



Gender Equality Programming – Guidance Note: WASH¹

*Ensuring Gender Equality programming in
Water Supply, Sanitation and Hygiene
Promotion²*

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¹ This document draws heavily from the IASC Gender Handbook in Humanitarian Action, SPHERE (2011 edition) and the Gender Marker tip sheet for WASH. Some sections have been copied in their entirety.

² This is not exhaustive guidance on Gender Equality programming in WASH but the minimum level required.

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Preamble

The intent of this guidance note is to increase awareness among CARE's WASH practitioners of gender issues, ensuring emergency WASH programs are viewed with a gender lens. The content is not original, rather an amalgamation of various guidance and best practice, distilled here to provide a more concise reference tool for CARE's WASH staff to meet minimum WASH and gender equality standards.

Does consideration of gender equality matter in a humanitarian response?

In life and death situations isn't the question of gender equality a luxury? That's what many people think. But in reality, equality is neither a luxury nor a matter of giving privileges to women over men, or vice versa. Gender equality is about ensuring that the protection and assistance provided in emergencies is planned and implemented in a way that benefits women and men equally, taking into account an analysis of their needs as well as their capacities. CARE's mandate for Gender Equality Programming means that we need to adopt two strategies to achieve the same, namely gender mainstreaming and targeted action in response to a gender analysis.

Conflicts and natural disasters affect women, girls, boys and men differently; they face different risks and are victimised in different ways. Humanitarian actors should understand these differences and ensure that services and aid delivered assist all segments of the population and do not put some at risk. Beyond the obvious importance of meeting basic needs and preventing disease, access to adequate and appropriate WASH facilities plays an important role in the protection and dignity of displaced individuals, particularly girls, women and other vulnerable groups. Providing water and sanitation facilities alone will not guarantee their optimal use, nor will it necessarily improve public health. Only a gender-sensitive, participatory approach at all stages of a project can help ensure that an adequate and efficient service is provided.

In many cultures, the responsibility of collecting water and maintaining hygiene standards falls to women and girls and yet despite increasing gender awareness, all too often the perspectives and roles of women and other groups in WASH are ignored or undervalued due to perceived cultural sensitivities, whereas, in practice, cultural boundaries are flexible and appropriate interventions can take advantage of this. We must recognise this central role of women in managing water, sanitation and hygiene and ensure they have an equal voice in the emergency response.

To promote dignity water points and sanitary facilities must be designed to cater to the special needs of different vulnerable groups including women and children and properly located water and sanitation facilities will help to promote equal access while reducing the risk of violence.

By ensuring we position women, girls and other vulnerable groups at the centre of our emergency WASH response, we can help ensure facilities are used properly, and reduce the risk of disease, while also promoting dignity and reducing the risk of violence against women and girls. The involvement of vulnerable groups during an emergency is empowering and can help affected communities appreciate that everyone has a right, as equal human beings to participate in issues that affect their lives and those of their families and that women and other groups can and do make a significant contribution to water and sanitation services.

Key Principles

The human right to water and sanitation, was affirmed by the Human Rights Council, to be part of existing international law and under resolution **64/292 became legally binding upon all member States on 28th July 2010**³.

The Resolution calls upon States and international organisations to provide financial resources, capacity-building and technology transfer to help countries provide safe, clean, accessible and affordable drinking water and sanitation for all.

However, simply providing water and sanitation facilities will not by itself guarantee their optimal use or impact on public health. Understanding gender, culture and social relations is absolutely essential in assessing, designing and implementing an appropriate water, sanitation and hygiene programme that is effective and safe and restores the dignity of the affected population.

Women are disproportionately affected by emergencies, in part because of existing gender inequalities. It is important to involve all members of the community, particularly women and girls, at all stages of emergency management programs as they bring valuable perspectives, capabilities and contributions to the emergency response. Gender balance and active involvement of women and men in decision-making in the provision of safe and appropriate water, sanitation and hygiene programming is crucial to adapt to the specific needs and include the knowledge of the entire community.

Key Gender Concerns in emergency WASH programs

In an emergency program these are considered to be the key areas to focus on to ensure gender issues are appropriately addressed.

1. Assessments analyse and respond to gender roles and responsibilities and their differences between men and women, boys and girls
2. Targeted actions are based on gender analysis
3. Equitable access to water and sanitation facilities is ensured through inclusive participation and decision making
4. Dignity, privacy and safety for affected populations using water, sanitation and bathing facilities is achieved.
5. Monitoring and learning is based on sex-and age-disaggregated data and data is reported on and used to adapt programs.

