WaterAid Bangladesh
Equity and Inclusion Review
A review of the rights, equity and inclusion work of WaterAid Bangladesh.

Jane Wilbur and Chelsea Huggett (2015)
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Acronyms

ARH    Adolescent reproductive health
CRPD   Convention on the Rights of Persons with Disabilities
B-SCAN Bangladesh Society for Change and Advocacy Nexus
DPO    Disabled Persons Organisation
HRTWS  Human Rights to Water and Sanitation
IDEA   Institute of Development Affairs
MHM    Menstrual hygiene management
NGO    Non-governmental organisation
PNSP   Protibondhi Nagorik Shangathaner Parishad
PSU    Programme Support Unit
ODF    Open defecation free
RBA    Rights-Based Approach
WASH   Water, sanitation and hygiene
WEDE    Water Engineering Development Centre, Loughborough University
**Executive summary**

WaterAid believes that access to safe water, improved hygiene and sanitation (WASH) is a human right. These essential services underpin human development and transform lives, enabling people to overcome poverty. WaterAid has a stated commitment to working with partners to reach those without access to WASH. This includes the poorest and most marginalised.

This review in WaterAid Bangladesh was planned as part of the second phase of the global review of WaterAid’s work on equity and inclusion. The primary purpose of the global review, which started in July 2014, was to assess the relevance and effectiveness of how equity and inclusion have been mainstreamed in WaterAid to date, so the organisation can learn from experience and improve future performance.

The Bangladesh review was started by Sue Coe (Consultant) with support from Jane Wilbur (Programme Support Unit (PSU), WaterAid UK). A pre-visit, self-reflection workshop was organised and documented by WaterAid Bangladesh in December 2014 in accordance with the equity and inclusion review guidelines. Eight WaterAid Bangladesh staff were interviewed via Skype in February 2015. Political instabilities in Bangladesh in January 2015 meant that the country visit was postponed to August 2015, while budget constraints meant WaterAid Bangladesh requested that Jane Wilbur lead the one-week country visit, which she did with a team: Chelsea Huggett (Equity, Inclusion and Rights Advisor, WaterAid Australia), Mahfuj-ur Rahman (Programme Officer), Babul Bala (Assistant Programme Coordinator-Engineer) and Hajra Sana (Programme Officer, Social Development, Urban Programme).

The re-framed, in-country review visit was not designed to evaluate all WaterAid Bangladesh’s equity and inclusion work as time and resources did not permit this. Instead the visit and methodology aimed to:

- Ensure that the review team could explore the work of one project in greater depth.
- Interview a range of people from marginalised and excluded groups.
- Interview WaterAid staff and partners.
- Apply findings and lessons more broadly across WaterAid Bangladesh, with a particular focus on informing the new country programme strategy.

The in-country review ran from 8-13 August 2015. 19 documents were reviewed from WaterAid, WaterAid Bangladesh and partners. Reviewers visited IDEA’s project in Sylhet and interviewed/held focus group discussions with 45 external stakeholders from communities, district government and tea garden authorities. The team carried out five accessibility and safety audits in households and one ‘participation ladder’ in Sylhet. They also interviewed Disabled Persons’ Organisations and networks in Dhaka but were unable to interview other external stakeholders in Dhaka as planned.
Overall the team was very impressed with the quality of WaterAid Bangladesh’s equity, inclusion and rights work. The country programme’s commitment to mainstreaming it within the organisation and the WASH sector is very impressive. This commitment began before WaterAid developed its Equity and Inclusion Framework.¹ WaterAid Bangladesh is rightfully recognised for its role in promoting equity, inclusion and rights inside and outside WaterAid. The team’s willingness to learn and continue to improve is demonstrated by its commitment to this review.

The review comprises 11 main findings about the current status of equity and inclusion approaches in WaterAid Bangladesh’s work, and made ten subsequent priority recommendations and nine medium priority recommendations. These recommendations are intended to guide the country programme in continuing to improve and further mainstream equity and inclusion in all areas of its work.

Main findings

1. WaterAid Bangladesh partners interviewed have a clearer understanding of equity, inclusion and rights than some WaterAid staff interviewed in Bangladesh.

2. There is mixed understanding of key terms relating to equity and inclusion in WaterAid Bangladesh. There is a need for clear, consistent, rights-based definitions, especially in relation to access, participation and rights-based disability inclusion.

3. WaterAid Bangladesh has invested heavily in specific projects aimed at reducing inequalities. This has led to extremely rich learning in many areas of the new equity and inclusion approach.² However, evidence that learning from specific projects has been disseminated and translated into practice across all relevant programmes was lacking.

4. IDEA’s intervention in Sylhet has led to a more enabling environment for the progressive realisation of the rights to water and sanitation.

5. WaterAid Bangladesh and partners’ focused investment on gender-inclusive programming approaches in Sylhet has yielded positive results, particularly in relation to menstrual hygiene management.

6. The participation of people from marginalised and vulnerable groups (beyond women and girls) in IDEA’s work needs strengthening.

² See Annex 12.
7. WaterAid Bangladesh can further advance its advocacy on rights-based principles by empowering marginalised people to advocate for themselves.

8. Reviewers found no clear or consistent processes that monitored levels of participation of vulnerable people. Two simple tools can be applied systematically to address this: the ‘participation ladder’ and the accessibility and safety audit.

9. The number of disabled people served with water and sanitation in WaterAid Bangladesh’s annual reports is low. It is likely that this is caused by a narrow definition of disability, primarily focusing on physical impairments and inaccurate identification during planning stages. Using Washington Group questions to define disability instead of current practice could quickly yield positive results on disability and age-based WASH inclusion. However this must be considered in relation to definitions used in government surveys.

10. The universal WASH designs promoted by WaterAid Bangladesh at a national level were not applied in practice in Sylhet. WaterAid Bangladesh could play a key role in ensuring that national policies, guidelines and universal designs are actioned in their funded work and through the relevant government ministries.

11. The country programme has drafted its next country strategy. Rights are a key component this, so now is the ideal time to bolster investment in equity, inclusion and rights to strengthen WaterAid Bangladesh’s performance and contribution to WaterAid’s new global strategy.

Main recommendations

19 recommendations (split into high and medium priorities) are made by reviewers which, if applied, should enable WaterAid Bangladesh to make significant progress towards mainstreaming the continuum of equity and inclusion.

Programmes and advocacy

High priority

1. To clarify understanding, achieve consistency and comprehensive reach across the country programme, WaterAid Bangladesh should consistently apply a two-stage situational analysis to identify equality and inclusion issues, and base programmes on this analysis.

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3 See Annex 10.
4 See Annex 6.
2. Ensure all staff understand rights-based approaches to disability inclusion and then support all partners to develop the same. This could start with definitions, policies and training materials with support from the PSU.

3. Implement learning from WaterAid Bangladesh’s focused projects on inclusion across all work areas as a priority activity.

4. Partner with more groups comprised wholly of marginalised people in order to strengthen meaningful participation by advocating ‘with’ rather than ‘for’.

5. Encourage the leadership of people from excluded groups on WASH management committees. Provide appropriate support and guidance so that they feel empowered to effectively deliver their roles and responsibilities.

6. Expand work from aiming to address barriers to WASH that physically disabled people face to the barriers that different people face throughout their lives.

7. Ensure all public WASH facilities constructed using WaterAid Bangladesh’s money are fully accessible to everyone throughout the total human life cycle (young to elderly, and those with a disability). Provide support and monitor partners’ work during construction of institutional facilities to ensure WaterAid Bangladesh’s standards on universal designs are met. At household level, systematically promote universal designs to everyone so they can make an informed choice about what design suits them best.

Medium priority

8. Apply the Human Right to Water and Sanitation’s normative content categories (Annex 9) as a standard in all policy and programming work for more consistent understanding and application of equity, inclusion and rights in WaterAid Bangladesh.

9. Integrate MHM with adolescent reproductive health and contribute to achieving three of WaterAid’s four global aims. Influence relevant parties to integrate teaching on menstrual hygiene in the primary school curriculum.

10. Support partners to use their own examples of success to lobby relevant district government departments to improve inclusive school WASH (that is accessible and includes MHM programming) beyond their intervention areas.
11. Raise awareness on issues of safety and security by rolling out training on WaterAid’s Gender, Violence & WASH toolkit with WaterAid Bangladesh and partner staff and external stakeholders. Develop links with organisations in the protection sectors to draw on their support, advise and skills and raise their awareness of WASH issues.

12. Support IDEA to work with the local government to integrate tea gardens into their development plans. This means ensuring that IDEA does not take on the role of local government.

Tools and approaches

High priority

Apply the ‘participation ladder’ tool and the accessibility and safety audit systematically across all programmes to monitor participation of stakeholders, especially marginalised people.

Medium priority

13. Consider piloting Washington Group questions in a small sample of projects to see if their wider application is appropriate. However this must be considered in relation to definitions used in government surveys.

Organisational development

High priority

14. Position the equity and inclusion post-holder in the organisational structure so s/he can influence the whole of WaterAid Bangladesh. Provide sufficient resources so the post-holder can effectively deliver key accountabilities.

15. Build equity and inclusion into all jobs descriptions and workplans.

16. Continue affirmative action to recruit more female staff and monitor the gender balance across the organisation. Continue to develop an enabling environment so female staff can progress into senior roles.

Medium priority

17. Review the equity and inclusion training materials in line with WaterAid’s equity and inclusion approach with support and input from PSU. Provide ongoing training and capacity development for partners and WaterAid Bangladesh staff. Ensure that all tools and publications have a clear audience and comprehensive user-friendly design to maximise use and impact. All tools used by partners should be translated into local languages.

18. Work towards diversifying the workforce more broadly to include people with disabilities and others from socially marginalised groups.
Introduction and background

WaterAid believes that access to safe water, improved hygiene and sanitation (WASH) is a human right. These essential services underpin human development and transform lives, enabling people to overcome poverty. In order to realise their vision of a world where everyone has access to safe water and sanitation, WaterAid has a stated commitment to working with partners to reach those without access to WASH. This includes the poorest and most marginalised. This means WaterAid has stated it must address exclusion from WASH as it relates to wider inequalities in power relations and in control over water and other resources within the family, community and at institutional levels.

In July 2014, the Programme Support Unit in WaterAid UK commissioned a review of the organisation’s equity and inclusion work. The primary purpose of the global review was to assess the relevance and effectiveness of how equity and inclusion has been mainstreamed in WaterAid to date, so the organisation can learn from experience and improve future performance. It was designed to assess the extent and quality of the application of the principles of equity, inclusion and rights in WaterAid globally, with a specific focus on country programmes, and whether there is any evidence that this is resulting in better access to WASH rights for the most marginalised.

The first phase of analysis included a review of 29 key WaterAid documents and interviews with 16 staff to identify key ideas and issues around the equity and inclusion process. The resulting report identified four emerging key themes:

1. WaterAid staff understanding of the terms ‘equity’ and ‘inclusion’ and who it applies to determines what they try to achieve practically – further clarification on ‘who’ would help achieve greater consistency and reach across the organisation.
2. To progress mainstreaming, equity and inclusion work must make the transition from being implemented as a number of separate actions or an ‘add-ons’ to becoming part of WaterAid’s organisational DNA.
3. WaterAid’s partners play a central role in achieving effective equity and inclusion practice.
4. WaterAid needs to further consider how to enable effective participation of marginalised people in practice – initial review shows gaps are evident.

On the basis of the above findings, phase two was designed to investigate the significance of emerging themes for the practice of equity and inclusion at country programme level. It was also tasked with helping country programmes learn from their recent experiences of implementing equity and inclusion with a view to improving future practice. Two country programmes were chosen to host field visits (Mali and Bangladesh). The Mali Country Programme review

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5 A copy of the full report from phase 1 and 2 can on WaterAid’s [Source](http://www.wateraid.org/ppa).
took place in February 2015 over two weeks, led by Lorraine Wapling (Consultant).

