



Mainstreaming Gender Approaches for Equality: NRD's Water and Sanitation Project in Bangladesh

Md. Mahidul Islam^{1*}

¹*North-Bengal Research Foundation and Development (NRD), Strengthening Water and Sanitation (WS) Project of NRD, Mohanagor Project, West Rampura, Hatirjheel, Dhaka, Bangladesh.*

Author's contribution

The sole author designed, analyzed, interpreted and prepared the manuscript.

Article Information

DOI: 10.9734/ARJASS/2018/37008

Editor(s):

(1) Prof. Chang-Ho C. Ji, Department of History and Politics, La Sierra University, USA.

Reviewers:

(1) Dodo Juliet Dingtsen, University of Jos, Nigeria.

(2) Ignatius Isaac Dambudzo, Zimbabwe Open University, Zimbabwe.

Complete Peer review History: <http://www.sciencedomain.org/review-history/26195>

Short Research Article

Received 16th August 2017
Accepted 31st October 2017
Published 12th September 2018

ABSTRACT

North-Bengal Research Foundation & Development (NRD) aims at eliminating poverty through different projects in Bangladesh. To help realize the MDGs and SDGs, NRD is implementing 'Water and Sanitation (WS)' project in northern-western part of the Bangladesh since 2012. The project aims to improve the health of poor and enhance equitable development through provision of sustainable and integrated WS services; inducing hygienic behaviors to break the contamination cycle of unsanitary latrines and contaminated water; and ensuring sustainability and scaling-up. The objective of this paper is to describe which areas were adapted for mainstreaming gender approaches and ensuring equity of services. Both qualitative and quantitative data were collected from primary and secondary sources, validity cross-checked through triangulation. Findings show that gender mainstreaming as a cross-cutting strategy helps women and other disadvantaged groups, notably poor and ultra-poor households, to become aware of, and increase their access to services and decision-making processes for equal benefits. Different initiatives adopted by NRD towards equitable access to and control over WS services which ultimately reducing the gender gap and promoting sustainable development. However, the poor, ultra-poor, disabled persons and hard-to-reach areas are still underserved. The affordability and involvement in decision making of vulnerable groups are still challenge that lessons could be useful for others who also working in the sector.

*Corresponding author: Email: mahidul68@gmail.com, info.nrdbd@gmail.com;

Keywords: Mainstreaming gender; equity; inequality; disaggregated data; health-wellbeing.

1. INTRODUCTION

North-Bengal Research Foundation and Development (NRD) is a non-profit organization based in the Bangladesh. Its members include scholars and professionals committed to supporting development initiatives in Bangladesh aimed at improving the quality of life for all disadvantage groups. NRD is promoting the sound of silence of millions who are left behind and vulnerable groups. Its project aligns with Millennium Development Goals (MDGs) and Sustainable Development Goals (SDGs) [1,2] of eradicating extreme poverty and hunger, promoting gender equality, ensuring human rights and education, combating diseases, and ensuring environmental sustainability [3]. In order to contribute towards achieving the MDGs and SDGs; NRD has been implementing the Water and Sanitation (WS) Project since 2012. The project goals are to improve the health of the rural poor and enhance equitable development through the provision of sustainable WS services; to break the contamination cycle of unsanitary latrines and contaminated water use; and ensuring sustainability. In Bangladesh, women remain the principal water, sanitation and hygiene managers. They play many unpaid, but economically important roles in the family and are still excluded from decision-making power at home and in society. In its work to achieve gender equality, the NRD WS project recognizes the gender mainstreaming importance for the proper management of water, sanitation and hygiene in their homes, their communities.

2. CONCEPTUAL CALEFACTION

Gender refers to socially constructed roles played by women and men that are assigned on the basis of their sex. Gender is used as a means to distinguish similarities and differences between women and men without direct reference to human biology, but rather to the behavioural patterns expected of women and men, and the cultural reinforcement of such behaviours.

Gender equity is the principle and practice of fair and equitable allocation of resources and opportunities to both women and men. To ensure such fairness, measures must be taken to compensate historical and social disadvantages that prevent women and men from operating on a level playing field.

