

Equity and inclusion in WASH provision

- using the social model of exclusion

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Contents

Introduction – why use the social model of exclusion?

Section 1. Social model of exclusion – with specific reference to WASH

Section 2. Barrier analysis: using the social model to analyse barriers to access and exclusion

Section 3. Problem solving – identifying solutions to address barriers

Introduction: Why use the Social Model of Exclusion?

- **Human rights:** Access to drinking water, sanitation and hygiene is a human right (1)
- **Inequitable access:** discrimination, marginalisation, lack of power and influence
- Different groups and individuals marginalised in different contexts
- Analysis needed
 - who is marginalised
 - what is preventing access
 - problem-solving to develop solutions
- **The Social Model** provides a practical tool to help with this analysis and to ensure the right to WASH.



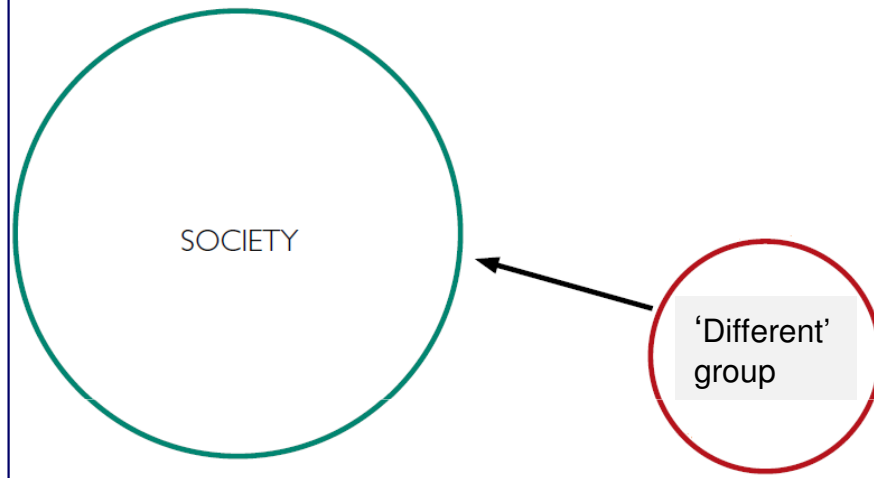
Section 1

SOCIAL/ INDIVIDUAL MODEL OF EXCLUSION

with specific reference to water, sanitation and hygiene

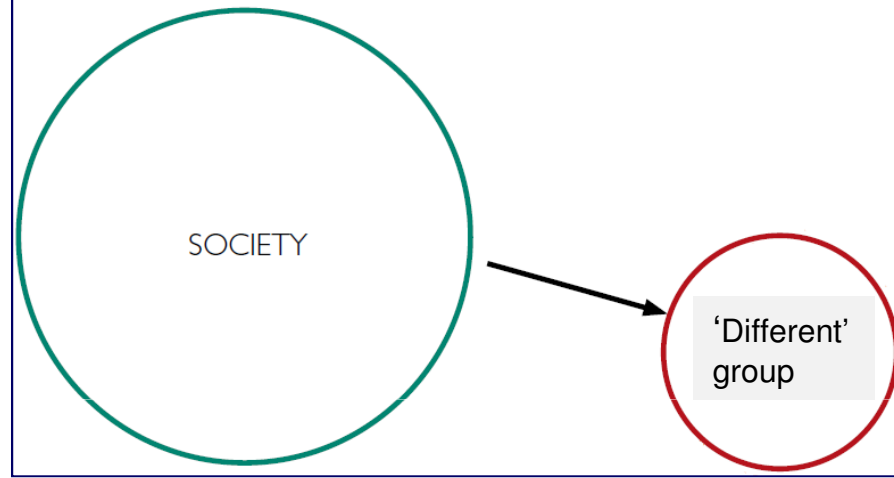
Individual models of exclusion

INDIVIDUAL MODELS:
MEDICAL APPROACH



- Segregates people perceived as 'different' from mainstream society
- Activities focus on 'fixing' - curing/ rehabilitating/ normalising - the person or group seen as 'different' before they can join 'normal' society

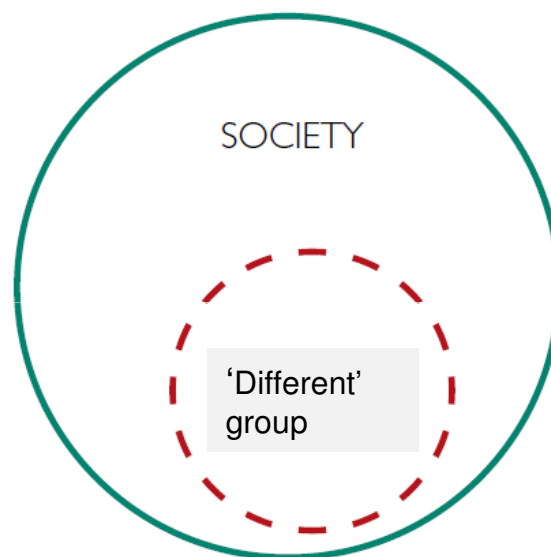
INDIVIDUAL MODELS:
CHARITY APPROACH



- Person or group seen as 'different' are seen as helpless, unfortunate, dependent, suffering
- Seen as needing pity and charity
- Activities focus on 'helping' the person who is a helpless recipient and outside 'normal' society