PSU invited WaterAid Bangladesh to be part of this review as the country programme is deeply committed to mainstreaming equity and inclusion. The team has championed equity and inclusion over several years and has invested heavily in it. This is demonstrated through equity and inclusion focal persons; having a separate inclusion programme through which they developed and tested approaches aimed at reducing inequalities in WASH; sharing learning and experiences in an open and honest way with WaterAid and the WASH sector, and influencing key decision makers to consider and implement inclusive WASH approaches at scale.

The Bangladesh review was started by Sue Coe (Consultant) with support from Jane Wilbur (PSU, WaterAid UK) and Shikha Shrestha (Research and Advocacy Manager, WaterAid Nepal). A pre-visit, self-reflection workshop was organised and documented by WaterAid Bangladesh in December 2014 in accordance with guidelines drawn up by Sue Coe and Lorraine Wapling.

Political problems in Bangladesh in January 2015 meant that the visit scheduled that month for Sue Coe and Jane Wilbur had to be postponed. During the first week of February 2015 Sue Coe interviewed eight WaterAid Bangladesh staff via Skype (political problems still prevented visits in person), with support from Jane Wilbur for some interviews. As the unforeseen political problems then continued within Bangladesh without clear end in sight, it was agreed that the review team visit WaterAid Nepal instead; this visit took place in March 2015 and has been reported on separately.

When the political situation was more stable, WaterAid Bangladesh requested that Jane Wilbur lead the country visit part of the review in August 2015. Due to budget constraints WaterAid Bangladesh decided not to use an external consultant for the visit, but Sue Coe provided remote mentoring support to the E&I review team. The postponement in the trip dates enabled WaterAid Australia Equity, Inclusion and Rights Adviser, Chelsea Huggett, to participate as part of the in-country review team. The Bangladesh E&I in-country review team consisted of Jane, Chelsea Huggett, Mahfuj-ur Rahman (Programme Officer, WaterAid Bangladesh), Babul Bala (Assistant Programme Coordinator) and Hajra Sana (Programme Officer, Social Development, Urban Programme).

**Methodology and limitations**

The objectives of the equity and inclusion review in WaterAid Bangladesh were to assess:

1. The quality of WaterAid Bangladesh’s programme of work in terms of design and implementation, and the appropriateness of technologies and approaches (hardware and software) needed to bring about
improved WASH for marginalised and socially excluded groups. This included an assessment of capacities, partnerships and practice.

2. The extent to which this has resulted in benefits for excluded and marginalised groups.

Findings were designed to highlight the extent to which WaterAid Bangladesh has mainstreamed equity, inclusion and rights in its work and make suggestions about how to strengthen this going forward.

A reasonably comprehensive and balanced timetable of activities was facilitated during the week-long visit to Bangladesh. This enabled the review team to get a clear idea of the current status of equity and inclusion work in the country programme’s practice (see Annex 1). Although the visit was limited to a week, reviewers felt a good level of information emerged on which to base findings, with reasonable triangulation of results.

Telephone interviews over Skype were carried out by Sue Coe with eight WaterAid Bangladesh staff in February 2015. These fed into the review findings. Nineteen documents were reviewed relating to work of WaterAid Bangladesh and partners. During the visit from the 8-13 August inclusive, the reviewers:

- Carried out a 2.5 day field visit to IDEA’s projects in Sylhet.
- Interviewed/held focus group discussions with 45 external stakeholders from communities, including people from marginalised and excluded groups, district government and Tea Garden Authorities.
- Interviewed four WaterAid Bangladesh partners (IDEA, B-SCAN, Society of Deaf and Sign Language Users, and Concerned Women for Family Development).
- Conducted five accessibility and safety audits in households and one ‘participation ladder’ with three women in WASH community management positions in Sylhet.

The team was able to cover a lot of ground it they split up to interview different people. A question template was used to guide interviews and focus group discussions (see Annex 7).  

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6 See Annex 2 for list of interviewees; Annex 3 for documents reviewed; Annex 6 for the accessibility and safety audit tool; and Annex 10 for the ‘Participation ladder’ tool.
Limitations of the WaterAid Bangladesh equity and inclusion review process

There were a number of unforeseen challenges that significantly limited for the equity and inclusion review compared to what was originally envisaged in September 2014. Substantial political protests in Bangladesh led to:

- Delays in the in-country visit (originally planned as a two-week visit in January 2015 by Sue Coe, with Jane Wilbur accompanying for one week within it).
- A reorganisation of the review methodology. Eight key informant interviews were conducted via Skype in the first week of February 2015, mainly led and conducted by Sue Coe (Jane Wilbur participated in some of them).
- A change in review team leadership to finish the process (from Sue Coe to Jane Wilbur) given available budget resources.

These delays and changes were caused by external factors completely outside WaterAid Bangladesh’s control.

The re-framed in-country review visit was not designed to evaluate all of WaterAid Bangladesh’s equity and inclusion work as time and resources did not permit this. Instead the visit and methodology aimed to:

- Ensure that the review team could explore the work of one project in greater depth.
- Interview a range of people from marginalised and excluded groups.
- Interview WaterAid staff and partners.
- Apply findings and lessons more broadly across WaterAid Bangladesh with the particular focus on informing the new country programme strategy.

The review team gained great insight to work in Sylhet that many findings in this report are drawn on. The team also saw the mobile toilets in Dhaka and briefly visited the inclusive public toilets in the capital’s bus station, but they did not interview anyone on site. Unfortunately, planned meetings in Dhaka (which would have provided additional insight) with the Dhaka City Corporation, D-WASA and the Director General of Department of Social Service (under Ministry of Social Welfare) did not happen due to last-minute unavailability of interviewees. This also meant that the assessment of WaterAid Bangladesh’s national advocacy work is based solely on the key informant interviews with WaterAid Bangladesh staff. As future work unfolds in WaterAid Bangladesh, it will be important to test the findings against the experiences and expectations of external stakeholders, especially those WaterAid Bangladesh is aiming to influence.

Despite the limitations outlined above, the review team have confidence in the findings and resultant recommendations. However the report is presented with
the caveat that field findings are based mainly on just one WaterAid Bangladesh projects reviewed in-depth during the visit. This report outlines the main findings from the review and recommendations are based on these.

Findings from the review

1. WaterAid Bangladesh partners interviewed have a clear understanding of equity, inclusion and rights

All partners the reviewers interviewed had a fairly strong conceptual understanding of equity, inclusion and rights. B-SCAN, Society of Deaf and PNSP are clearly working within a rights-based framework and are demanding greater access to services themselves. IDEA also has a strong conceptual understanding of the terms. The review team felt responses demonstrated greater levels of understanding in the partners interviewed than among WaterAid Bangladesh staff interviewed.

2. Key terms need to be clearly and consistently understood for equity, inclusion and rights to be applied in practice by all WaterAid Bangladesh staff

Everyone interviewed was asked to define what the terms ‘equity’, ‘inclusion’ and ‘rights’ meant to them. Based on an important finding from the Mali country programme equity and inclusion review (February 2015), which reported widespread knowledge gaps on rights-based approaches to disability inclusion, everyone interviewed was also asked to define what the terms ‘disability’ and ‘people with disabilities’ meant to them.

Interviews conducted with WaterAid Bangladesh staff demonstrated that although some understanding of the terms was similar there was also significant disparity and confusion expressed over the meaning of the terms. Some interviewees perceived ‘equity’ as WASH reaching ‘everyone, everywhere’ and ‘inclusion’ as the process of acknowledging that various excluded groups may have greater access needs to WASH and so require increased effort/attention. Addressing environmental barriers to WASH access was mentioned more consistently than challenging attitudinal barriers or encouraging the meaningful participation of those groups and ensuring information is accessible to all (institutional barriers) in this context of inclusion. ‘Justice’ was a word was expressed by many in what WaterAid sought to achieve in achieving WASH access for all.

Other views shared by WaterAid Bangladesh staff about the meaning of the terms ‘equity’ and ‘inclusion’ revealed confusion on the extent of WaterAid Bangladesh’s role in service delivery approaches versus rights-based programming approaches. Further, some thought ‘equity’ meant ‘to provide support based on necessity and needs so they can get access to facilities they are supposed to get’, and some saw the two words ‘equity’ and ‘inclusion’ as meaning the same thing.
Some interviewees reported that the reason for inconsistent understanding of what equity, inclusion and rights mean is due to the absence of clear, consistent definitions and guidelines within WaterAid globally of what the terms meant and how they should be applied.\(^7\)

**Access**

Most WaterAid Bangladesh and IDEA staff conceptualised ‘access’ as facilities that can be used by people with physical impairments, instead of recognising that services must be accessible throughout the human life cycle. Using the categories within the Handbook on the Right to Water and Sanitation (Annex 9), ‘accessibility’ states that services must be physically accessible for children, older persons, persons with disabilities (with different impairments) and chronically ill persons. Accessibility is closely linked with ‘acceptability’, which focuses on involving individuals and communities in the planning of services so that they are appropriate and accessible (see finding 6 that focuses on strengthening the participation of marginalised groups).

**Inequalities**

WaterAid Bangladesh is clearly addressing macro inequalities. This is demonstrated through its national budget advocacy work; intervention in the Tea Gardens; work in the coastal zones, Chittagong Hill tracts and in slums. WaterAid Bangladesh is also attempting to address individual inequalities, but this is not consistently applied across all communities. For instance, some understanding was expressed by WaterAid Bangladesh and IDEA staff about the social exclusion faced by women, people with disabilities and menstruating girls, and attempts have been made to challenge the related stigma and discrimination. Drawing on the comprehensive report that analysed rights, equity and inclusion in the WASH sector (written prior to the development of the 2010-2015 WaterAid Bangladesh country strategy), reviewers were surprised that no interviewees during the field visit highlighted other individual inequalities, including those experienced by Dalits.\(^8\)

Inequalities related to age (children and older people) were also largely absent.

To clarify understanding, achieve consistency and comprehensive reach across the country programme, WaterAid Bangladesh should **consistently apply a two-stage situational analysis to identify equality and inclusion issues and base programmes on the analysis:**

- Stage one – macro level analysis: identify generic geographic and socially-excluded groups, for example hard-to-reach rural, ex-bonded labourers, ethnic minorities;

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\(^7\) For a list of definitions, see Annex 8.

\(^8\) The Innovators, Centre of Research and Action on Development (no date), *Analysis of Rights, Equity and Inclusion in the WASH sector*. Individual inequalities referenced in the report are: women, disabled persons, Dalits, commercial sex workers, ethnic minorities and Bede (travellers).
• Stage two – micro level analysis: adopt as minimum standards the JMP checklist descriptions of individual inequality factors\(^9\) (gender, disability, age (older people and children), chronic illness) – across all communities identified in the macro analysis process. It is recommended WaterAid use the barrier analysis tool to identify the full range of barriers to participation in WASH services according to each individual inequality factor.

Stage two draws on the equality checklist which is a tool used to formulate and evaluate proposed goals, targets and indicators for WASH\(^{10}\) (see Annex 5). It allows decision makers to determine whether issues of equity, equality and non-discrimination are adequately addressed. These can then be used in monitoring and evaluating programmes.

For a more consistent understanding and application of equity, inclusion and rights in WaterAid Bangladesh, the country programme should apply the Human Right to Water and Sanitation’s (HRTWS) normative content categories (Annex 9) as a standard in all policy and programming work.\(^{11}\) WaterAid’s equity and inclusion framework will be updated to include a greater focus on the HRTWS content categories.

Disability

The Government of Bangladesh ratified the United Nations Convention for Persons with Disabilities (CRPD) in November 2007. The CRPD is based on a rights-based understanding of disability: disability is the consequence of barriers (attitude, environmental, institutional) imposed on people with impairments by society.\(^{12}\) WaterAid’s global equity and inclusion framework adopts this rights-based understanding.

Reviewers found evidence that some WaterAid Bangladesh staff apply a rights-based understanding of disability. This is predominantly with staff involved in the inclusion programme and/or who have completed training on barrier analysis.\(^{13}\) Understanding was more mixed in IDEA’s staff and government officials as many people equated disability with impairment (problem in body function or structure). In practice this was demonstrated through the design of the school latrine that was not fully accessible, targeting of people with physical impairments only in the Community Led Total


\(^{10}\) Ibid.