Gender equality- the concept that all human beings, irrespective of sex, age, marital status, class, caste and physical and mental health are free to develop their personal abilities and make choices without the limitations set by stereotypes, rigid gender roles and prejudices. Gender equality means that the different behaviours, aspirations and needs of women and men have been considered, valued and favoured equally. It does not mean that women and men have to become the same, but that their rights, responsibilities and opportunities will not depend on whether they are born male or female [4].

Mainstreaming gender and gender equality means for NRD that the implications of any planned action, be it in legislation, policies or projects, are assessed for women and men, in all sectors and at all levels. It also means that measures are taken for women and men to participate and benefit equally and that gender inequality is not perpetuated. This is done by adjusting the design, implementation, monitoring and evaluation of policies and projects to men's and women's concerns, experiences and interests in all political, economic and societal spheres. The ultimate goal is to achieve gender equality [5].

2.1 Gender Mainstreaming & Women Subordination

The Harvard Gender Analysis Framework [6] also supplemented on gender mainstreaming. To lessen women's subordination to men, Kabeer [6] has distinguished four forms of women's empowerment [7]:

Power within:	Women, and other disadvantaged groups, become aware of their position and develop the will and the power to change
Power with:	Women unite and begin to make changes in society and thereby also improve their position
Power over:	By this empowerment they get a voice on what issues get on the agenda
Power to:	They become empowered to stand up for themselves and make their own choices

She also emphasized the important role of NGOs in women’s empowerment. Part of the Harvard Gender Analysis Framework is subsequently used to assess how such women’s empowerment influences gender equity, as well as programme effectiveness:

1. Access:	Women and men have equal access to physical products and services (water and water supply devices, latrines, soap for hygiene) and new knowledge and skills
2. Decision-making and control:	Women and men have equal roles in decision-making and control over their implementation through their positions, participation and influence.
3. Benefits:	Women and men both benefit equitably from the programme: not only water, sanitation and hygiene, but also positions and jobs, professional training, salaries, and promotions

It is important to what extent access, decision-making, control and benefits are inclusive. In the WASH sector this relates especially to hygiene, which traditionally is the exclusive terrain for women and girls [8].

Following indicators are the preconditions of empowerment; having decision making power of one’s own and for others. Knowledge, education, skill facilitate, familial and social support make a person competent to contribute in decision-making.

- Access to information and resources to make informed decisions.
- Mobility- freedom of movement, safe and secured movement.
- Skills for economic and social participation.
- Increasing one’s positive self-image and overcoming stigma.
- Ability to bargain
- Strong level of confidence that is “I can”, etc [9].

The inequitable distribution of rights, resources and power- as well as repressive cultural traditions and norms – constrain the ability to take action [10]. These are important for the women and men in every region and not less so for those people who are experiencing the most severe impacts of water and sanitation in the northern part of Bangladesh.

3. OBJECTIVES

The objective of this paper is to report and analyse how and which effects of NRD WS project has been mainstreaming gender and strengthening women’s empowerment during project implementation. The project wishes to accounts for its gender approaches and results to the management. This is intended to further improvement on mainstreaming gender and gender equity for optimal health wellbeing at scale. The findings from the paper can be

relevant for policy makers, practitioners, donor agencies and multi-stakeholders, who also aim at enhancing gender equity in the WS sector in developing regions.

4. METHODOLOGY

The qualitative methods, and semi – structured questionnaire were used for data collection. The researcher collected information through field visits, knowledge sharing, note taking and purposive interviewing. A total number of 20 Focus Group Discussions (FGDs) were conducted with some of the beneficiary and project staff. Secondary data were also used in some cases. The triangulation has been accomplished to maintain the validity of data and also justified by different cross-sectional check.