³ <http://www.righttowater.info/international-timeline/#sep2010>

Standards

The following standards have been defined by CARE and should be used alongside national, cluster and Sphere standards. The indicators provide guidance to ensure the standards are being addressed and progress towards them measured.

Standard 1: The roles of men and women, specifically with regard to who has access and control of resources, and who makes decisions is assessed and analysed for appropriate preparedness planning and response

Key Indicators

1. WASH staff are trained on gender analysis and the importance of gender in water, sanitation and hygiene programming prior to conducting assessments. **Staff has undertaken the IASC Gender in Emergencies online Training Course.**
2. WASH Teams have a gender focal point to ensure a gender lens perspective in all WASH activities
3. A WASH assessment and gender analysis has been conducted as part of the EPP
4. Assessments teams are gender-balanced and reflect the diversity within the affected community.
5. The needs of men, women, girls and boys have been obtained separately at times and locations that facilitate the inclusion of all groups.
6. Data from women is collected by women.
7. Information has been gathered from women, girls, boys and men about cultural beliefs and practices in water and sanitation use, hygiene habits and materials, needs and roles in operation, maintenance and distribution methods, and time spent on water collection (see WASH related gender analysis).
8. Data is disaggregated by sex and age to develop a profile of at-risk populations with special water and sanitation requirements.

Guidance Notes:

1. *Data disaggregation:* Detailed disaggregation is rarely possible initially but is of critical importance to identify the different needs and rights of children and adults of all ages. At the earliest opportunity, further disaggregate by sex and age for children 0–5 male/female, 6–12 male/female and 13–17 male/female, and then in 10-year age brackets, e.g. 50–59, male/female; 60–69, male/female; 70–79, male/female; 80+, male/female. These groupings address age-related differences linked to a range of rights, social and cultural issues.

2. *Representative assessments:* Needs-based assessments cover all disaster-affected populations. Special efforts are needed to assess people in hard-to-reach locations, e.g. people who are not in camps, are in less accessible geographical areas or in host families. The same applies for people less easily accessed but often at risk, such as persons with disabilities, older people, housebound individuals, children and youths, who may be targeted as child soldiers or subjected to gender-based violence. Sources of primary information include direct observation, focus group discussions, surveys and discussions with as wide a range of people and groups as possible (e.g. local authorities, male and female community leaders, older men and women, health staff, teachers and other educational personnel, traders and other humanitarian agencies). Speaking openly may be difficult or dangerous for some people. Talk with children separately as they are unlikely to speak in front of adults and doing so may put the children at risk. In most cases, women and girls should be consulted in separate spaces. Aid workers engaged in the collection of systematic information from people who have been abused or violated should have the necessary skills and systems to do so safely and appropriately. In conflict areas, information could be misused and place people at further risk or compromise an agency's ability to operate. Only with an individual's consent may information about them be shared with other humanitarian agencies or relevant organisations (see Protection Principle 1 in Sphere on page 33). It will not be possible to immediately assess all those affected: excluded areas or groups should be clearly noted in the assessment report and returned to at the earliest opportunity.

Standard 2: The specific water and sanitation needs of vulnerable groups are considered in water and sanitation programs.

Key Indicators:

1. Women, the elderly, people with disabilities and other vulnerable groups such as ethnic minorities are represented on any **water and/or sanitation committees** (see Guidance Note 1 and 2)
2. Water and sanitation facilities are designed so that they can be **used by all** including women, children, elderly and people with disabilities (see Guidance Note 3).
3. There is **adequate space** for women to be able to clean, dry and dispose of sanitary materials with privacy and dignity
4. There is a mechanism for individuals or groups to raise concerns about the water and sanitation facilities (see also Common Standard 4).