\(^{13}\) WaterAid (no date) Equity and Inclusion, Play your Part. Awareness raising training guide.

www.wateraid.org/ppa
Sanitation (CLTS) intervention, and a lack of any accessible communal water points seen on the project visit (see finding 10).

**WaterAid Bangladesh needs to ensure all staff understand rights-based approaches to disability inclusion and supports all partners to develop the same as a specific area to strengthen partners’ equity, inclusion and rights practice.** This could start with definitions, policies and training materials with support from PSU (see finding 11).

3. **WaterAid Bangladesh should implement learning from its focused projects on inclusion as a priority activity across all of its work**

WaterAid Bangladesh has invested heavily in specific projects aimed at reducing inequalities. This has led to extremely rich learning in many areas of the new equity and inclusion approach (see Annex 12). This can be captured and rolled out across WaterAid Bangladesh and WaterAid globally to progress the mainstreaming agenda further. However findings from this review show that the rich learning gained has not permeated across all WaterAid Bangladesh programmes. For instance, WaterAid Bangladesh participated in the regional South Asia child rights project which included a focus in specific project areas on child participation issues. There is good learning from the project but there was not strong evidence that this learning had translated across IDEA’s work in Sylhet where children were rarely mentioned as a target group during interviews.

For a relatively ‘quick win’ to progress the equity, inclusion and rights agenda, **WaterAid Bangladesh should implement learning from its focused projects on inclusion across all work areas as a priority activity.** The network of WaterAid Bangladesh partners would also benefit from WaterAid Bangladesh facilitating learning between them. **Resourcing, institutionalising and scaling up inter- and intra-programme exposure visits between programmes for WaterAid Bangladesh and partner staff on a six-monthly basis** would help. These activities would strengthen staff understanding of equity, inclusion and rights, making it easier to deliver and monitor interventions aimed at reducing inequalities in WASH.

4. **IDEA’s intervention in Sylhet has led to a more enabling environment for the progressive realisation of the rights to water and sanitation**

In Sylhet, IDEA’s intervention has led to a more enabling environment for progressively realising the rights to water and sanitation. A focus on developing rights holders’ capacity, access to information, understanding of processes and procedures to drive change; and developing relationships, understanding and trust between duty bearers and rights holders have also contributed to this positive development.

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14 Evidence from the Sylhet field visit, Skype interviews, discussions with WaterAid Bangladesh staff during the visit and at the de-brief at the end of the week supported this finding.
Individuals in the community and on management committees were aware of their rights; have developed relationships with key decision makers and knew how to drive change. Community members have developed negotiation skills and confidence to advocate for themselves through the support and facilitation provided by IDEA.

“At the early stage it was difficult. Now we can express ourselves. There has been change – IDEA did a good job and created space and institutions where we can speak. Our confidence has increased.” (Shugha Ram Basak, Union Parishad member)

“IDEA facilitated us to go to the City Corporation. Now we are sitting at the same level with the Tea Garden authorities with IDEA and other organisations.” (Bela Chatry, Chairperson)

These skills and confidence have enabled the Para WASH committee and Union Parishad to successfully negotiate for local government budget to build roads and a Hindu temple in the Tea Garden. A high school was also being built inside the Tea Gardens for the first time as a result of lobbying by the leader of the Panchayat. One female Union Parishad committee member also successfully lobbied the district finance minister to allocate money to older women and widows in the Tea Garden for the first time ever.

"From my own influence, I could bring the Finance Minister to a meeting. She committed special allocation of 5000 taka for each old women and widow. A total of 21 got the money.” (Shugha Ram Basak, Union Parishad member).

Through the project, IDEA held formal and informal meetings with the Tea Garden managers and attended WASH workshops and celebration events such as the menstrual hygiene campaign (see finding 5). Through this process, Tea Garden managers’ awareness about their responsibilities and accountabilities as employers has increased because they see that improved WASH leads to a more healthy and productive workforce. This is evidenced by their 20% investment in WASH services for their workers following IDEA’s budget advocacy work. Initially the Tea Garden Authorities were very suspicious of NGOs, especially when rights were mentioned as they felt that their workers would demand better pay. IDEA understood the Tea Garden

15 The Para Committee is the lowest tier of IDEA-facilitated groups. Above this tier are the Garden WASH Committees (apex of the para committee members at the garden) where the concerned Union Parishad member acts as advisor.
managers’ interests and drivers (including a more productive workforce for greater productivity) and used those to gain access.

“They are more productive for my business.” (Tea Garden Manager)

“Waterborne diseases have reduced so we pay less sick days. Efficiency is increased, definitely.” (Tea Garden Manager)

“They know their rights. I know that. I understand that. I am a happy general manager because the labourers are aware of their rights. Before no one could enter, but now my labourers are coming out of the old days.” (Tea Garden Manager)

Local government is also aware of their accountability to citizens and realise that this includes the Tea Garden workers.

**WaterAid Bangladesh and IDEA now need to** step back and **support the government to provide services so that the NGO does not take on the role of local government.** If this does not happen, government development priorities, policies, plans and budgets will ever systematically include the Tea Garden workers and they may be seen as the ‘responsibility’ of the third sector.

5. **WaterAid Bangladesh and partners’ focused investment on gender inclusive programming approaches in Sylhet has yielded positive results, particularly in relation to Menstrual Hygiene Management**

Focus group discussions, key informant interviews and participation ladders conducted with women and girls in Sylhet clearly indicate that they participate meaningfully in the programme cycle and have become more empowered through the intervention. WaterAid is striving for more meaningful participation of women and girls across all country programmes, so this is a major achievement for WaterAid Bangladesh and something from which the rest of the organisation can learn.

IDEA goes beyond having at least 50% of WASH management committee roles filled by women. It has facilitated space so women on WASH management committees can make decisions, and have a high level of ownership and control in the committees (see finding 4). The female chairperson explained how she and a female Union Parishad member influenced the Tea Garden Authorities to employ skilled people from within the Tea Gardens instead of recruiting people from outside the gardens as is common practice.
“Parents send their children outside to school but they can’t come back and get a job in the Tea Garden. When I became chairperson I went to the Tea Garden Authority with Shugha and said, ‘now our children are educated you have to recruit them’. Now four children are full-time employed [in the Tea Garden]. We also insisted that a midwife is employed from people in the Tea Gardens instead from outside. Now we have one.” (Bela Chatry, Chairperson)

The skills and confidence women have developed through the project was clearly apparent.

“Even now I’m not shy. Even at the city corporation I can express myself. Before we didn’t have any management committee, I was just at home. IDEA formed a Para WASH committee and now we feel more confident.” (Madhwn Mahali, Para WASH Committee member)

Men on the Para WASH Committee explained that their views of women have changed because of women’s increased role in driving the development of their community.

“Before IDEA we thought women will cook food, take care of the children. We didn’t think they could take part in decision making. Now we feel women can do leadership. Women are better at negotiating than us!” (Male Para WASH Committee member)

Reviewers were pleased to see that IDEA’s focus on developing adolescent girls’ skills and confidence had led to a greater awareness of their rights and advocating for these independently. This was also demonstrated by an adolescent girl who has a physical impairment.

“There aren’t many people like me in this community. There are some further away. When we meet I tell them what’s possible. I tell them at temples and sometimes at IDEA meetings.” (Lokhi, (pictured left) a physically impaired girl, aged 18)
The reviewers analysed menstrual hygiene management (MHM) as a lens for gender empowerment. The findings, triangulated through a focus group discussion and several key informant interviews, were impressive and stood out as one of the programme’s key successes.

Interviews with both older women and adolescent girls highlighted that regular MHM education sessions targeting adolescent girls and the broader community helped dispel negative myths, taboos and restrictions during menstruation. This led to changes in knowledge, attitudes and practices related to MHM. Examples provided during key informant interviews indicated that families no longer expected girls to bathe in secret (often late at night) and no longer enforced food restrictions. Girls are now able to wash sanitary cloths in the spring and hang them out in the sunlight to dry.

“Previously during our period we were not given nutritious food or not allowed to eat fish and meat. Now we can. Before my parents wouldn’t even let me run and we were not allowed to go to school or play. Now people understand and this has reduced.” (Adolescent girl)

“There are still misconceptions about MHM in the community. Now I am understanding. I allow my girls to go to school. It is up to mothers to change their beliefs and attitudes.” (Older woman named Ujjoly Das)

Adolescent girls particularly described no longer feeling ashamed of menstruation or trying to hide it. They described how this change in attitudes and improved hygienic practices had occurred slowly, over the course of several years. Adolescent girls saw themselves as change agents for both older and younger generations.

“Change came within ourselves first. Slowly, it extended to our families and we shared what we learned about hygiene with our mothers. They shared it with our fathers. At first I felt shy. But then through the cultural club we shared it with other communities. It happened very slowly, over two years.” (Adolescent girl)

“My mother’s generation didn’t get an education. Only some girls in our generation got an education. We must influence all members of our families.” (Adolescent girl)

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16 Menstrual hygiene consists of: 1) Accessible, accurate and pragmatic information on menstrual hygiene management; 2) Menstrual hygiene materials; 3) Water and soap within a place that provides an adequate level of privacy for washing the body, cloths used during menstruation, and clothes; 4) Facilities that provide privacy for changing materials and washing and drying menstrual cloths; 5) Disposal facilities for used menstrual materials.
A particularly positive finding of the review was that the programme had created a supportive environment for adolescent girls by meaningfully engaging adolescent boys in MHM education. Adolescent boys saw themselves as champions of MHM among their peers and the broader community, and had advocated to senior community members.

“Menstruation is a natural process for girls and also an issue for men. Women suffer a lot and have to go and shower at ungodly hours which is harmful to them… I understood that if I teased a girl about menstruation, another boy might tease my sister. So I told boys not to tease girls, I intervened if I saw teasing… I also said to seniors that you are role models and need to set an example.” (Adolescent boy)

Combined focus group discussions with adolescent girls and boys highlighted how the establishment of cultural clubs had gradually led to changes in gender relations among young girls and boys. Adolescent girls described how they felt listened to by their male peers within the cultural club. They reported that the boys came to them for help and listened to their opinion.

“We [girls] are quite often neglected in our families. In the cultural club I feel good because people always listen. I am heard in meetings and I actively participate.” (Adolescent girl)

Despite this positive finding, interviews with girls also highlighted the challenges they faced in maintaining this level of empowerment and participation in other aspects of their life.

“In cultural group meetings, people listen to me. I participate and they respect that. But outside the cultural group people don’t listen. If I speak to a boy, he won’t listen to me.” (Adolescent girl)

A key success in advocacy on MHM was the month-long awareness raising campaign in March 2014 by WaterAid Bangladesh and IDEA, in collaboration with WASH United. IDEA led the campaign, engaged the media, ran school programmes and combined sporting events. Girls in the Tea Gardens met international cricket players and played all-girls’ football. This is in a context where menstruating girls were previously discouraged or banned from running. Both partner staff and the adolescent girls described the success of the campaign and its event as a “breakthrough” for MHM.

A gap identified by reviewers was that whilst there were pockets of the MHM education programme targeting mothers, grandmothers had been largely

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17 ICC T20 World Cup 2014 and Collaboration with WASH United for breaking the silence on Menstrual Hygiene.
overlooked as change agents. This could be scaled up. Girls often spoke about the role of grandmothers in teaching them about how to manage their periods.

During focus group discussions and interviews with adolescent girls, reviewers identified a key gap in linking up adolescent girls with adolescent reproductive health (ARH) opportunities. All the girls voiced their desire to learn more (beyond menstruation), and particularly to deepen their understanding of sexual and reproductive health rights. None of the girls participating in the review had received any sexual or reproductive health education. IDEA staff reported that if a girl raised a question about reproductive health, she would be referred to the community health officer. Interviews with staff, community volunteers and adolescent girls found that no community health team had ever been invited to attend the MHM education sessions or the cultural club.