5. FINDINGS: MAINSTREAMING GENDER APPROACHES FOR EQUALITY

5.1 Gender Guideline, Operational Strategy & Indicator Development

Gender mainstreaming is a cross-cutting strategy of NRD. The project has developed a 'gender guideline and operational strategy in 2013. This was formulated mainly for ensuring that men and women have equal access to project opportunities, which analysed the differences between women and men in WS-related roles and decision-making powers. In addition, the project contains specific indicators for measuring ultimate output i.e. at least 65% households have toilet located conveniently for use and affording sufficient privacy.

5.2 Disaggregated Data Collection Approaches

At the start of the WS intervention, project carried out a census and social mapping using prescribed structured and semi-structured questionnaires following the Participatory Rural

Appraisal (PRA) methods. In addition, the project has conducted a baseline, mid-line and end-line census studies, collecting sex-disaggregated data of children, adolescent boys and girls, males and females, and also divided into ultra-poor, poor and non-poor. The data was analysed in a disaggregated manner following the steps;

- ❖ Gender-specific Household (HH) characteristics: Composition, by sex, age, marital status, male and female education, HHs economic status (ultra-poor, poor, non-poor), disability by sex, age and class, disease patterns by sex, age and class.
- ❖ Water supply conditions and practices: Type of source used for different purposes, by class. Functionality and protection bacteriological risk, by class, arsenic tests, by class. Access to (un)safe tested wells (not by class). Types of use of risky wells, by class. Adequacy of private & public water sources, by season.
- ❖ Water management at home: Sex of primary water collector. (No) treatment of drinking water. Women's satisfaction and demand for improvement, by class. Willingness to pay and loan preferences.
- ❖ Sanitation: Reported use of latrine by sex, age and class. Sanitary and hygiene condition (including observation by class). Latrine ownership (single/ shared/ public) etc.

The gender-specified data collection and analysis made it possible to know the starting conditions, performance and evaluation of each group. It also allowed the project to adjust its interventions to the differences between the groups and reduce inequalities [11].

5.3 Women Friendly Staffing System

NRD WS project has given more preference to recruit female staff, in line with NRD's goal to empower women, and because women staff are needed to empower in the communities. The project constituted number of 18 (60%) of women and (12) 40% male employees. The project ensures that women and men have equal opportunities to receive any kind of training. Position-wise all staff also enjoyed the same weekend, leave arrangements and same salary and benefits. However, some female staff mentioned they were less recognised to their work than male staff. During pregnancy period female staff could enjoy six months maternity leave with organisational benefits but they become treated

as a less performer by their supervisor. Staff both male and female claimed that they are faced challenges gender approaches to meet the target of works; in that case, sooth equality and equity is being hindrance. It is important to emphasize that this is not unique to Bangladesh but a global phenomenon where women are seen as lower achievers because they have babies and balance the home with work. However there are proactive measures that can be taken to adjust for these historical biases through education, incentives, gender markers in managers' progress assessments etc.

5.4 Gender Training

Total numbers of 30 project personnel were received training on gender strategy and guideline along with gender sensitisation training. Training is designed based on the three different levels of participants; senior, mid and junior field officer. At first, a training team consisted of 3 members from each level position, and then formed for module development in Bengla. To mainstreaming the project, those training are conducted with the assistance of NRD gender expert. Gender need, role, norm and gender based violence regarding water and sanitation discussed using different methods like case study, role play, presentation, group work etc rectified to make gender sensitised.

5.5 Gender Balanced Committee Formation and Decision

The project has formed gender balanced 5 men and 5 women (50% women and 50% male) Water and Sanitation Committees (WSC) through bottom up approach with the help of Participatory Rural Appraisal (PRA) methods. In the processes, male and female adolescent girls and boys, representative from different vulnerable social groups, poor, ultra-poor, and institutions i.e. school, religious institution and social clubs were involved. They conducted a transect walk, and did wealth ranking and social mapping in their community. The tasks of WSC members were meet regularly on each monthly meeting with at least eight members of the committee; review conditions and progress on sanitation, hygiene and water safety, keep records, updates register, selects poor (est.) who may get first priority to receive the supports, and negotiate with local government, e.g. to obtain subsidies for the poor and ultra-poor. In the beginning, organising meeting together with men and women at community level were so tough,