Guidance Notes:

1. Participation and the ability to contribute to decision making process provide opportunities to empowerment women and other vulnerable groups, by improving agency (personal aspirations and capabilities), structure (environment that surrounds and conditions people's choices), and relations (power relations through which people negotiate their paths).
2. Women will likely need additional training to increase their confidence to participate meaningfully in committees.
3. It is important to be mindful that in some cultures, although women are the primary carers for both boys and girls, men tend to have great disciplinary and educational responsibility for boys. In this case, hygiene messaging and guidance should also be aimed at men as the primary teachers for boys.
4. Handpumps and wells may need to be designed to accommodate the needs of vulnerable groups, for example located at an appropriate height from the ground and without large steps to access the source. Some hand pumps and water carrying containers may need to be ergonomically designed and adapted for use by people living with HIV, elderly, people with disabilities and children. Where it is not possible to make all toilets acceptable to all groups, special toilets need to be constructed or provided for children, elderly and people with disabilities e.g. potties, toilets with smaller defecation holes and less enclosed for children, and toilets with larger internal dimensions for wheelchair users or the provision of seats and/or hand rails.
5. Include, at water distribution points and community laundry facilities, private washing cubicles and laundry areas for women to wash and dry undergarments and sanitary cloths

Standard 3: Water and sanitation programs provide affected populations with equitable access to water and sanitation facilities.

Key Indicators:

1. Responsible government authorities are identified and their role to ensure access to water and sanitation facilities is supported whenever possible.
2. Situations where community groups exercise discrimination over access to water and sanitation facilities are monitored and responded to
3. Programs involve representatives from different parts of the affected population, including women, in **monitoring water and sanitation inputs**.
4. Water and sanitation facilities are located in a **safe location** where all members of the community can **access and use** them in a manner that promotes protection as well as privacy
5. Adequate and safe water and sanitation facilities at **learning or meeting sites and health centres** are provided.

Guidance Notes:

1. Community management groups should be diverse and gender-balanced. Community ownership of water and sanitation facilities is preferred as it is likely to lead to better community maintenance and ownership/ contribution. However, water and sanitation projects that encourage community ownership must take into account the representation and needs of all members of the community.
2. Planning should be made for men-only and women-only activities where needed.
3. Even if a sufficient quantity of water is available to meet minimum needs according to total number of persons, additional measures may be needed to ensure that access is equitable for all groups. If water is being trucked, pumped or rationed, it is necessary to ensure that the water distribution time and duration are planned jointly with the community, according to women and men's convenience, cultural habits and limited to daylight hours. This necessarily includes consultation with the group that is responsible for water collection, which in most cases is women and girls.
4. Water and sanitation facilities should be available within or in close proximity to learning environments, meeting points and health facilities as these are utilised by large numbers, especially the most vulnerable.
5. Training and/or guidance on promote understanding of gender sensitive programming to support the role, and strengthen the capacity of local authorities and civil society with responsibilities in the WASH sector

Standard 4: Safety and dignity of the affected populations is a core consideration in water and sanitation programs.

Key Indicators:

1. The location of water points takes into consideration the safety of vulnerable groups, with good visibility of the surrounding area where possible
2. **Separate internally lockable toilets and cubicles for washing are provided for men and women,** They should be situated in **well-lit and visible areas**
3. Toilets and washing facilities are designed and sited with safety and ease of access as primary considerations
4. The community, and in particular women, children and vulnerable groups, have been **consulted on the design and location** of toilet and washing facilities and any safety and access concerns they may have are addressed.
5. Pit latrines and shallow wells have been constructed considering **child safety** in respect of the design and access to latrine and pit
6. Where disinfectant products are provided they are kept in a safe location, clearly labelled in the local language and in pictorial form as poisonous. The community knows what to do if they are ingested.

Guidance Notes:

1. Water points should be safe in respect of reducing the risk of physical and sexual attacks that can take place. In many instances this means increased visibility and proximity to housing and communal areas, but the exact location should be discussed with the intended users. As a guide no household should be more than 500 metres from a water point. Programs should also support community mechanisms for protection, such as gathering water in groups.
2. Where possible, it is more appropriate to provide family toilets in preference to communal facilities.
3. Inappropriate sites for toilets, washing facilities and water points may make women and children, especially girls, more vulnerable to attack, especially during the night, and ways must be found to ensure that women feel, and are, safe using the toilets and other WASH facilities provided. Where possible, communal toilets should be provided with lighting or families provided with torches, and they should be relatively close to dwellings. As a guide no household should be over 50 metres from a toilet and communities should be involved in designing systems that promote safe access.
4. The, location, design, safety, appropriateness and convenience of facilities should be decided in consultation with the users, particularly women, adolescent girls and any people with disabilities.
5. The choice of WASH technology does not cause additional burden on women and girls. (i.e. use of pour flush latrines requires the collection and transporting of water, which may increase the duties of women and girls to collect water, or increase queuing times at water points).
6. Children can fall into, and drown, in pit latrines and wells. There should be a proper cover for the pit latrine that cannot be moved by young children and doors that can be shut properly from the outside after use. Toilet seats dimensions should be appropriately sized for children. As some children may be wary of using latrines, the design should take this in account with either shared (two seat) latrines, smaller seats, colourful and larger windows. On occasions, latrines have been built with one adult and one child seat so adults can accompany children. Wells and water tanks

should always be covered when not in use. Children should also be made aware of the potential dangers of playing near water sources.