“When we have MHM sessions, no health worker comes so sometimes we cannot answer critical questions. The adolescent girls sometimes giggle and are shy. I am not trained to teach them about those things.” (IDEA Community development worker)

WaterAid Bangladesh and partners should develop links with the adolescent reproductive health (ARH) sector to ensure adolescent girls can access health services and knowledge beyond menstrual hygiene management. Integrating MHM with ARH brings together three of the four strategic aims in WaterAid’s new Global strategy (equality, integration and hygiene\textsuperscript{16}).

During focus group discussions with young women the issue of safety and security arose. Adolescent girls discussed issues of safety and security for women and girls and expressed vulnerability and fear of violence when going far to the toilet, collecting water or bathing.

“Going to different locations, we are scared at night. Latrines in houses are safer but we still go to the spring to bathe. We always go in big groups.” (Adolescent girl)

Although the lack of access to appropriate WASH services is not the root cause of violence, it can lead to increased vulnerabilities to violence of varying forms. WaterAid’s Violence, Gender & WASH toolkit\textsuperscript{19} highlights both the risks of violence associated with WASH and the potential benefits of WASH, and encourages practitioners to recognise their capacity to make WASH safer and more effective.

\textsuperscript{16} WaterAid’s Global Strategy (2015–2020), available at: 

\textsuperscript{19} See www.violence-wash.lboro.ac.uk.

www.wateraid.org/ppa

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This is a very new area for WaterAid and it was a difficult topic for the review team to explore. WaterAid Bangladesh staff and partner staff expressed that they felt they did not have the training or knowledge to address this issue and questioned if WASH practitioners should attempt to address it. This is not an unusual response but it reaffirms the gap that exists globally across WaterAid and the urgent need for further attention. **WaterAid Bangladesh staff and partners should use of the Violence, Gender and WASH Toolkit and proactively start discussing this issue as an organisation to build awareness.** WaterAid Bangladesh should also include safety and security of women as a topic in equity, inclusion and rights training. In order to develop a support structure for people affected by violence, **WaterAid Bangladesh should develop links with organisations working in the social protection sector at district level.**

6. **The participation of people from marginalised and vulnerable groups (beyond women and girls) needs strengthening**

As detailed under finding 4, the meaningful participation of women and girls in the project in Sylhet was found to be very good. Activities to support empowerment of other marginalised people were less apparent. IDEA cited an example of disabled people on Para WASH Committees, but the review team did not have the opportunity to witness this. **Leadership of disabled people with different impairments on these committees should be encouraged and supported. The leadership of people from other excluded groups (drawing on micro-level analysis of individual-related inequalities in the context) should also be facilitated and supported.**

People who have faced social exclusion often have high personal levels of disempowerment, so **appropriate support is vital so that they feel empowered to effectively deliver the roles and responsibilities.** Meetings would need careful facilitation so that these people’s views are listened to and acted upon. WaterAid Bangladesh and partners must also be cognisant of any potential ‘backlash’ when people with less power are being more vocal and assertive. WaterAid Bangladesh must also guard against unintentionally putting additional economic and domestic burdens on marginalised people as an unintentional consequence of encouraging/requiring their participation in WASH activities. Otherwise the process will be extractive rather than mutually beneficial and empowering.

7. **WaterAid Bangladesh can further advance its advocacy on rights-based principles by empowering marginalised people to advocate for themselves**

WaterAid Bangladesh is recognised for its equity and inclusion ‘niche’ in the WASH sector nationally. This is demonstrated by its input into national documents such as the Bangladesh National Building Code, the national

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20 This training is currently being finalised, but it is available on demand from Louisa Gosling or Jane Wilbur.
sanitation strategy and the Rights and Protection of Persons with Disabilities Act in 2013 – whereby WASH and equity and inclusion issues were reflected. The country programme has been extremely successful in raising the issue of equity and inclusion in WASH in other sectors, which is a major achievement.

It is encouraging that WaterAid Bangladesh is partnering with B-SCAN (a Disabled People’s Organisation). WaterAid Bangladesh should build on this and partner with more groups comprised wholly of marginalised people to help increase their access to WASH services. A greater focus on empowering those affected to advocate for themselves would mean that WaterAid Bangladesh’s would advocate ‘with’ marginalised people rather than ‘for’ them. A greater direct involvement of marginalised people would also ensure that WaterAid Bangladesh’s advocacy messaging is consistent and in line with the priority issues of marginalised people. This represents an important thread to the rights-based approach in which people demand their own rights.

WaterAid Bangladesh should also encourage and provide appropriate support to its partners to do the same, as well as maximise existing partnerships with organisations in projects funded by other development partners. For instance, reviewers learned that IDEA partners with DPOs and Disabled Persons’ Associations in projects funded by other development partners, but they had not drawn on them in WaterAid Bangladesh funded work. Unfortunately the review team was unable to meet these organisations during the visit.

8. WaterAid Bangladesh support partners should apply simple tools to monitor the participation of marginalised people in their intervention areas

Reviewers found no clear and consistent processes which monitored levels of participation of vulnerable people. This is a common finding across all country programmes that have been part of the equity and inclusion phase two review. The review team used two simple tools to assist in monitoring levels of participation during the field visit: the participation ladder (Annex 10) and the accessibility and safety audit (Annex 6).

‘Participation ladder’ tool

Reviewers held a focus group discussion with three women holding WASH Committee management positions. The participation ladder tool was used to establish their levels of engagement and influence. Firstly the interviewer asked the questions using the tool and then each person self-identified their position on the participation ladder at the start of the intervention and at the current time. Using this tool quickly established a picture of their participation

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22 For example, disabled people’s organisations, women’s rights groups, minority rights groups.
and progress made through the intervention (see results under finding 4). These findings were validated with the focus group discussions with the men in the WASH management committees.

**Accessibility and safety audit**

WaterAid Bangladesh has carried out an accessibility audit of their offices. This demonstrates a keen commitment to being a more inclusive organisation. WaterAid Bangladesh has also carried out accessibility and safety audits in Dhaka and Chittagong with B-SCAN. The process raised awareness of the access barriers that disabled people face and led to policy change. This is a major success.

**WaterAid Bangladesh should now systematically conduct accessibility and safety audits in all projects and WASH facilities.** This will raise awareness of the barriers to access that different people face throughout the total human life cycle for WaterAid and partner staff, as well as for the wider community. It leads to greater participation of end users in the design of their facilities so ultimately they are more likely to be accessible for everyone, not just for people with physical disabilities.

During the field visit the review team conducted five accessibility and safety audits. The audit team consisted of WaterAid Bangladesh staff, IDEA staff, older people, a physically impaired woman, a pregnant woman and children. This accessibility audit (see photo) was conducted on a household toilet used by three families (17 people). Users’ ages ranged from two years to approximately 75 years and one young woman was seven months pregnant. The audit revealed that the older woman (who had failing sight) and the pregnant woman could not use the toilet easily. The slope to the toilet was too steep and slippery; there were no handrails or guide rope to the toilet; no handrails or movable toilet seat inside the superstructure. Discussions using the Compendium of Accessible WASH technologies23 with the family helped them see how they could easily adapt the facility to make it more accessible. Next the team visited the household of a physically impaired man who was fully involved in the development of his toilet. It was fully accessible for him and he was able to use it independently.

Carrying out the accessibility and safety audits meant IDEA and WaterAid staff quickly understood that they were focusing on access for physically disabled people. Staff recognised systematically **scaling up accessibility and safety audits across all WaterAid Bangladesh’s programmes could further promote sustainable, safe services for everyone, everywhere.**

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23 See www.wateraid.org/accessibleWASHtechnologies.
9. Using Washington Group questions to define disability instead of current practice could quickly yield positive results on disability and age-based WASH inclusion

Though there is no accurate national-level data on disability in Bangladesh, the Department of Social Services in the Ministry of Social Welfare is currently carrying out a Disability Detection Survey (FY14/15). Until those results are published, a 2005 study by Handicap International and the National Forum of Organisations Working with the Disabled (NFOWD) reported a disability prevalence rate of 5.6% (due to stigma and discrimination it is likely that this figure is an underestimation) – 80% of those people live in rural areas of Bangladesh.

In the last WaterAid Bangladesh annual report, 0.5% of users who gained access to water and 0.3% of people who gained access to sanitation were reported as having an impairment. If the 5.6% is used as a guide, it shows that the percentages of disabled people reached through WaterAid Bangladesh’s intervention are low. This is likely to be the result of a narrow application of the definition of disability (primarily focusing on physical impairments) and inaccurate identification of disabled people during the planning stages.

Discussions with WaterAid Bangladesh staff and partners revealed that partners gather information through the Para WASH committee and/or ask questions in community surveys to household heads to self-declare people with disabilities in their homes. Due to stigma and discrimination faced by people with disabilities, relying on a second or third party to identify disabled people in an intervention area is unlikely to be accurate. Where disabled people were identified by IDEA, they were predominantly people with physical impairments rather than people with mental health illnesses, deaf, blind or people who have difficulties communicating. This means these people could be excluded from WaterAid Bangladesh’s intervention.

“We don’t work with people with mental health issues. We only work with people with physical disabilities.” (Executive Director, IDEA)

Due to stigma, discrimination and practical difficulties about people being able to communicate and willingness to take part in community consultation meetings, it is not surprising that people with mental health illnesses were absent throughout the review. However WaterAid Bangladesh must work to ensure that its work aims to address all the barriers to WASH faced by marginalised people, including people with different impairments and people with mental health illnesses.

Except for the Country Representative, no one interviewed had heard of the Washington Group questions on disability (see Annex 11). This limited awareness was also the case in Mali and Nepal.\(^{27}\) Reviewers introduced and explained the Washington Group questions to interviewees and how they could usefully yield better data for effective equity and inclusion promotion. WaterAid Bangladesh should consider piloting this methodology in a small sample of projects to see if wider application is appropriate. However this must be considered in relation to definitions used in government surveys.

10. **WaterAid Bangladesh could play a key role in ensuring national policies, guidelines and universal designs are actioned at district level**

Universal designs promoted by WaterAid Bangladesh at a national level were not being applied in practice at the district level in Sylhet. In terms of universal designs,\(^{28}\) reviewers were not taken to any accessible water points, nor did they see any in passing. The team was shown a school WASH facility that was believed to be accessible, though it was not fully accessible as despite a ramp to the toilet platform there was a step into the male and female toilet; there was not enough room inside for a wheelchair user to turn, there were very low handrails but no static or movable toilet seat (see photo above). Nor were there any effective disposal mechanisms for used menstrual materials, which are needed for cloths that cannot be reused. Though the effort is commendable, it shows that WaterAid Bangladesh must provide support to and monitor partners as they construct institutional facilities to ensure adherence to universal guidelines.

An interview with a Sylhet district Education Officer revealed that national standards on universal designs for school toilets exist (developed by UNICEF), but they are not being applied in practice even though budget is available. School toilets, which are considered to be accessible, have handrails inside the toilets but there are no ramps and there are steps into the toilets.

WaterAid Bangladesh should work across its programmes to ensure national policies on universal designs\(^{29}\) are disseminated and applied at district level.

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\(^{27}\) WaterAid Mali and Nepal’s equity and inclusion reviews are available on WaterAid’s Source.

\(^{28}\) Annex 8 includes a definition of universal designs.

\(^{29}\) Ibid.

www.wateraid.org/ppa
level. Depending on the blockage in each district, advocacy messages could focus on utilising available budget, providing awareness raising on the importance of inclusive school WASH, and supporting district government to monitor the construction of facilities.

IDEA’s MHM work in the Tea Gardens’ secondary schools is yielding very positive results. However adolescents go to government high schools outside the Tea Gardens. In those schools MHM programming is very limited, or non-existent. One physically impaired girl (who is very active in the adolescent girls’ clubs and a champion for MHM and rights) explained that when she goes to high school outside the Tea Garden, she does not use the toilets all day because they are inaccessible and dirty.

“There are no menstrual hygiene facilities at [the high] school. People can change their cloths and do, but I worry that I might get infected. Girls throw their used cloths in the open and I feel disgusted.” (Lokhi Rani Das, 18 years old)

The district government Education Officer confirmed that MHM is in the education curriculum for high schools. Teachers are given training to deliver the training but it is unlikely that teaching is given. The Education Officer said that it is common for teachers to hand the chapter on MHM to girls to read. Interviews with adolescent girls also confirmed this.

