand driven approach, which is based on the principle that communities will choose the type of facilities within their financial means. The two issues arising here are the poverty status especially of rural households and the lack of economic base of women in the household.

The strategy of demand driven approach must establish channels of income generation for the households within a gender perspective.

5. Benefits/ Incentive

Creation of a ministry responsible for gender has brought gender issues to light especially in terms of the disadvantaged position in employment, education, politics etc. the ministry is the main provider of software packages namely sensitization seminars, mobilization and skills training. Consequently in Uganda gender awareness is generally high though unfortunately it is not always supported by implementation as illustrated earlier in this paper.

Affirmative action is not yet a deliberate policy in most in the water sector relevant education institutions; neither is there deliberate gender sensitive employment opportunities in the water sector. One institution, the Nsamizi Social Development Institute, stands out as an example that has progressively dealt with gender issues and achieved a more equal gender balance in enrolment (about 50% female).

The NGOs are more focussed in their approach to gender mainstreaming in their projects. WaterAid Uganda, for example, pursues a gender sensitive approach to all program work. To this end the organization urges all its partners to employ some women staff specifically to address sanitation and hygiene issues with women. Wilson P 2000, reports that one of the partners of

WaterAid has a gender unit while others have defined gender or social objectives in relation to their water and sanitation work.

WaterAid's approach coupled with gender analysis tools has enabled them to identify and address gender disparities with varying levels of success.

Another organisation in the water and sanitation sector advancing the gender-mainstreaming concept is the Uganda Water and Sanitation NGO Network (UWASNET) established in November 2000. The network aims at poverty alleviation through increasing access to safe water improved sanitation, by effectively coordinating NGOs and CBOs in the water and sanitation sector.

UWASNET addresses gender through its "working group concept" working groups comprising of members of the network who are charged with a responsibility to investigate, discuss, promote and report on specific thematic issues/concerns identified in the sector. Six working groups have been proposed and one of them, the water and sanitation for women and children (WSWC) will focus the inequalities in the sector as regards needs and interests of women and children.

UWASNET aims to create a forum that will ultimately chart the way forward in involving women and children effectively in water and sanitation activities as equal partners.

It is evident that donor participation in the water sector through, e.g. projects funded by DANIDA and World Bank has introduced a systematic approach to gender balanced participatory analysis and mainstreaming in the water and sanitation projects.

The water sector gender study observes however that lessons learnt in this endeavor have not been adopted by DWD.

Community capacity building in sanitation through knowledge and skills and economic capability has illustrated benefits according to a case reported by the water sector gender study. Women's groups in Rakai district were trained in water preservation which training led them to secure further support, from SIDA leading to the women acquiring skills in land preservation and tree planting. They turned the acquired skills into an income generation activity training other women's groups in the district and the country as a whole.

The study cautions that for sustainability women's income generation has to be addressed in a more commercial manner than just formation of a group. This point is illustrated using an example of a women group in Mbale district that was supported to produce and sell sanplats, subsidized under the rural sanitation program. On termination of the subsidy the project proved non-viable as it could not offer competitive market prices and therefore lost its major customer. The study sums this up as lack of appropriate skills to know which actions to take when their most important customer was lost. The lesson identified here is that assisting women by creating a protected and subsidized environment does not provide the requisite skills for competing with men on the free market.

The shared role by men and women in O&M as source care-takers has yielded positive results and in some cases it is undertaken by a woman and her husband making it easier to fit in with other domestic tasks. The study pointed out other benefits of this shared responsibility as it has acted as a role model as to how men and women can work together and reduced cases of fighting

and sexual abuse (assumed) at water points. This illustrated by an example of Busembatia town in Eastern Uganda where the issue of sexual abuse was tackled using participatory approaches to share experiences, build arguments, opinions and achieve consensus on actions to handle that particular problem. This case also supports the use of participatory community training skills to empower community to solve their problems.