7. Agencies need to be aware that both members of the humanitarian aid community and the disaster-affected population may use resources, such as cash or materials associated with water, to sexually exploit women and children. A zero tolerance policy must be enforced for staff engaged in using their relative power over the shelter resources and allocation to obtain sexual or other favours. A monitoring system to identify and address sexually exploitation and abuse must be in place.

Standard 5: Data on WASH programs for affected populations is routinely collected, analysed and reported on to inform program direction.

Key Indicators

1. A monitoring plan is developed that includes the participation of the affected population including women and vulnerable groups
2. Sex, age and disability disaggregated baseline data is collected to measure impacts and changes
3. Monitoring systems track intended and unintended impacts of relief efforts for women, girls, boys, men and other vulnerable groups and program design is adapted where necessary
4. Compliance with CI Policy on Prevention of Sexual Exploitation and Abuse is monitored and mechanisms are available to identify and report abuse.

Guidance Notes:

1. *Monitoring:* Compares intentions with results. It measures progress against project objectives and indicators and its impact on vulnerability and the context. Monitoring information guides project revisions, verifies targeting criteria and whether aid is reaching the people intended. It enables decision-makers to respond to community feedback and identify emerging problems and trends. It is also an opportunity for agencies to provide, as well as gather, information. Monitoring carried out by the population itself further enhances transparency and the quality and people's ownership of the information. It is also a basis for assessing not only the project, but also the implementers, whether they have been inclusive, transparent, ethical in their approach, guidance and support to all those affected. In such cases, monitoring requires external evaluators to assess not only programmatic impacts of the project in an unbiased way.
2. Effective monitoring selects methods suited to the particular programme and context, combining qualitative and quantitative data as appropriate and maintaining consistent records. Openness and communication (transparency) about monitoring information increases accountability to the affected population. Clarity about the intended use and users of the data should determine what is collected and how it is presented. Data should be presented in a brief accessible format that facilitates sharing and decision-making.
3. *Impact:* The affected people are the best judges of changes in their lives; hence outcome and impact assessment must include people's feedback, open-ended listening and other participatory qualitative approaches, as well as quantitative approaches.
4. *Maintaining relevance:* Monitoring should periodically check whether the programme continues to be relevant to the affected populations. Findings should lead to revisions to the programme as appropriate.

WASH Related Gender Analysis.

What are the population demographics?

- Total number of households — disaggregated by sex and age.
- Number of single female- and male-headed families and number of families headed by children (girls and boys).
- Number of unaccompanied children, elderly and disabled. How many women and men affected or displaced?

What water and sanitation practices were the population accustomed to before the emergency?

- What are the levels of knowledge and skills in water/sanitation and their relationship to health (women, girls, boys and men)?
- What are the patterns of water access, water source control and collection?
- What is the relationship between water collection responsibilities and school attendance?
- What are the different uses and responsibilities for water by women, girls, boys and men (e.g. cooking, sanitation, gardens, livestock); patterns of water allocation among family members (sharing, quantity, quality); decision-making on uses?
- What is the gender division of responsibilities for maintenance and management of water and sanitation facilities?
- What are the usual means and responsibility for managing excreta and urine disposal; anal cleansing; disposal of children's faeces?
- What are the usual means and responsibility for collecting, handling, storing and treating water; means and access for water transportation?
- How are the special needs groups within the community who may require specific support in water, sanitation and hygiene, such as people living with HIV/AIDS, identified?
- What is the representation and role of women in community-based associations, water committees, etc.? Do women, for example, have access to treasury?
- How were the responsibilities for maintenance and management of water and sanitation facilities divided between women and men in the community?

What are the cultural aspects to look for?