“Teachers at school are not interested to discuss menstruation. It is in the text book but they have never spoken about it in class. The IDEA education sessions and my older sister helped me to understand it.” (Adolescent girl)

The IDEA project staff reported that they had trained 29 teachers (two males, 27 females) to teach MHM, however the review team did not meet those staff.

The Government Education Officer also confirmed that there is no teaching on puberty in primary schools. WaterAid Bangladesh should influence relevant parties to integrate teaching on menstrual hygiene in primary schools so that girls and boys are more aware of what will happen during puberty. That could begin to dispel misunderstanding, teasing and bullying in secondary school.

WaterAid Bangladesh should also support partners to use their own examples to lobby relevant district government departments to improve inclusive school WASH (that is accessible and includes MHM programming) beyond their intervention areas. This would be more in line with the programmatic approach, which aims to achieve an impact beyond immediate beneficiaries and respond to challenges that hold back the achievement of universal access to permanent WASH services.
11. Human resources – now is the ideal time to bolster investment in equity, inclusion and rights to strengthen WaterAid Bangladesh’s performance and contribution to new global strategy

WaterAid Bangladesh has a long history of investing in equity, inclusion and rights. It began working on equity and inclusion before the WaterAid Equity and Inclusion Framework was developed in 2009 and had an inclusion programme and very active equity and inclusion focal persons.

As equality is central to the new WaterAid global strategy, during the review visit the Country Representative indicated that investment in a resource person must now go beyond an equity and inclusion focal person to a full-time post holder for equity, inclusion and rights. This is a very positive and timely development. It will be important for the full-time post-holder to be well positioned in the organisational structure for influencing the whole of WaterAid Bangladesh (with the support of the senior management team). It will also be important that the post-holder has sufficient resources to effectively influence and support others in all teams.

Resourcing for equity and inclusion at a programme-level across the organisation needs to cover practical inclusion challenges such as additional time, reasonable accommodations, realistic travel costs and the supply of adapted or accessible hardware. Resourcing also includes ensuring staff and partners have the necessary skills, training, tools and support to implement inclusive programmes and that there are ongoing opportunities for skills development.

During the WaterAid Bangladesh equity and inclusion workshop carried out in preparation for the review visit, staff highlighted limitations related to staff training on equity, inclusion and rights.

“Only project staff, not core staff, are trained on E&I issues. This restricts E&I to project teams only, and is not conducive to mainstreaming in the whole of the partner organisation.”

During the field visit reviewers gathered conflicting accounts of disability training to partners: IDEA staff said that they had not received training but WaterAid Bangladesh disagreed. It may be a result of staff turnover or because IDEA does not feel fully equipped, even after training. This demonstrates the need to review the training materials, as well as provide ongoing training and capacity development of both partner staff and WaterAid Bangladesh staff. Building equity and inclusion into all job descriptions and workplans, and having clear accountability threads with appropriate resourcing, would also help ‘systematise’ the approach.

The review team found that internal policies on gender were fairly strong but it was less clear how these are implemented in practice. The WaterAid Bangladesh team is proud to have a female driver among their team. Affirmative action was taken by the HR department to recruit women; however the ratio of female to male staff was low and had recently decreased from 27% in 2013 to 20% in 2015 due to several female staff leaving. Female staff skills were enhanced through their time at WaterAid Bangladesh so they were able to move onto more senior roles in other organisations.

The HR team reported that during exit interviews with female staff, no one had reported issues of bullying or discrimination based on gender. The review team did not take steps to verify this information or ask female staff members. The HR team also reported that they took active steps for diversity among job applicants, including people with disabilities, but applications from disabled people remain low. The HR team understood the principle of reasonable accommodation and reported that in the past it had employed two persons with disabilities (one was still on staff).

**WaterAid Bangladesh needs to continue to monitor the gender balance across the organisation and its affirmative action to recruitment more female staff.** It should also create an enabling environment to support female staff to progress into senior roles and to work towards diversifying its workforce more broadly. Support for this could be requested from the regional people team advisor, and a support group for female staff across the South Asia country programmes could be set up.

**Recommendations from review findings**

WaterAid Bangladesh has been a leader amongst WaterAid country programmes in working towards mainstreaming equity, inclusion and rights in its work. Due to the passion and commitment of leadership and staff there has been real progress in staff and partners’ awareness and practice. This review has been an opportunity for self-critical analysis of how to improve further. WaterAid Bangladesh staff are to be congratulated both on their progress to date and their willingness to take an honest appraisal of that progress to systematically build on it. The following recommendations have been drawn from the experiences in Bangladesh but are also consistent with many of the findings from phase one and two of the global equity and inclusion review. WaterAid’s new global strategy has defined reducing inequalities in access to WASH as one of four key aims for the next five years, heightening the significance of these recommendations to WaterAid Bangladesh.

All of these recommendations, if applied, should enable WaterAid Bangladesh to make significant progress in mainstreaming the continuum of equity, inclusion and rights. Using the diagram below, it means moving from Stage B (developing institutional approaches to inclusion) to Stage C (establishing institutional commitment and practice).
Stages on a continuum towards mainstreaming in disability and ageing (WEDC 2013), used in the Phase 1 global equity and inclusion review report (Coe, July 2014).

**Stage A – getting started:** This is characterised by studies and situation analyses, small pilot projects and advocacy documents.

**Stage B – developing institutional approaches to inclusion.** This is characterised by strategic planning/roadmaps, awareness raising/advocacy activities, training materials, advice and guidance about mainstreaming in WASH services, piloting inclusive WASH activities within a wider WASH programme and developing inclusively designed facilities.

**Stage C – establishing institutional commitment and practice.** This is a range of inclusive practice elements that are routinely implemented as the norm in the work and the organisation itself. A ‘routine’ mind-set for inclusive principles and practice to address inequity issues is applied in a range of areas including staff recruitment, staff induction, analysis, capacity building (with partners and in communities), implementation of fully accessible WASH designs and services, consultation procedures in countries and communities, establishing partnerships with a range of groups of marginalised people. The organisation routinely understands short- and long-term implications of each and every step in policies, processes, procedures and practices and their outcomes/impacts.
WaterAid Bangladesh

Programmes and advocacy

High priority

1. To clarify understanding, achieve consistency and comprehensive reach across the country programme, WaterAid Bangladesh should consistently apply a two-stage situational analysis to identify equality and inclusion issues and base programmes on this analysis:
   - Stage one – macro-level analysis: identify generic geographic and socially excluded groups for example hard-to-reach rural, ex-bonded labourers, ethnic minorities;
   - Stage two – micro-level analysis: adopt as minimum standards the JMP checklist descriptions of individual inequality factors\(^{31}\) – gender, disability, age (older people and children), chronic illness – across all communities identified in the macro analysis process. It is recommended that WaterAid uses the barrier analysis tool to identify the full range of barriers to participation in WASH services according to each individual inequality factor (finding 2).

2. Ensure all staff understand rights-based approaches to disability inclusion and then support all partners to develop the same. This could start with definitions, policies and training materials with support from PSU (finding 2).

3. Implement learning from WaterAid Bangladesh’s focused projects on inclusion across all work areas as a priority activity. Resourcing, institutionalising and scaling up inter- and intra-programme exposure visits between programmes on a six-monthly basis with a team of WaterAid Bangladesh and partner staff would help (finding 3).

4. Partner with more groups comprised wholly of marginalised people in order to strengthen meaningful participation by advocating ‘with’ rather than ‘for’ (finding 7).

5. Encourage the leadership of people from excluded groups (drawing on the micro-level analysis of individual-related inequalities in the context) on WASH management committees. Provide appropriate support and guidance so that they feel empowered to effectively deliver their roles and responsibilities (finding 5).

6. Expand work from aiming to address barriers to WASH that physically disabled people face to the barriers that different

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people face throughout their lives. This means addressing environmental, attitudinal and institutional barriers faced by people with different impairments, people with mental health illnesses, children, older people and people with a chronic illness (finding 9).

7. Ensure all public WASH facilities constructed using WaterAid Bangladesh’s money are fully accessible to everyone throughout the total human life cycle (including children, pregnant women, people with disabilities, including different impairments, and older people). Provide support and monitor partners’ work during construction of institutional facilities to ensure WaterAid Bangladesh’s standards on accessible designs are met. At the household level, systematically promote universal designs to everyone so they can make an informed choice about what design suits them best. Also, work across WaterAid Bangladesh programmes to ensure national policies on universal designs\(^\text{32}\) are disseminated and applied at district level (finding 10).

Medium priority

8. Apply the Human Right to Water and Sanitation’s normative content categories (Annex 9) as a standard in all policy and programming work for more consistent understanding and application of equity, inclusion and rights in WaterAid Bangladesh\(^\text{33}\) (finding 2).

9. Integrate MHM with adolescent reproductive health and contribute to achieving three of the four WaterAid global aims. WaterAid Bangladesh should influence relevant parties to integrate teaching on menstrual hygiene into the primary school curriculum so that girls and boys are more aware of what will happen during puberty. That could begin to dispel misunderstanding, teasing and bullying in secondary school (finding 5).

10. Support partners to use their own examples of success to lobby the relevant district government department to improve inclusive school WASH (that is accessible and includes MHM programming) beyond their intervention areas. This would be in line with WaterAid’s programmatic approach (finding 10).

11. Raise awareness on issues of safety and security by rolling out training on WaterAid’s Gender, Violence & WASH toolkit with WaterAid Bangladesh and partner staff and external stakeholders. Also develop links with organisations in the protection sectors to draw

\(^{32}\) See Annex 8 for a definition of Universal Designs.

\(^{33}\) Also see the Monitoring chapter in the handbook on the right to water and sanitation: http://www.ohchr.org/Documents/Issues/Water/Handbook/Book5_Monitoring.pdf.
on their support, advice and skills, and raise their awareness of WASH issues.

12. **Support IDEA to work with local government to integrate the Tea Gardens into their development plans.** This means ensuring that IDEA does not take on the role of local government (finding 4).

**Tools and approaches**

*High priority*

13. **Apply the ‘participation ladder’ tool** (see Annex 10) and **the accessibility and safety audit** (Annex 6) **systematically across all programmes** to monitor the participation of stakeholders, especially marginalised people (Finding 8).

*Medium priority*

14. **Consider piloting Washington Group questions** (see Annex 11) in a small sample of projects to see if its wider application is appropriate whilst considering the disability definitions applied in government surveys (finding 9).

**Organisational development**

*High priority*

15. **Postion the equity and inclusion post-holder in the organisational structure so s/he can influence the whole of WaterAid Bangladesh** (with the support of the senior management team). Also provide **sufficient resources so the post-holder can effectively deliver key accountabilities.** Resourcing includes ensuring staff and partners have the necessary skills, training, tools and support to implement inclusive programmes and that there are ongoing opportunities for skills development (finding 11).

16. **Build equity and inclusion into all job descriptions and workplans.** Having clear accountability threads with appropriate resourcing would also help ‘systematise’ the equity and inclusion approach (finding 11).

17. **Continue affirmative action to recruit more female staff and monitor the gender balance across the organisation. Continue to develop an enabling environment to support female staff to progress into senior roles.** Support for this could be requested from the regional people team advisor, and a support group for female staff across South Asia country programmes could be set up (finding 11).
Medium priority

19 Review the equity and inclusion training materials in line with WaterAid’s equity and inclusion approach (Annex 12) with support and input from PSU. Provide ongoing training and capacity development for partners and WaterAid Bangladesh staff. Ensure that all tools and publications have a clear audience and comprehensive user-friendly design to maximise use and impact. All tools used by partners should be translated into local languages (finding 11).