The inclusion of women through a 30% female representation was reported to have created a democratic platform for decision making and voicing of opinions by both women and men. It is reported however that the genders gap between representation and decision-making power still persists especially in communities with deeply rooted cultural based gender biases.

6. Conclusions

The enabling environment put in place is a good starting point for gender mainstreaming. This has been supported by the requisite structures to operationalise the policies. In conclusion, the following questions may be raised for which the answers provide a way forward with respect to gender mainstreaming in sanitation and hygiene in Uganda;

6.1. Policy level:

- What is the overall gender policy?
- What is the process for policy formulation?
- Is gender integrated at sector policy stage? How?
- What are the obstacles for gender integration?
- How can they be addressed?
- Are the policy makers gender-aware/sensitive?
- Do gender skills exist at this level?
- Is there willingness to integrate gender?

6.2. Organisational level:

- What are the structures for implementing sanitation and hygiene?
- Are the people incharge of these structures gender sensitised/skilled?
- What are the mechanisms in place to promote gender on long-term basis and also as a routine in the whole organisation?
- Is there a gender training program?
- What is the prioritisation of gender programs?
- Are gender activities supported by a specific budget?
- Are the Management Information System (MIS) tools gender disaggregated?
- What are the obstacles (disaggregated by gender) to gender integration in the organisation?

6.3. District level:

- What are the implementation structures?
- Are the staff gender sensitised?
- What is the capacity level for gender integration in project and programs?
- Is there a participatory approach to project implementation?
- Are gender activities sufficiently budgeted for in the sector-related departments?
- Are the MIS tools gender disaggregated; reports, budgets, work plans and indicators?
- What are the obstacles; disaggregated by gender?

6.4. Community level:

- How are the implementation structures constituted?
- What is the participation level of men, women and children?
- What roles do men play? Women? Children? (disaggregated by age, ethnicity or class)
- What are the specific gender issues in the community (in relation to division of labour, access and control of resources including time, and benefits)
- How are these issues being addressed?
- What are the obstacles at community level and household level?
- Is there provision for incorporation of best practices and lessons learnt?

7.0. Recommendations.

The actions needed to realize gender mainstreaming are set out here below at three levels namely: the national, the local government and micro or user level as follows;

7.1. National level:

- The PEAP being the pivotal policy framework for all sectors should incorporate gender more explicitly thus automatically integrating it in all poverty related programs at sectoral level. The communities have already identified a link between poor health and poverty which now needs to be more explicitly linked to sanitation and hygiene and incorporated in the PEAP objectives and strategies within a gender sensitive context. Therefore gender balance and gender responsive approaches should be highlighted at this level.
- As noted above a lot of ground has been covered by way of creating an enabling environment through policies and structures. The entry points for improved gender mainstreaming have been highlighted. In the past, emphasis has been on numerical representation of women in decision-making structures to redress imbalances. The MOGLSD is also carrying out its role of gender sensitization and mobilization countrywide. There are multi-sectoral implementation structures that are responsible for policy formulation and reviews and planning namely; the IMSC, STF and SWG.
- The important principle to adopt at this level is to ensure representation on planning structures by committed and gender skilled individuals who do not only appreciate gender as a development concept but also are able to effectively influence discussions, and plans and strategies from a gender perspective.
- The individual sectors for water and sanitation provision need themselves to establish gender sensitive structures so that within themselves gender is routinely incorporated in all the departments and their activities. The joint strategy for sanitation should highlight the approach to gender integration. This should engender incorporation of gender issues that will automatically trickle down to the implementation levels.
- Incorporation of gender need to be supported with the requisite funding for training and skills development in order to run smoothly along the regular sanitation and hygiene programs. Adoption of best practices from donor supported projects for example the RUWASA (DANIDA funded) and other NGO project are a good starting point for systematic gender integration.

- The Gender Water Sector Study recommended gender network to enable comfortable liaison and networking vertically and horizontally in a water sector. The network identifies the nucleus as water Liaison Unit of the DWD. The Unit liaises with identified change agents within the DWD and other stakeholder organizations who in turn link with the relevant national entities on gender issues of strategic importance. This network can be adopted to suit the sanitation sub-sector.