as it is a cultural construction and women were not allowed to attend such type of sessions in front of male. So, the project staff were bound to hang a screen (*parda*) in between male and female member in some religiously rigid areas. This a common practices that some of the religious rigid area needs to hang the screen between men and women in rural Bangladesh [12]. The women participation were very low or sometime more but most of the cases women remained silent in any decision making. It was found that regarding latrine installation on convenient nearby location at household level, 26% women could influenced male member, and the tubewell installation only 14% respectively. In the coordination meeting, sometime women spoke more but male member did not consider what she says. It was a tradition that irruption and shouting - no matter whether the opinions were differing than men's.

5.6 Gender Based Cluster Meetings Conduction

To promote good sanitation and hygiene practices and give the participants the opportunity to exchange their views in social gatherings on how to improve their quality of life, the staff regularly organise gender sensitised cluster meetings at community level. Cluster meetings have taken especially for men, women, adolescent and children towards community mobilisation and hygiene education. During the household visits staff invites women from ten and other age groups from 50 households to their convenient place. Staff facilitates the meeting through different flipcharts where the participants actively interact regarding the problems and solutions around the hygienic behaviours, hand-washing, menstrual, privacy and dignity related issues. Motivational home visits by female WSC members help women who cannot attend to learn more about sanitation and hygiene and other project interventions.

5.7 Menstrual Hygiene Meeting for Adolescent Girl & Women

For adolescent girls, the staff organise special meetings on menstrual hygiene, including on how the girls can approach their mothers/parents to get access to sanitary napkins as well as how they can properly use. They arranged adolescent forum and women convention for breaking the silence on menstrual hygiene issues, as well as take the measure.

5.8 Theatre Demonstration

For a wider outreach of hygiene and sanitation messages, the project also joined with the Popular Theatre Groups. The performers of the groups were recruited locally for their performance abilities and their sensitiveness to indigenous heritage and the socio-economic context of the region. The theatre groups incorporate messages about basic hygiene into their scripts, with storylines ranging from a funny sketch to serious dialogue. The plays are staged in a courtyard in the evenings and draw 250-400 people, men, women and children, who are often deprived of such entertainment. The plays also provide a platform for contributory discussion. In each *Union* three plays have been staged. Besides, a folk group of the famous duo named 'Gambhira' performed. The duo is very popular in the North-western part of Bangladesh. They also incorporate messages about basic hygiene into their scripts and thus convey hygiene promotion messages to the community.

5.9 Gender Mainstreaming at Institution

NRD addressed gender mainstreaming at institutional level through school WS project. In the beginning of the NRD WS school sanitation project, a high demand was found for separate latrines, especially for girl students in secondary schools. Research in other projects also showed that many adolescent girls were reluctant to go to school during their menstrual period, as they had no access to menstrual hygiene facilities. When girls are educated, they become empowered to work towards their own development, have equal rights and access to resources, and play an influential role in reducing poverty and inequality [13]. Based on the practical and strategic gender needs, NRD WS decided to provide financial support for separate school latrines for girls, equipped with disposal facilities for menstrual hygiene in secondary school. There is evidence that these provisions are helping to break the absenteeism cycle. The project further helps each secondary school to form a student brigade. School brigades consist of 24 students, 12 boys and 12 girls, chosen from class six to nine who are equally responsible to ensure good operation and maintenance of the sanitation facilities. These learnings lead them to perform well also in their home and convey the messages to their peers and the community to some extent.

5.10 Integrated Monitoring System

The project has applied integrated monitoring systems for well-informed decision-making. This system combined feed to dynamic decision making [14]. This includes measuring the effectiveness of methodologies, tools and techniques to give and increase the voices of, and benefits to, men and women in the project areas, in particular in poor and ultra-poor households. Both quantitative and qualitative methods are used to measure if and to what extent the planned inputs, outputs and indicators of the project goals are being met. The collected data is triangulated for greater reliability, that is, the same performance indicators are measured with different methods and the results compared to see if they are internally consistent and further planning.