20 Work towards diversifying the workforce more broadly to include people with disabilities and other people from socially marginalised groups (finding 11).
Annex 1: Schedule of WaterAid Bangladesh’s equity and inclusion review

<table>
<thead>
<tr>
<th>Date</th>
<th>Particulars</th>
<th>Location</th>
<th>Time</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>07-Aug-15</td>
<td>Arrival and check in</td>
<td>Hazrat Shahjalal International Airport, Dhaka</td>
<td></td>
<td></td>
</tr>
<tr>
<td>08-Aug-15</td>
<td>Open</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09-Aug-15</td>
<td>Interview-01: Mr. Nazmul Haque, ED IDEA</td>
<td>WaterAid</td>
<td>09:00 -10:30</td>
<td>Interview</td>
</tr>
<tr>
<td></td>
<td>Kick-off meeting with WaterAid Bangladesh staff</td>
<td>WaterAid</td>
<td>10:45-11:45 AM</td>
<td>Introduce with all staff at WaterAid in Bangladesh, Sharing objective and purpose of the review</td>
</tr>
<tr>
<td></td>
<td>Travel to Sylhet by Novo Air</td>
<td>Hazrat Shahjalal International Airport, Dhaka</td>
<td>Flight at 12:55 PM</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Airport transfer and check in</td>
<td>Sylhet Osmani International Airport</td>
<td>2:00 PM</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Planning meeting with Review team</td>
<td>Sylhet/ IDEA</td>
<td>02:30-03:30 PM</td>
<td>Briefing on tools, methodologies, team roles and responsibilities, itinerary</td>
</tr>
<tr>
<td></td>
<td>Interview-02: Mr Dostidar PM+ Tawhidul Haque Chowdhury, AD of IDEA</td>
<td>IDEA WASH project Office</td>
<td>03:30-05:00 PM</td>
<td>Interview</td>
</tr>
<tr>
<td>Date</td>
<td>Activity</td>
<td>Location</td>
<td>Time</td>
<td>Note</td>
</tr>
<tr>
<td>-----------</td>
<td>-----------------------------------------------</td>
<td>-------------------------------</td>
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<td>----------------------------------------------------------------------</td>
</tr>
<tr>
<td>10-Aug-15</td>
<td>Field exercise (Part-A)</td>
<td>Kadem Tea Garden</td>
<td>09 AM-1:00 PM</td>
<td>Relevant tools will be applied to capture the existing initiatives and practices on E&amp;I</td>
</tr>
<tr>
<td></td>
<td>Lunch break</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Field exercise (part-B)</td>
<td>Lakkaturah Tea Estate</td>
<td>2:30 PM</td>
<td>Relevant tools will be applied to capture the existing initiatives and practices on E&amp;I</td>
</tr>
<tr>
<td>11-Aug-15</td>
<td>Interview-03: Mr. Ashfaq Ahmed, Chairman</td>
<td>Upazila Parishad</td>
<td>Morning</td>
<td>Interview</td>
</tr>
<tr>
<td></td>
<td>Upazila Parishad, Sadar</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Interview-04: Madiuddin Ahmed</td>
<td>Upazila Parishad</td>
<td>Morning</td>
<td>Interview</td>
</tr>
<tr>
<td></td>
<td>Ahmed Upazila Primary Education Officer</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Interview -05: Alhaz Shahid Ahmed, Chairman</td>
<td>Tukerbazar UP</td>
<td>Afternoon</td>
<td>Interview</td>
</tr>
<tr>
<td></td>
<td>Tukerbazar UP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Interview-06: Mr. Raju Goala, Panchyat leader</td>
<td>Tukerbazar UP</td>
<td>Afternoon</td>
<td>Interview</td>
</tr>
<tr>
<td></td>
<td>Team reflection</td>
<td>IDEA Office/ Metro</td>
<td>4:30 PM onwards</td>
<td>Synthesis and preparation for Debriefing with team</td>
</tr>
<tr>
<td></td>
<td></td>
<td>International</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12-Aug-15</td>
<td>Debrief and depart for Dhaka</td>
<td>IDEA Office</td>
<td>09:00 - 11:30 AM</td>
<td>Shah Amanat International Airport Sylhet</td>
</tr>
</tbody>
</table>

www.wateraid.org/ppa
WaterAid is a registered charity: Australia: ABN 99 700 687 141; Canada: 11928834 RR0001; Sweden: Org nr: 802426-1268, PG: 90 01 62-9, BG: 900-1629
UK: 286701 (England and Wales) and SC039479 (Scotland). US: WaterAid America is a 501(c) (3) non-profit organization
<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
<th>Location</th>
<th>Time</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>13-Aug-15</td>
<td>Interview 07: Salma Mahbub GS</td>
<td>B-Scan Office, Adabar Dhaka</td>
<td>3:30 PM</td>
<td>Interview /FGD</td>
</tr>
<tr>
<td></td>
<td>Interview 08: Mr Ansar Ali Khan CEO of Dhaka City Corporation / Mr Uttam Kumar Das - CM, D-WASA</td>
<td>Dhaka City Corporation - South/ WASA</td>
<td>10:30 AM</td>
<td>Interview</td>
</tr>
<tr>
<td></td>
<td>Lunch break</td>
<td></td>
<td>1:00-2:00 PM</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Debrief at WA</td>
<td>WaterAid</td>
<td>3:00 PM</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Evening/Open</td>
<td>WaterAid</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14-Aug-15</td>
<td>Open</td>
<td>Hazrat Shahjalal International Airport, Dhaka</td>
<td></td>
<td>Jane Wilbur/Chelsea Huggett fly back to the UK/ Australia</td>
</tr>
</tbody>
</table>
## Annex 2: People interviewed

<table>
<thead>
<tr>
<th>Name</th>
<th>Organisation</th>
<th>Job title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shahrukh Mirza</td>
<td>WaterAid</td>
<td>Programme Officer</td>
</tr>
<tr>
<td>Babul Bala</td>
<td>WaterAid</td>
<td>Assistant Programme Coordinator-Engineer</td>
</tr>
<tr>
<td>Mahfuj-ur Rahman</td>
<td>WaterAid</td>
<td>Programme Officer</td>
</tr>
<tr>
<td>Hasin Jahan</td>
<td>WaterAid</td>
<td>Director – Programmes and Policy Advocacy</td>
</tr>
<tr>
<td>Razia Sultana Luna</td>
<td>WaterAid</td>
<td>Head of Human Resources</td>
</tr>
<tr>
<td>Shafiqur Rahman</td>
<td>WaterAid</td>
<td>Documentation and Communication Specialist</td>
</tr>
<tr>
<td>Shamim Ahmed</td>
<td>WaterAid</td>
<td>Head of Policy and Advocacy</td>
</tr>
<tr>
<td>Imrul Kayes Muniruzzaman</td>
<td>WaterAid</td>
<td>Director – Fundraising and Organisational Learning</td>
</tr>
<tr>
<td>Nazmul Haque</td>
<td>IDEA</td>
<td>Executive Director</td>
</tr>
<tr>
<td>Pankaj Ghosh Dostidar, Mr Nazim Ahmed</td>
<td>IDEA</td>
<td>Project Manager, Assistant Director, Programmes</td>
</tr>
<tr>
<td>Rojina Chowdhury</td>
<td>IDEA</td>
<td>Community Development Officer</td>
</tr>
<tr>
<td>Mr Ashfaq Ahmed</td>
<td>Upazila Parishad, Sadar</td>
<td>Chairman</td>
</tr>
<tr>
<td>Mahiuddin Ahmed</td>
<td>District Government</td>
<td>Upazila Primary Education Officer</td>
</tr>
<tr>
<td>Alhaz Shahid Ahmed</td>
<td>6 no. Tukerbazar Union Parishad</td>
<td>Chairman</td>
</tr>
<tr>
<td>Mr Raju Goala</td>
<td>Tea Labour Union</td>
<td>President of Surma Valley Labour Union (a valley consists a total of 22 tea gardens)</td>
</tr>
<tr>
<td>Informant did not want their name recorded</td>
<td>Tea Garden Manager</td>
<td></td>
</tr>
<tr>
<td>Informant did not want their name recorded</td>
<td>Tea Garden Manager</td>
<td></td>
</tr>
<tr>
<td>Sribash Mahali</td>
<td>Khadam Tea State (FGD with men)</td>
<td>Former President Sylhet Valley and present member of labour union.</td>
</tr>
<tr>
<td>Nantu Ranjan Sing</td>
<td>Khadam Tea State (FGD with men)</td>
<td>Assistant Teacher, Nirmola Primary School</td>
</tr>
<tr>
<td>Name</td>
<td>Organization</td>
<td>Role</td>
</tr>
<tr>
<td>----------------------</td>
<td>--------------------------------</td>
<td>-------------------------------------</td>
</tr>
<tr>
<td>Joyram Kurmi</td>
<td>Khadim Tea State (FGD with men)</td>
<td>Factory labor</td>
</tr>
<tr>
<td>Amal Nayek</td>
<td>Khadim Tea State (FGD with men)</td>
<td>General Secretary, Ponchayaet,</td>
</tr>
<tr>
<td>Sabuj Tati</td>
<td>Khadim Tea State (FGD with men)</td>
<td>President, Ponchayaet</td>
</tr>
<tr>
<td>Shugah Rani Basak</td>
<td>Khadim Tea State (FGD with men)</td>
<td>Union Parishad member</td>
</tr>
<tr>
<td>Bela Chatry</td>
<td>Khadim Tea State (FGD with women)</td>
<td>Chairperson</td>
</tr>
<tr>
<td>Madwri Mahali</td>
<td>Khadim Tea State (FGD with women)</td>
<td>Para WASH committee</td>
</tr>
<tr>
<td>Lokhi Rani Das</td>
<td></td>
<td>Community member (18 years old with a physical impairment).</td>
</tr>
<tr>
<td>Salma Mahbub</td>
<td>B-SCAN</td>
<td>General secretary</td>
</tr>
<tr>
<td>Shegeta</td>
<td>Independent consultant working with B-SCAN</td>
<td>Architect</td>
</tr>
<tr>
<td>Sumana</td>
<td>B-SCAN</td>
<td>Volunteer</td>
</tr>
<tr>
<td>Focus group discussion participant (name not recorded)</td>
<td>Concerned Women for Family Development</td>
<td></td>
</tr>
<tr>
<td>Focus group discussion participant (name not recorded)</td>
<td>Concerned Women for Family Development</td>
<td></td>
</tr>
<tr>
<td>Focus group discussion participant (name not recorded)</td>
<td>PNSP (Disability Network)</td>
<td></td>
</tr>
<tr>
<td>Focus group discussion participant (name not recorded)</td>
<td>Society of Deaf and Sign Language Users</td>
<td></td>
</tr>
<tr>
<td>Focus group discussion participant (name not recorded)</td>
<td>Society of Deaf and Sign Language Users</td>
<td></td>
</tr>
</tbody>
</table>
Annex 3: List of documents reviewed for equity and inclusion review

2. WaterAid Bangladesh Annual report 2013–14
3. WaterAid Bangladesh MPB narrative FY15/16 – FY 17/18
6. Analysis of rights, equity and inclusion in the WASH sector (nd.) (Unnayan Onneshan – the Innovators)
7. Promoting Equity and Access to WASH Among Tea Labourers in Sylhet: Stakeholders Perception on WASH Project for the Tea Labourers
8. Where no one has worked before: innovators behind WaterAid’s WASH work in Bangladesh’s tea garden communities
9. WaterAid’s Global Strategy
10. Bangladesh Disability Information sheet (CBM)
11. Legal obligations with tangible benefits
13. RBA questions from the South Africa meeting
15. ICC T20 World Cup 2014 and Collaboration with WASH United for breaking the silence on Menstrual Hygiene
16. Transforming our world: the 2030 agenda for sustainable development
17. Review of equity inclusion – phase one report
18. Review of equity and inclusion – phase two report
19. Project plan (641IC) WASH for Tea Garden Workers
Annex 4: Summary of IDEA’s project plan

Name of the project:  WASH for tea garden workers

Start date:  01/10/10

End date:  30/11/15

Background

Tea is one of the major export products in Bangladesh. Bangladesh is the 10th biggest tea-producing country and the 9th biggest tea exporting country in the world. There are 164 tea gardens in Bangladesh in seven districts. The problems of safe water and sanitation in tea garden areas of Jaintiapur upazila and Sylhet sadar upazila of Sylhet district lay beneath to some extent that appears to be apparently unsurpassable, like insufficient consciousness about using pure drinking water and hygienic sanitary latrine, lack of feelings of hygienic sanitation practices in tea community level etc. The WASH for Tea Garden Workers Project has been transforming the lives of tea garden workers by improving access to safe water, sanitation and hygiene in tea garden areas of Sylhet. Those targeted are very poor and marginalised, deprived of basic needs and rights. With a view to ensuring safe water, sanitation and hygiene for this excluded community, IDEA has been performing WASH activities through its equity and inclusion project supported by WaterAid since October 2010, changing people’s attitude towards practicing a healthy life on their low incomes.