Social Model of Exclusion/Inclusion

INCLUSIVE APPROACH



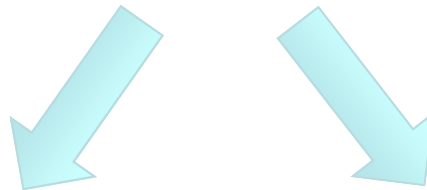
Source (2)

- Difference is a normal part of every society
- The needs and rights of 'different' groups are the same as those of all people – to love, be part of a family, to education, participation, employment, ...
- Activities focus on **identifying and removing barriers that prevent inclusion** – including physical environmental, social/attitudinal, and institutional/ organisational

Individual model



Chimunya is a schoolgirl of 17 who dreads using the school toilets because they are inadequate and dirty



Barriers: *(focus on the individual)*

- Girls need to use toilet more often than boys at school
- Adolescent girls experience menstrual bleeding for several days each month
- Girls believe menstruation is taboo
- Girls are embarrassed if boys see them going to the toilet

Solutions?

- She avoids eating and drinking at school so she doesn't need to go to the toilet
- She stays at home when she has her periods
- She only goes to the toilet with her friends to be protected against teasing from boys

Social model



Barriers: *(in surrounding environment & society)*

- There are too few girls' toilets at school;
- They are very unhygienic and unpleasant to use;
- She has nowhere to change her sanitary pad or cloth, or wash her clothes if they become stained
- There is no privacy in the toilet, and boys tease girls when they use them

Solutions?

- More toilets, better maintenance
- Separate boys' and girls' toilets, designed for privacy
- Consult girls to find secure location
- Provide water and disposal for menstrual hygiene management
- Education on menstrual hygiene for boys & girls

Individual model



Papa Moses is 75 and has been blind for 10 years. He has problems using the family latrine independently.



Barriers: (problems focusing on the individual)

- Bumps into things because he can't see,
- Needs someone to guide him, so he is a burden on his family
- Uses hands to feel where he is going, so he touches dirty things, so he is often sick
- Can't use toilet properly so often soils toilet and clothes

Solutions?

- He needs an eye operation
- He needs medicine every time he is sick
- He needs a carer to guide him, look after him, wash his clothes, etc.

Social model



Barriers: (problems in the surrounding environment & society)

- Obstacles around the house and compound prevent him finding his way easily;
- Family toilet has nothing to guide him to squat hole, so uses hands to feel the right place;
- Nothing to guide the feet to squat so he often misses hole and soils toilet;
- Family don't have good hygiene information
- Family pity him but feel he is a burden

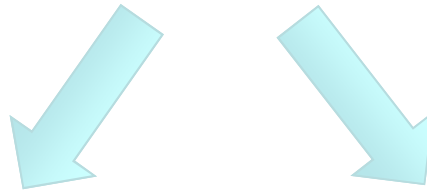
Solutions?

- Install rail to guide him to toilet location unaided
- Squat slab with footplates for accurate squatting;
- Encourage family to keep compound tidy so fewer obstacles to bump into
- Provide hygiene information about handwashing

Individual model



Linda is 25, her legs are paralysed, so she has to crawl or use a wheelchair



Barriers: (focusing on the individual)

- Can't use toilet properly, so she makes it dirty for other people, so better not to let her use toilet
- She often soils her clothes, so smells bad
- Her hands always dirty, so she's often sick
- She is a burden on her family because of the extra laundry and having to collect more water

Solutions?

- Needs an operation on her legs
- Needs medicine when she is sick
- She would be better in a special centre where specialists know how to help her

Social model




Barriers: (in surrounding environment & society)

- Narrow toilet entrance with a step, so she has to crawl into the toilet
- No door so no privacy in the toilet
- Painful to squat, no seat, so sits on the slab
- No support rail, so puts hands on dirty floor for support
- No water in toilet – no way to manage menstruation hygienically

Solutions?

- Change the step into a ramp, widen the entrance, add a toilet door (or at least a curtain)
- Install a toilet seat so she does not need to squat
- Provide a water container for personal hygiene





Now take a break and practice identifying the difference between individual barriers and barriers in the environment.