- Are water points, toilets and bathing facilities located and designed to ensure privacy and security?
 - Are water points safe? Can users (especially women and children) access them safely during the day and at night? In some cultures women are not allowed to leave the house during daylight. Therefore alternative provisions should be considered that go above and beyond those stated within SPHERE to comply with social and cultural standards.
 - What types of sanitary materials are appropriate to distribute to women and girls?
 - What are the cultural assumptions with regard to water and sanitation activities, for example during menstruation, etc.?
 - What are the hygiene practices and general health of the population? If women are responsible for the hygiene status of themselves and their families, what level of knowledge and skills do they have?
 - How do women perceive themselves in traditional roles and active participation? How much of this can be changed and how much cannot be changed?
-
- Have culturally acceptable forms of communication for sharing information for men and women (together, separately etc.) in the society been considered and adopted.

What needs to be considered before constructing water and sanitation facilities?

- Who maintains toilets/water points? Who pays the costs associated with maintenance? Are they able and willing to pay beyond the scope of the project? Are tools and parts for maintenance available in the locality?
- Does the community need training for operation and maintenance, including management?
- Do facilities need to be modified for use by women, children, the elderly and the disabled, or do alternative means need to be provided, such as chamber pots or child-friendly toilets?
- Will promotional activities be needed to ensure safe use of toilets and water facilities?
- Are the physical designs for water points and toilets appropriate to water source, number and needs of users (women, girls, boys and men)?

Gender Tips.

1. Refrain from assumptions; women often have to undertake physically demanding work in the home, and are very skilled.
2. Women can play a key role in technical design, especially when they will be the principle users of the structure or system.
3. A new system does not always mean a good system. It may alleviate one problem, only to create another.
4. Inclusion promotes ownership and maintenance.
5. Focus group discussions at old point of use and new point of use, on site demonstrations, drawings, and models can generate ideas and develop more user-friendly systems. Watching how people use systems can highlight difficulties of use.
6. Discuss use of current structures and their pros and cons during different seasons or times of the day/night to determine problems and incorporate solutions into new designs (distance, lighting, privacy).
7. Promote the multiplier effect through using a focal point to distribute or collect information; especially useful for children who are shy to speak up about issues in front of peers.
8. Pilot training sessions first demonstrating use, maintenance or construction of a system then offering training to interested individuals.
9. Sustainability of a system will be determined by affordability and use of easily accessible materials
10. Photographic step by step guidance manuals will ensure that all members can utilize a service or structure, i.e. illiterate and non-technical persons.
11. If systems are in disrepair or disuse, discuss reasons for this to prevent the same outcomes permeating with new structures.

Gender mainstreaming and monitoring impact

Conducting a gender sensitive needs assessment during the preliminary phase of a project will ultimately shape the program itself and any subsequent infrastructural designs. The impact can then be simply accounted for in a quantitative manner during each stage of a program.

By identifying the underlying problems, (as shown in the table below) through focus group discussions, visual inspections, individual questionnaires and meetings with all the respective groups, this can highlight measures needed to rectify problems encountered by girls, boys, women and men. This can be used as a reflective tool to establish gender sensitive indicators and monitoring mechanisms.

It can also serve to assist in maintaining institutional knowledge, so as to learn from past projects, personnel and experiences, and act as a good practice guide to continue the promotion of gender sensitive programs, projects and designs.

Lessons Learned

Below are some examples of global lessons learned from past WASH projects:

Problem	Reason	Solution	Outcome
Smelly toilets	Connected to septic tank. Households putting chemical disinfectant into toilet preventing microbial anaerobic action	Training on use of septic tanks, installing vent pipe	% of women knowledgeable in good sanitation management
Unused sanitary blocks	Doors facing Mecca	Change orientation of doors	% women have more access to latrines
Toilets have standing water inside	After cleaning, water does not drain away	Design incline in floor and outlet for drain	Safer environmental hygiene with % women and men using sanitation
Unused sanitary blocks	Proximity of m/f, b/g toilets too close, lack of privacy	Alternate location of toilets after consultation with women / girls	X girls/women using toilets
Teenage girls show high incidence of non-attendance or drop out from school	No receptacles for menstrual materials	Sanitary bin in toilets	% reduction in girls drop out
Unclean or unused toilets	People's disgust to touch toilet lid or sit near it	Make pulley system to prevent touching of lids. Discuss positioning of lid in focus group discussions	% increase in women/girls using the toilets