7.2. District level

- Under the decentralization policy the district or town council is important as the key link between central level planning and the community. It is responsible for planning; prioritization and budgeting for its own programs in line with national policy. The districts are also a key player in the promotional and capacity building activities.
- Apart from being trained, the districts should be provided with a **gender checklist** as a guide for gender mainstreaming. Such a checklist would include the following elements in relation to sanitation (adapted from the Oxfam gender training manual);
 - **The activity profile;** tasks of women and men, disaggregated by age, ethnicity or class; where and when the tasks are performed. The activities should be separated into productive and reproductive and social, political/religious.
 - **Access and control;** resources needed to carry out the activities and benefits derived and their control and access disaggregated by gender.
 - **Influencing factors;** i.e. those affecting the division of labour and the access and control of resources.
- The plans at district level and the sub-county should be screened through the Sector Wide Planning forum to ensure incorporation of gender and budgeting for it as part of the sector programs.
- Gender aware and skilled individuals should man the TSUs, which are key elements in the capacity building process. In particular these units should facilitate the establishment of gender responsive MIS that collects quantitative and qualitative disaggregated data. The data will be used for reporting, monitoring and evaluation purposes and will automatically raise questions about gender to be routinely answered. The data should for example identify constraints, needs, benefits, based on gender and also include female headed households and their unique needs, etc
- The tendering process for provision of facilities should have a policy to target gender sensitive structures in the community so as to create equity in the commercial sanitation related activities. This would serve practical as well as strategic needs.

7.3. The community level.

- This level where the hardware and software activities are concentrated. The centre and district mainly facilitate and the people implement through grass-root structures also and individuals. This level therefore poses a challenge to gender in view of the cultural, ethnic and class diversity especially in urban areas. Integration of gender at this level has been mainly to facilitate women's participation in committees. Gender mainstreaming can be improved in the following ways;
 - Involving women at household level in choice and budgeting for the household sanitation facility.

- Sensitization on role of women on the committees to enlist cooperation of both men and women.
- Influential persons in the community e.g. politicians and teachers be encouraged to be role models and used as demonstrations for field day training. Gender being highlighted in such training.
- Deliberate efforts to train women and youth in income generation skills related to water and sanitation.
- The peculiarities of urban and rural populations be taken into consideration when developing gender strategies so that their special needs and interests are taken into consideration.

References:

- DANIDA, MWLE 2001: **Water Sector Gender Study.**
- MGLSD 1997, **The National Gender Policy.**
- MFPED and Oxfam GB: **Uganda; Partnership for the Participatory Poverty Process: Water, Sanitation and Health: Learning from the Poor**
- MFPED 1992, **Uganda National Programme of Action for Children: Priorities for Social Sector Development in the 1990s and the Implementation Plan 1992/93-1994/95**
- MFPED 2001, **Poverty Eradication Action Plan: Volume 1 2001/2003**
- MFPED 2000, **Uganda Participatory Poverty Assessment Report: Learning from the Poor**
- MOH 2000, **National Sanitation Guidelines.**
- MOH 2001, **Annual Health sector Performance Report; Financial Year 2000/2001**
- MWLE 1999, **A National Water Policy, Republic of Uganda.**
- Rokeya A, 2002, **Discussion Paper: integration of Gender Perspectives in Water Aid's Bangladesh Programme for improved safe water supply, Environment, Sanitation, and Hygiene.**
- Williams S, etal, 1994, **The Oxfam Gender training Manual, Oxfam U.K. and Ireland.**
- The Republic of Uganda: **The Constitution of Uganda 1995
The Water Statute 1995
The Local Government Act 1997**
- Wilson Pauline 2000: **Draft Report on the Position of Water Aid Uganda and Her Partners on Gender in relationship to Water and Sanitation Work, Water Aid Uganda.**
- Wallace T 1991: **Changing Gender perceptions.**