Activity Sheet 1: Using the Social Model to identify individual and environmental barriers



Section 2

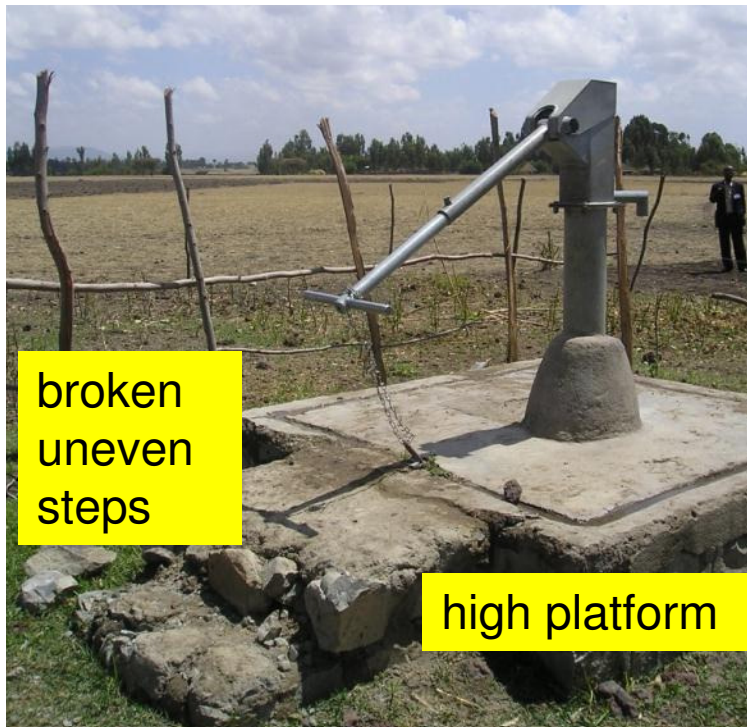
BARRIER ANALYSIS:

Using the social model to analyse barriers to access and exclusion

How can we use the social model to analyse barriers to access and use in the WASH sector?

- What barriers or obstacles can you identify that would create difficulties for these vulnerable and excluded groups?





broken
uneven
steps

high platform



steep
muddy
slopes



contaminated
unprotected
sources

no platform



path
leads
through
trees and
bushes

uneven
slippery paths

long
distance
to water
sources



handpumps
exhausting
to operate

danger of
falling into
well



no lifting
mechanism

muddy
ground

high well
wall



Photo: Handicap
International Sri Lanka



no door
- lack of
privacy

very wide
drop hole

high platform
with no step



girls' & boys'
school toilets
close together –
lack of privacy

no menstrual hygiene
management (MHM)
facilities



impossible
to keep
clean

no door

unstable
hole liable
to collapse



dark
inside

narrow
door

lack of
space
inside



nothing to
hold onto
when
stepping up

door hard
to close
from inside

high steps



nothing to
hold onto

steps

slippery
tiled floor

*Photo: Handicap
International Sri Lanka*



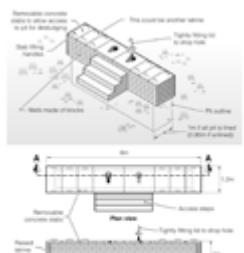


decision-making dominated by men

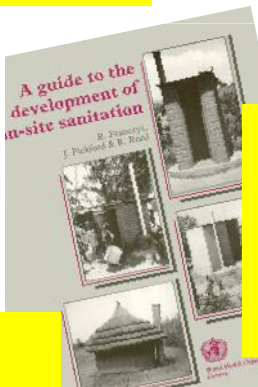
women's views ignored



lack of knowledge & skills of technicians about accessibility, safety or MHM



standard designs do not consider accessibility



lack of information about accessibility options and MHM requirements

gender based violence is common



plans do not address security and privacy for women

policies, procedures do not take account of excluded groups

taboos and ignorance about menstruation

poorer, lower caste, women, disabled people, not consulted

A range of barriers are identified

girls' & boys' school toilets close together – lack of privacy

no door – lack of privacy

broken uneven steps

women's views ignored

steep muddy slopes

contaminated unprotected sources

very wide drop hole

trees and bushes

taboos and ignorance about menstruation

decision-making dominated by men

handpumps exhausting to operate

unstable hole liable to collapse

high platform with no step

no MHM facilities

gender based violence is common

unsafe locations for women

dark inside

uneven slippery paths

narrow door

latrine impossible to clean

standard designs do not consider accessibility

lack of information about accessibility options & MHM requirements

long distance to facilities

danger of falling into well

high well wall

door hard to close from inside

nothing to hold onto

slippery tiled floor

no platform

high steps

lack of space inside

nothing to hold onto when stepping up

lack of knowledge and skills of technicians about accessibility, safety or MHM

plans do not address security and privacy for women

policies & procedures do not take account of excluded groups

no lifting mechanism

muddy ground

poorer, lower caste, women, disabled people not consulted

A range of barriers are identified

girls' & boys' school toilets close together – lack of privacy

no door – lack of privacy

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Barriers to inclusion

<i>Physical - natural</i>	
<i>Physical - infrastructure</i>	
<i>Policy/ Institutional</i>	
<i>Social/ cultural attitudinal</i>	