Unused toilet	Boys/girls afraid of dark toilet or "adult size" toilet bowl too large	Lighting in toilets or window, smaller toilet bowl	% increase in boys / girls using the toilets
Elderly, sick or infirm not using toilet	Too difficult to squat	Raise squatting plate and/or install grab bar	% increase in elderly women and men using the toilets
Filling/tap point not used	Too hard to open/close	Reduce pressure	% more women and girls now able to use filling point
Frequent trips to filling point/tap	Buckets too large to fit under tap only filling half way	Increase height of tap	% time/visits reduced to enable women to have more time for other activities
Young children don't wash their hands	Can't reach wash basin	Put in step at base of basin	% increase in boys and girls hand-washing before eating/after using latrine
No soap at hand-washing basin in schools	Soap regularly "goes missing"	Install soap on a rope design	% increase in boys & girls washing hands with soap

Gender Indicators to use in Proposals

Indicators Definition

An indicator is a pointer. It summarizes information in a single piece of data, in such a way as to give an indication of change. It can be a measurement, a number, a fact, an opinion or a perception that points to a specific condition or situation, and measures changes in that condition or situation over time.

In other words, indicators provide a close look at the results of initiatives and actions. For this reason, they are front-line instruments in monitoring and evaluating development work.

Indicators measure levels of performance and can be described in terms of:

- the desired quality to be reached;
- the quantity of something to be achieved;
- the target group that is affected by or benefits from the program or project; and
- the time-frame envisaged for the achievement of the objectives.

Gender-sensitive indicators are indicators that are disaggregated by sex and measure an issue relating to gender equality. Gender-sensitive indicators are designed to demonstrate the changes in relations between women and men in a given society over a period of time. The usefulness of gender-sensitive indicators lies in their ability to point to changes in the status and roles of women and men over time.

Gender-sensitive indicators are a tool to assess the progress of a particular development intervention towards achieving gender equality. Sex-disaggregated data indicates whether, for example, both rural women and men are included in a program or project as agents/project staff, and as beneficiaries at all levels. The approach allows for effective monitoring and evaluation. As the use of indicators and other relevant evaluation techniques will lead to a better understanding of how results can be achieved, using gender-sensitive indicators will also feed into more effective future planning and program delivery.

Criteria for Selection of Indicators

The following criteria should be considered when selecting indicators:

- Indicators should be developed in a participatory fashion, with the involvement of all stakeholders wherever possible.
- Indicators must be relevant to the needs of the user and at a level that the user can understand.
- All indicators should be sex-disaggregated.
- Both qualitative and quantitative indicators should be used.

- Indicators should be easy to use and understand.
- Indicators must be clearly defined.
- The number of indicators chosen should be small. A rule of thumb is that up to six indicators can be chosen for each category (input-outcome).
- Indicators should be technically sound.
- Indicators should measure trends over time.
- The ultimate focus should be on outcome indicators.

Types of Indicators

There are various types of indicators.

Input Indicators

Input indicators are sometimes called resource indicators because they relate to the resources devoted to a project or program. For example, funds for human and non-human resources, infrastructure, institution building and other means by which a program or project is put into effect. Input indicators play an important role in flagging potential problems and identifying their causes. Input indicators alone, however, will not reveal whether or not the project or program will be a success.

In a project, input indicators might also include credit disbursed, materials purchased or adapted, or community views as to the feasibility of the project.

Example Input Indicators

- #'s of technical personnel, by sex.
- Amount of funding.
- % of m/f satisfied with access/operation of water supply at the start of the project
- % of m/f satisfied with access/operation of sanitation at the start of the project

Process Indicators

Process indicators refer to what is done with the inputs during the delivery process, i.e. the succession of tasks or activities in carrying out a project. These indicators, which are the main focus during monitoring, serve primarily to gauge or track progress towards the intended results. For example, in an education project, process indicators include the views of the community on facilities being built, number of facilities in operating condition, enrolment rates of girls and boys or amounts of stipend disbursed.

Example Process Indicators

- % of women consulted during the assessment phase
- % of women consulted during the design phase
- % of girls/boys consulted during design phase (if installing in schools especially)
- % of beneficiaries who use and maintain the constructed toilets, by sex.
- % of men and women trained and assessed in xxx
- %/# of women involved in supervisory, construction, data collection, maintenance and operation of activities.
- Representation of women on water management committees.
- Participation of all stakeholders in project identification and design meetings (attendance and level of participation/contribution by sex, age and socio-economic background).
- Degree of women's and men's inputs into project activities, in terms of labour, tools, money, etc.
- Level of participation as perceived by stakeholders through the different stages of the project cycle (by sex, age and socio-economic background).
- Degree of participation of an adequate number of women in important decision-making processes (adequacy to be mutually agreed by all stakeholders), to be measured through stakeholder responses and by qualitative analysis of the impact of different decisions.