This project has been covering the four tea gardens in Lackatoora and Doldoli from national tea company and Burjan and Charagonj from private company. There are 1,531 households and 7,020 male and female inhabitants living in those areas. The overall objective of this project is to improve health status of tea garden workers by meeting their water, sanitation and hygiene needs through establishing their rights and appropriate technologies and approaches. The targeted beneficiaries are workers in tea gardens, women-headed households, heads of household who are exclusively day labourers, retired people and disabled workers. The tea gardens are totally isolated from mainstream and no-one can visit the gardens without permission, while garden workers cannot go leave. Although they have voting rights (because it is under jurisdiction of union parishad), local government has no right to interfere in the garden as a rule.

Purpose

The goal of the project is to establish rights of the poor, disadvantaged and isolated communities in Sylhet to access safe and sustainable water supply, sanitation and hygiene services.
Objectives

2. Document the current situation to understand the socio-economic condition, vulnerabilities of excluded communities in Sylhet.
3. Poor and vulnerable communities and local governments are strengthened and engaged in participatory planning and implementation of safe water supply, sanitation and hygiene facilities.
4. Reasons for vulnerabilities in accessing water, sanitation and hygiene in Bandarban areas are explored.
5. Poor, disadvantaged and vulnerable population in selected hard-to-reach areas have established their access to sustainable water supply, sanitation and hygiene facilities.
6. Poor, disadvantaged and vulnerable population and local government in selected hard-to-reach areas have established their access to sustainable water supply, sanitation and hygiene facilities.
7. Access to safe water supply, improved sanitation facilities and safe hygiene practices increased in selected hard to reach areas.

Activities

- Construction of tube wells, community and household sanitation, and school WASH facilities
- Conduct research on the current WASH and socio-economic condition, vulnerabilities of the ethnic minorities of Sylhet region; document, disseminate and use to influence other sector actors and beyond.
- Training for Para WaSH Committee/community on PM&E, leadership development.
- Para WaSH committee will be trained to carry out their roles and responsibilities.
- Foundation trainings will be provided to CBOs on hygiene promotion.
- Refresher meetings will be arranged on hygiene promotion for CBOs.
- Community campaign on WASH, training to adolescent girls on menstrual hygiene.
- Partner staff will be trained on E&I based on E&I framework to build and improve their capacity in understanding the rights of vulnerable people, in this case tea garden labourers.
- Community involvement will be ensured to understand and develop the potential of technical persons in developing specific technical needs for the community.
- Training will be arranged for school management committee, cultural groups, WASH committee, Panchayet etc.
Annex 5: Equality checklist

When examined as a whole, do the goals, targets, and indicators:

- Prioritise basic access and focus on progressive realisation toward safe and sustainable water, sanitation and hygiene for all, while reducing inequalities?

- Address spatial inequalities, such as those experienced by communities in remote and inaccessible rural areas and slum-dwellers in (peri-)urban areas?

- Focus on inequities, shining the light on the poorest of the poor?

- Address group-related inequalities that vary across countries, such as those based on ethnicity, race, nationality, language, religion, and caste?

- Attend to the impacts of individual-related inequalities that are relevant in every country of the globe, such as those based on sex/gender, age, disability, and health conditions imposing access constraints – as they are experienced both inside and beyond the household? Do they address menstrual hygiene management?

---

Annex 6: Accessibility and safety audit: latrine

The purpose is to examine a sanitation facility, and:

a) Find out if a physically vulnerable person is able to use the facility independently.
b) Identify which features make it easy to use, and which features make it difficult to use by a physically vulnerable person.
c) Find out if there are any safety concerns around using the facility, particularly for adolescent girls, women and children of different ages.
d) Identify if there are any changes that can be made to the facility or its surrounds to reduce safety risks identified.
e) Make suggestions for changes/improvements.
f) Involve users in the design of facilities.

Accessibility and safety

Different users now attempt to get into and show how they can/cannot use the toilet. Make a note of who can use it and who cannot, and what features make it difficult to use. Use the attached checklist to remind you of the kind of features to look for, ignore any that are not relevant, and add things that are missing.

1. Getting there and suggested changes

<table>
<thead>
<tr>
<th>Checklist</th>
</tr>
</thead>
<tbody>
<tr>
<td>· Distance from house to latrine.</td>
</tr>
<tr>
<td>· What is the path/access route made of?</td>
</tr>
<tr>
<td>· Is the path wide enough for all disabled users (recommended min width 90cm)?</td>
</tr>
<tr>
<td>· Is the path level and firm, with nothing to trip up? Is the path surface slippery when either dry or wet? Are there obstacles that block the path, or make it easy to trip especially for visually impaired people (up to 2m above floor level)? Is the path clear of branches of trees and bushes?</td>
</tr>
<tr>
<td>· Can a blind person follow the path? E.g. clear surface texture, landmarks or guide rail?</td>
</tr>
<tr>
<td>· Are slopes too steep? (Recommended max 1 in 10). Is the surface of the slope slippery or non-slip?</td>
</tr>
<tr>
<td>· If used at night, is the path lit?</td>
</tr>
<tr>
<td>· Are there any parts of the path that make adolescent girls, women or children feel unsafe when using it? If so why?</td>
</tr>
</tbody>
</table>

35 Adapted from Accessibility and Safety Audit: Latrines (WEDC / WaterAid 2014). Available at http://wedc.lboro.ac.uk/resources/learning/Accessibility_safety_audit_latrine_2013.doc.
36 This might be an older woman or man, a small child, a heavily pregnant woman, a wheelchair user or person who walks with a stick or crutches, someone who is visually impaired, with weak grip, a broken leg, a limb amputation etc.
2. Getting in/on/out and suggested changes

**Checklist**

**Steps:**
- Are they even or uneven, firm or broken, non-slip or slippery?
- Are they suitable height? (recommended max 15 – 17 cm each step)
- Is there a hand-rail for support?

**Entrance:**
- Is there a flat platform in front of the door? Is it wide enough for a wheelchair user to enter? (Recommended min width 80cm)
- Is the difference in height between inside and outside level, or a maximum 17cm?
- Is the door easy to open by someone with weak hands?
- Does door open inwards or outwards?
- Can the user close the door easily from inside?
- Is the door easy to lock and unlock?
- If someone faced harassment or other safety risks when using the facility would they be able to safely get away from the facility?

3. Safety of use

**Checklist**

**Feeling safe when using the latrine:**
- Do all groups of people feel safe when using the latrine? Particularly ask adolescent girls, women and children of different ages.
- Are there any particular times or day or night when adolescent girls, women or children feel less safe?
- Is there any way that men or boys can easily see inside the women/girls’ latrines?
- How far is the women’s latrine located from the men’s latrine? Do men and boys hang around outside the women’s latrine?

**Management and maintenance:**
- If there is a caretaker or cleaner do they make adolescent girls, women and children feel safe when they use the latrine by the way they behave?

**Improvements:**
- How would the users suggest the facility design or management could be improved to make it feel safer to use?
4. **Inside (draw a plan on a separate page to show dimensions and layout viewed from above) suggested changes**

**Checklist**

**Space inside:**

- Total internal dimensions (width, length)
- Distance from door to front of toilet pan/hole
- Width & height of toilet pan
- Distance on each side of toilet pan to each side wall

Does the layout of the toilet allow space for a wheelchair/ crutch user or a user and helper? (Draw the layout on a plan diagram)

**Floor:**

- What is it made of? Is it even, or uneven, firm or unstable, slippery or non-slip? Does it appear to be easy to clean?

**Light:**

- When the door is closed is there enough light to see the toilet hole and footplates?

**Windows and roof:**

- Do these provide adequate privacy for women and girls using the latrine? Can anyone see inside when standing on neighbouring roofs?

---

5. **Support structures and suggested changes / improvements**

**Checklist**

**Describe:**

- Is it a squatting or sitting latrine?
- If squatting: is there something to hold onto when squatting? Rails/ rope etc. materials, finish, position, height, etc. (Draw their position on a plan.)

**Seat (if there is one):**

- Describe materials, finish, dimensions, fixed/moveable, size of hole.
- Is it easy to use, easy to clean? Why? Why not?
6. Water/anal cleansing materials (availability) and suggested changes / improvements

**Checklist**

- Is there an internal water point? Describe.
- Can it be reached from squatting/sitting? If not, what is the source and how far is it from the latrine?
- Are anal cleansing materials easily available?
- Are there disposal facilities for anal cleansing materials?

7. Disposal facilities for sanitary protection materials (availability and functioning)

**Checklist**

- Is there a system for discrete disposal of sanitary protection wastes?
- Is there a container with a close-fitting lid for used materials to be put into?
- Are the containers used?
- Are the containers emptied regularly? Is someone responsible for emptying and cleaning the containers?
- Is there an agreed and safe location for the final disposal of the wastes (for example incineration, burying or disposal into municipal waste collection systems)?

8. Handwashing and suggested changes / improvements

**Checklist**

- Is water available for handwashing?
- Is soap or ash available?
- Can it be easily reached by all users – including small children?
- Is there somewhere for the water to be disposed of that keeps the surroundings hygienic and from becoming slippery?
- Are the boys and girls hand-washing facilities separate and away from each other (to allow privacy for girls managing their menses)?
Annex 7: Interview question template

Key informant interviews, WaterAid Bangladesh staff – interview question list

1. Role in WaterAid (WA) Bangladesh and previous experience
   • What is your role in WaterAid, how long have you worked for WA?
   • What is your background prior to working for WA?

2. Understanding of concepts and terms
   • What do you understand by the term ‘equity and inclusion’?
   • What is your understanding of ‘rights’?
   • In relation to your work in WA?
   • What do you think WA is trying to achieve as an organisation by making this a central part of the organisation’s strategy?
   • What do you think WA’s partners in Bangladesh believe ‘full inclusion’ means?
   • What do you think the communities WA partners work with believe ‘full inclusion’ means?
   • How do i. WA Bangladesh and ii. its partners assess and decide what to do to ensure equity and inclusion principles are applied?
     o what do they ask
     o who do they involve
     o what decisions have they made on how to respond?
   (This will include looking at analysis tools, staff understanding of concepts, vulnerability/planning assessment processes.)

3. Positive progress experienced
   • What work in equity & inclusion has gone well that you have been involved with or have seen?
   • Why?

4. Challenges encountered
   • What has been challenging?
   • Why?

5. Equity and inclusion framework and current minimum standards
   • What do you know about the ‘equity and inclusion’ framework?
   • Do you use it in your work?
   • What is useful/not useful? What is good about it? What is missing?
   • Do you use the minimum standards (4 strategic aims, 19 minimum standards, 59 indicators) in the ‘equity and inclusion’ framework to guide your work in the area of what you want to achieve? Which ones?

6. Gender issues in equity and inclusion work
   • What is the situation in the Bangladesh country programme re: gender in its work and practices?
• If gender issues are not being systematically addressed, why do you think this is?
• Are there other reasons accounting for lack of attention to gender issues you think might need addressing?
• Do you think WA should introduce minimum inclusion standards of the individual exclusion factors of gender, disability, age (older and children) and chronic illness in its work?  