6. CONCLUSION

NRD WS Project has inspired hundreds of people in Bangladesh to install hygienic latrines, supporting poor and ultra-poor families, grants and motivation. However, lack of access to water, sanitation and hygiene affects mostly disadvantage groups - poor (est), women and girls disproportionately, this is because of economic, social, political, biological and cultural factors. NRD WS project mainstreaming gender approaches breaking this cycle to a large extent towards improving the situation of vulnerable groups to reduce inequalities. However, the poor, ultra-poor, disable are still unserved. The affordability and involvement in decision-making of vulnerable groups are still challenge which needs to be addressed, while these lessons could be applicable for other stakeholder who aims to same project in WS sector in Bangladesh and beyond.

CONSENT

This manuscript has not been published or submitted for publication elsewhere. Author has declared that consent was obtained for publication of this report.

COMPETING INTERESTS

Author has declared that no competing interests exist.

REFERENCES

1. UNICEF/WHO. 25 years progress on sanitation and drinking water - 2015

- update and MDG assessment. World Health Organization. UNICEF. 2015;4-56.
2. United Nations Committee on Economic, Social and Cultural Rights General comment no. 15. The right to water. The Office of the High Commissioner of Human Right. Art. 11 and 12 of the Covenant. 2012;1-18.
 3. John Ashe. Tackling water, sanitation energy nexus key to sustainable future. UN News, Centre. 2014;1-2. Available:<http://www.un.org/apps/news/story.asp?NewsID=47165#.V-taOPQbfIU> (Downloaded 02 March, 2014)
 4. NRD Gender Guideline & Operational Strategy. Research and development for water and sanitation. Dhaka. Bangladesh. 2013;4-5.
 5. ECOSOC. Gender mainstreaming: Coordination of the policies and activities of the specialized agencies and other bodies of The United Nations System. 2007;2-22.
 6. Kabeer, Naila. Reversed realities: Gender hierarchies in development thought. London and New York: Verso. 1994;18-22.
 7. Overholt, Catherine, Anderson, Mary B, Cloud, Kathleen, Austin, James E, (Eds.). Women in development: A framework for project analysis. In Catherine Overholt, Mary B. Anderson, Kathleen Cloud, & Austin, James E. (Eds.), Gender Roles in Development Projects: A Case Book East Hartford: Kumarian Press. 1984;3-16.
 8. Sijbesma C, Islam M. Achieving sanitation with equity at scale. Lessons from BRAC Water, Sanitation and Hygiene (WASH) Programme in Bangladesh. 2015;1-8. Available:<https://www.ircwash.org/resource/s/achieving-sanitation-equity-scale> (Downloaded 10 January, 2016)
 9. Joke M. Integrated water resource management workshop. Gender and Water Programme Bangladesh of Gender Water Alliance (GWA), The Netherlands, 1st Day Session. Dhaka, Bangladesh. 2015;3-24.
 10. Mahidul Islam. Gender, empowerment and drought: Different impacts on men and women in Barinda Tract Area in Bangladesh. 2016;5-11. Available:www.nrdbd.org
 11. NRD Water and Sanitation Project Update Report. North-Bengal Research Foundation and Development. Dhaka, Bangladesh. 2016;8-53. Available:www.nrdbd.org

12. Rumana Ali. Women's participation in water, sanitation and hygiene programme of BRAC at community level. Research and Evaluation Division (RED) of BRAC. 2009;22-34.
13. Buffett, Jennifer, Peter. A world where girls are safe, seen, and celebrated. Empowering adolescent girls in India. NoVo Foundation. Dasra. 2013;2-5. Available:www.dasra.org
14. Islam Mahidul. Integrated monitoring system of BRAC WASH programme. A Poster Presentation on Donor Dissemination Workshops, Dhaka, Bangladesh. 2014;1-2.

© 2018 M. Islam; This is an Open Access article distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/4.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Peer-review history:
The peer review history for this paper can be accessed here:
<http://www.sciencedomain.org/review-history/26195>