Output Indicators

Output indicators are often used in project evaluations. This is because output indicators measure intermediate results concerning products and services that are delivered when a program or project is completed. For example, in an education project, output indicators might include (a) the number of people trained, by sex, (b) opinions of teachers on facilities provided or (c) number of facilities in operating condition.

Example Output Indicators

- Facilities completed.
- Continuing levels of women's participation in local organisations.
- % of m/f satisfied with access/operation of water supply/sanitation at the end of the project
- % of household income spent on water reduced by %
- % increase in water supply for domestic/hygiene purposes
- % time decreased for women fetching/waiting for water
- % increase in knowledge among m/f of health and hygiene effects of using clean water
- % increase in knowledge of f/m in illnesses associated with poor water quality
- Benefits (e.g. increased employment and crop yields) going to women and men, by socio-economic background and age.

Outcome Indicators

Outcome indicators illustrate the effectiveness of a project. They relate directly to the long-term results of the project as judged by the measurable change achieved in improving the quality of life of beneficiaries. They are also known as 'impact' indicators. Examples of outcome indicators in an education project are (a) views of development partners on the benefits of schooling, (b) number of girls and boys employed from project schools, (c) types

of employment gained, and (d) impact of employment on women's empowerment.

Example Outcome Indicators

- Improved health of community members, by sex and age.
- Increased leisure time for women.
- Men's and women's satisfaction with facility design;
- High levels of community support for the facilities due to equitable % of paid and unpaid roles filled by beneficiary men/women/adolescent girls/adolescent boys;
- Increased water awareness demonstrated by % recall by girls/boys/men/women of age and sex-appropriate key water messages;
- Increase in the number of women and men actively engaged in water facility management and facility care.

Gender Action Plan

Component	Example Actions	Planned actions to respond to different needs and priorities of women, girls, men, boys	Responsibility	Timeline	Progress
Gender balanced team	Recruit a balanced number of women and men, and that diversity within the affected community is reflected in staff composition. Train staff on the importance of gender in water, sanitation and hygiene programming and complete the IASC gender training				
Need Assessment	Assessment teams are gender balanced and include female translators. WASH related gender analysis has been included in the assessment tool.				
Design and planning	Conduct focus groups with women, girls, boys and men to determine the appropriateness of program design.				
Participation in decision making	Identify a focal persons (e.g. school teacher, NGO representative, female or male translator as appropriate) who could coordinate consultations with women, girls, boys and men directly affected. Provide “coaching” advice to the technical team and other staff on how to work with the community and make effective use of women’s knowledge of the community. Recruit female engineers where possible.				
Equal access and participation in program services and benefits	Set up separate women’s and men’s groups, to counter exclusion and prejudice related to water, sanitation and hygiene practices.				

Prevention and response to Gender Based Violence	Both women and men participate in the identification of safe and accessible sites for water pumps and sanitation facilities. Facilities and collection points are monitored to ensure they are safe and accessible (locks, lighting).				
Gendered monitoring, evaluation and accountability	WASH staff utilise hygiene promoters that represent different parts of the community in the monitoring of water, sanitation and hygiene activities and impacts.				
Coordination with other actors	Liaise with other sectors on gender issues. Raise gender issues and gender sensitive programming with the cluster/coordination platform.				
Internal gender capacity (agency and partner/s)	Ensure Gender focal point is aware of the WASH programs gender sensitive activities				
Prevention of Sexual Exploitation and Abuse	CI Policy on Prevention of Sexual Exploitation and Abuse are routinely monitored.				

Resources available by the CO to implement this plan:

External Resources required by the CO (list them, along with which external individual/agency/unit from whom additional support is required):

Useful Links

<http://www.irc.nl/page/118>

<http://www.wsscc.org/topics/crosscutting-themes/gender-and-wash>

<http://www.genderandwater.org/page/7316>

<http://www.unwater.org/>

<http://onerresponse.info/crosscutting/gender/Pages/Gender.aspx>

http://esa.un.org/iys/docs/san_lib_docs/Mainstreaming%20Gender.pdf

www.undp.org/oslocentre/docs09/undp_guide_english.pdf

E-course of IASC on gender in humanitarian programming: <http://www.iasc-elearning.org/home/>