7. WA Bangladesh’s partners in country:
• Who are they?
• What category of partner (three types – traditional service delivery; strategic support; groups of marginalised people) is each one as per phase one report definitions?  
• How are they i. selected and ii. supported on equity and inclusion approaches by WA’s country programme staff?
• What is their understanding of key concepts such as rights, inclusion, participation, vulnerability, disability etc? How confident are they at delivering participatory programmes? What is their relationship like with communities? Is WA aware of their capacity?
• Type 1: traditional service delivery partners – what factors lead them to apply equity and inclusion principles – or not?
• Type 2: strategic support partners – which organisations/groups does WA Bangladesh ask to support them in delivering equity and inclusion principles in its work? How much does their work help WaterAid strengthen its equity and inclusion work?
• Type 3: groups of marginalised peoples – who are WA Bangladesh (directly) and WA Bangladesh’s service delivery partners (type 1) partnering with from type 3 partners? How well are these partnerships working? Why/why not?

8. Participation of marginalised people in WA Bangladesh work
• Who defines the marginalised groups/people WA should work with in the country programme – what process was used to define this?
• What do you think the current situation of the direct involvement and participation of marginalised people in WA is – how much do you think they are participating? Can you give examples of where they are/are not participating?
• How can WA Bangladesh improve the participation of marginalised people in defining its work?

38 See p.28–30 of phase one report – Type 1 (traditional service delivery), Type 2 (strategic support), Type 3 (groups of marginalised people).
• What methods does WA Bangladesh use to measure participation by people in communities in its work? How is participation monitored and recorded?

9. Equity and inclusion focal points:
• Do/did you have one? How do/did they operate in practice? Did they have authority to influence programme/organisational work?
• Are they seen in the country programme as a necessary resource to deliver equity and inclusion approaches?
• Are the focal points expected to deliver the equity and inclusion approach – i.e. are staff delegating all responsibility for equity and inclusion on them? Or are they seen as equipping/support/resource points?
• How are focal points managed? Who do they report to? Is the role formalised in their contract? How is their equity and inclusion role monitored?
• Phase one reported that countries without focal points wanted them, but that most staff in the country programmes who had focal points tended to delegate all responsibilities to the individual focal point to deliver. What do you think the situation in WA Bangladesh is? What would a balanced approach look like?

10. In-country advocacy work:
• What does WA Bangladesh do in its advocacy work on equity and inclusion?
• How does it link its advocacy work on equity and inclusion to its programming?
• At what levels – district, regional, national?
• Who does WA Bangladesh partner with to implement in-country advocacy work?

11. Documents and toolkits provided by the Programme Support Unit, WaterAid UK:
• What is used that has been provided by PSU in WaterAid UK?
• What has been modified/developed in county? How? Why?
• What is most useful?
• What needs to be provided to support better programming work? Any gaps in current toolkits? Any need for new toolkits?

12. Human Resources:
• How inclusive are WA Bangladesh’s in-country HR practices?
• Are jobs structured so everyone can apply?
• How are staff recruited? What channels – are they inclusive?
• Who applies? Are records kept on who applies? How many staff from marginalised groups? If a low number – why?
• How are WA Bangladesh staff (both those from marginalised groups and those who are not) inducted/supported to ensure the staff from marginalised groups can perform properly in their WaterAid staff roles?
• What measures are in place to ensure the needs of all staff (for example people with different impairments) are accommodated?
Annex 8: Definitions of barriers to inclusion under rights-based approaches

Universal Design

Universal Design makes things safer, easier and more convenient for everyone. It involves designing products and spaces so that they can be used by the widest range of people possible. Universal Design evolved from Accessible Design, a design process that addresses the needs of people with disabilities. Universal Design goes further by recognising that there is a wide spectrum of human abilities. Everyone, even the most able-bodied person, passes through childhood, periods of temporary illness, injury and old age. By designing for this human diversity, we can create things that will be easier for all people to use.

Environmental barriers:

Physical barriers in the natural environment such as distance to water sources, difficult parts to latrines; built infrastructure; and artificial barriers such as toilets too small for a wheelchair user to enter and turn inside or a well with sides too high or pump handles too heavy for individuals who have difficulty moving or lifting.

Attitudinal barriers:

These include prejudice, discrimination and stigma based on false assumptions about impairments, their causes and their consequences – including being incapable/inadequate, of low intelligence, in need of a ‘cure’, cursed/punished, carrying ‘bad luck’ for other community members if they associate with them. People who make these judgements treat the disabled person as superfluous or superhuman and often respond to disabled people with fear, pity, repulsion, or a sense of superiority.

Institutional barriers:

These are policies, laws and systems that exclude or segregate disabled people; examples include legal systems, employment laws, electoral systems, education policies, health service provisions, social services, belief systems and religion, humanitarian/development agency policies. It is also a lack of participation of people who may be marginalised in the development of these policies, as well as inaccessible information imposed on people with visual impairments, hearing impairments and intellectual impairments through lack of accessible formats and language.

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39 Taken from WaterAid equity and inclusion materials, plus Coe and Wapling, Travelling together, (2010), World Vision UK.
Annex 9: Normative content categories of the rights to water and sanitation

How to use the normative content of the rights

The content categories as described below serve as guidance in assessing whether water and sanitation services are compliant with human rights to water and sanitation. They cannot provide for standards that apply to every situation as every individual situation is unique.

Availability

Water and sanitation must be available for everyone in the household or its immediate vicinity, in sufficient quantity and on a continuous basis, for personal and domestic use. This includes drinking, personal sanitation, washing of clothes, food preparation and personal and household hygiene. There must be a sufficient number of water outlets and sanitation facilities to ensure that the needs of the people are met and collection and waiting times are not unreasonably long. Also, sanitation is only considered available when the collection, transport, treatment and disposal or reuse of human excreta and associated hygiene is ensured.

Physical accessibility

Water and sanitation infrastructure must be constructed and located in a way that facilities accessibility for everyone at all times – including for people with particular needs, such as children, older persons, persons with disabilities or chronically ill persons. The facilities must be safe to use for all users, and participation is therefore crucial in order to design the facilities needed and build them in the most convenient location.

- **Time and distance:** Sanitation and water facilities must be physically accessible for everyone within or in the immediate vicinity of each household, health or educational institution, public institution and workplace, or any other place where people spend significant amounts of their time.
- **Physical security:** Facilities must be within easy reach, with safe paths to get to them and be located in a safe area, including at night.
- **Design of facilities:** Mechanisms to extract water from pipes or wells, and the designs of sanitation facilities need be adapted to the needs of older persons, children, persons with disabilities, and chronically ill people, and pregnant women. For sanitation facilities, the needs of these individuals have implications for the entrance size of the sanitation facility, the interior space, handrails or other support mechanisms, the position of defecation, as well as other aspects.

Acceptability

Water and sanitation services must take into account the cultural needs and preferences of users – this can only be achieved by involving individuals and communities in the planning of services.

- **Water** must be of an acceptable colour, odour and taste for each personal or domestic use, as people may otherwise resort to unsafe alternatives. The water facility must also be acceptable for usage, especially concerning personal hygiene. Facilities must also provide for the privacy and dignity of users.
- **Sanitation facilities** will only be used when they are acceptable to users. This often requires toilets to ensure privacy, and often includes that facilities must be separated according to sex. Facilities will need to accommodate common hygiene practices, such as either water or paper for anal and genital cleansing. Toilets for women and girls must have facilities for the disposal of menstrual materials and for menstrual hygiene management.

Affordability

Access to water and sanitation must be affordable for everyone. Paying for water and sanitation services must not limit one’s capacity to pay for other essential goods or services, such as food, housing, education or medicines. Affordability of water and sanitation services as well as associated hygiene must ensure people are not forced to resort to other, unsafe alternatives. The human rights to water and sanitation do not call for services to be free of charge. Services must however be affordable for all, which automatically includes the need to develop tariff systems and subsidies, or in some cases free services, to ensure that services are affordable for all.

Quality

Water must be safe for human consumption and for personal and domestic hygiene. It must be free from microorganisms, chemical substances and radiological hazards that constitute a threat to a person’s health. Sanitation facilities must be hygienically and technically safe to use and must effectively prevent human, animal and insect contact with human excreta to protect the health of users and the community. Toilets must provide hygiene facilities for washing hands with soap and water and must enable menstrual hygiene management for women and girls, including the disposal of menstrual products.
Annex 10: ‘Participation ladder’ tool

Title: Tool 3 Participation ladder

Aim: To monitor how effectively various groups feel like they are participating and involve in decision-making. The visual aid illustrates the different levels of participation. The diagram is to help the person carrying out the interview to assess where the person is on the participation ladder.

Who: WaterAid CP

Frequency: Quarterly, select a few households

When: Information will be collected by carrying out a series of qualitative questions at household level with the sample identified in each quarter.

Levels
- Level 0: Token participation
- Level 1: Active participation
- Level 2: Decision-making
- Level 3: Ownership and control

Definitions:
- **Allowed to join**: The respondent received an invite to the community meeting.
- **Attend meetings**: The respondent physically attended the meeting, training or consultation.
- **Speak up**: The respondent raised issues/concerns/questions if they had any.
- **Listened to**: The respondent feels that s/he was listened to with attention by the rest of the participants and that her/his issue/concern/question was understood.
- **Influence decisions**: A decision was made that addressed or responded to an issue/concern/question of the respondent.
- **Make decisions**: The respondent was able to make a decision him/herself or vote to approve or reject a group decisions.
<table>
<thead>
<tr>
<th>A1 Date:</th>
<th>Vulnerability class</th>
<th>L1 District / L2 sub-county or Ward / L3 Village (state all):</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>P1 Gender</strong></td>
<td><strong>P2</strong> Disabled</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td><strong>P3</strong> Chronically ill</td>
<td>☐</td>
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<tr>
<td></td>
<td><strong>P3</strong> Older</td>
<td>☐</td>
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<tr>
<td></td>
<td><strong>P4</strong> Child (≤ 18)</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td><strong>P5</strong> No vulnerability</td>
<td>☐</td>
</tr>
</tbody>
</table>

**Q1** Response to question 1: Are you always invited to participate in community meetings?

**Q2** Response to question 2: How do you feel about your participation during the community meetings?

**Q3** Response to question 3: Are you given the chance to express yourself in the meeting?

**Q4** Response to question 4: If yes, do you feel your ideas, opinions are considered?

**Q5** Response to question 5: What results or actions can you attribute to your input during the village meetings?
## Review

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

<table>
<thead>
<tr>
<th>Level</th>
<th>Description</th>
</tr>
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</table>

**PL2** What activities have you take part in recently?

**PL3** Using the participation ladder describe which level of participation matches your experiences for participation in HH level WASH activities

**PL4** What WASH activities have you take part in recently?

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### Notes on completing the form:

- You do not need to record the impairment type (e.g. blindness, deafness, wheelchair user). You only need to tick if the person is disabled.
- Definition of chronically illness: a chronic condition is a health condition or disease that is persistent, lasting more than three months. Common chronic diseases include arthritis, asthma, cancer, lung disease, diabetes and HIV and AIDS.
Annex 11: Washington Group questions on disability

Core questions:

1. Do you have difficulty seeing, even if wearing glasses?
   a. No – no difficulty
   b. Yes – some difficulty
   c. Yes – a lot of difficulty
   d. Cannot see at all

2. Do you have difficulty hearing, even if using a hearing aid?
   a. No – no difficulty
   b. Yes – some difficulty
   c. Yes – a lot of difficulty
   d. Cannot hear at all

3. Do you have difficulty walking or climbing steps?
   a. No – no difficulty
   b. Yes – some difficulty
   c. Yes – a lot of difficulty
   d. Cannot walk or climb steps at all

4. Do you have difficulty remembering or concentrating?
   a. No – no difficulty
   b. Yes – some difficulty
   c. Yes – a lot of difficulty
   d. Cannot do this at all

Additional questions:
5. **Do you have difficulty (with self-care such as) washing all over or dressing?**
   a. No – no difficulty
   b. Yes – some difficulty
   c. Yes – a lot of difficulty
   d. Cannot do this at all

6. **Using your usual (customary) language, do you have difficulty communicating, for example understanding or being understood?**
   a. No – no difficulty
   b. Yes – some difficulty
   c. Yes – a lot of difficulty
   d. Cannot do at all
Annex 12: WaterAid’s Equity and Inclusion Approach