Barriers to inclusion

<i>Physical - natural</i>	trees and bushes	long distances to facilities	uneven slippery paths	contaminated unprotected sources	steep muddy slopes
<i>Physical - infrastructure</i>					
<i>Policy/ Institutional</i>					
<i>Social/ cultural attitudinal</i>					

Barriers to inclusion

Physical - natural	trees and bushes	long distances to facilities	uneven slippery paths	contaminated unprotected sources	steep muddy slopes	
Physical - infrastructure	broken uneven steps	unsafe location for women	slippery floor high well wall	dark interiors door hard to close from inside no door lack of privacy	lack of space inside no lifting mechanism unstable hole liable to collapse	high platform with no step very wide drop hole narrow door handpumps exhausting to operate
Policy/ Institutional						
Social/ cultural attitudinal						

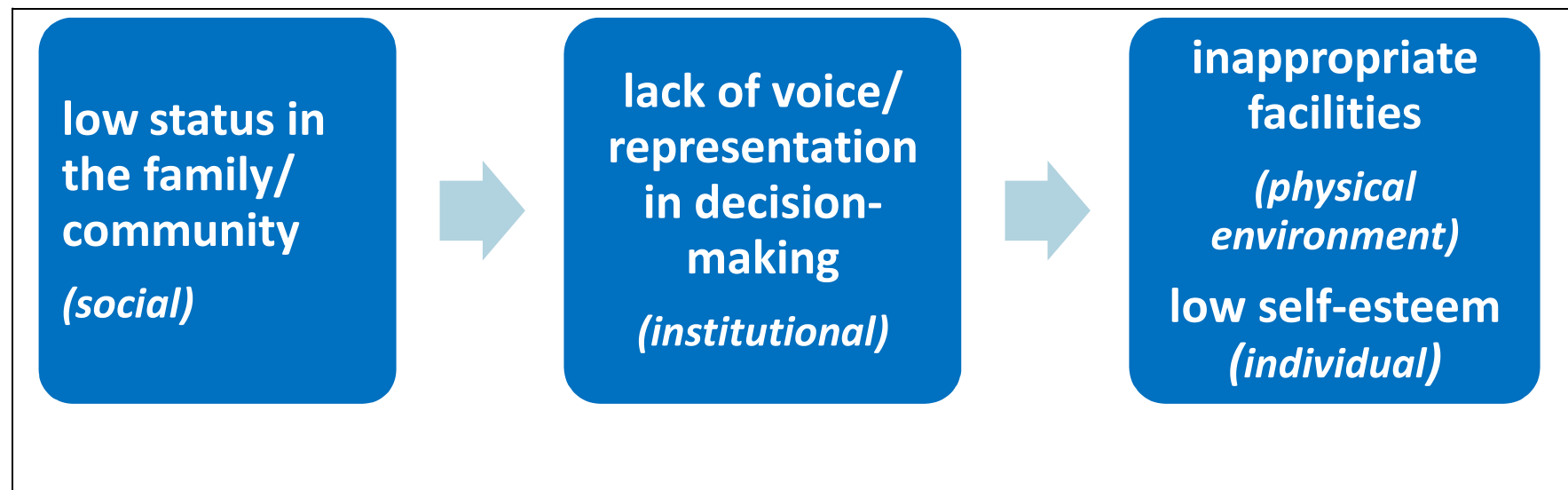
Barriers to inclusion

Physical - natural	trees and bushes	long distances to facilities	uneven slippery paths	contaminated unprotected sources	steep muddy slopes	
Physical - infrastructure	broken uneven steps	unsafe location for women	slippery floor	dark interiors	lack of space inside	high platform with no step
	no platform	high steps	high well wall	door hard to close from inside	no lifting mechanism	very wide drop hole
	girls' & boys' toilets close together – lack of privacy	danger of falling into well	no MHM facilities latrine difficult to clean	no door lack of privacy	unstable hole liable to collapse	narrow door
Policy/ Institutional	standard designs do not include accessibility or MHM		policies & procedures do not take account of excluded groups		poorer, lower caste, women, disabled people excluded from consultation	
	lack of info on accessibility options & MHM requirements		no planning to address security and privacy for women		lack of knowledge and skills of technicians about accessibility, safety or MHM	
Social/ cultural attitudinal						

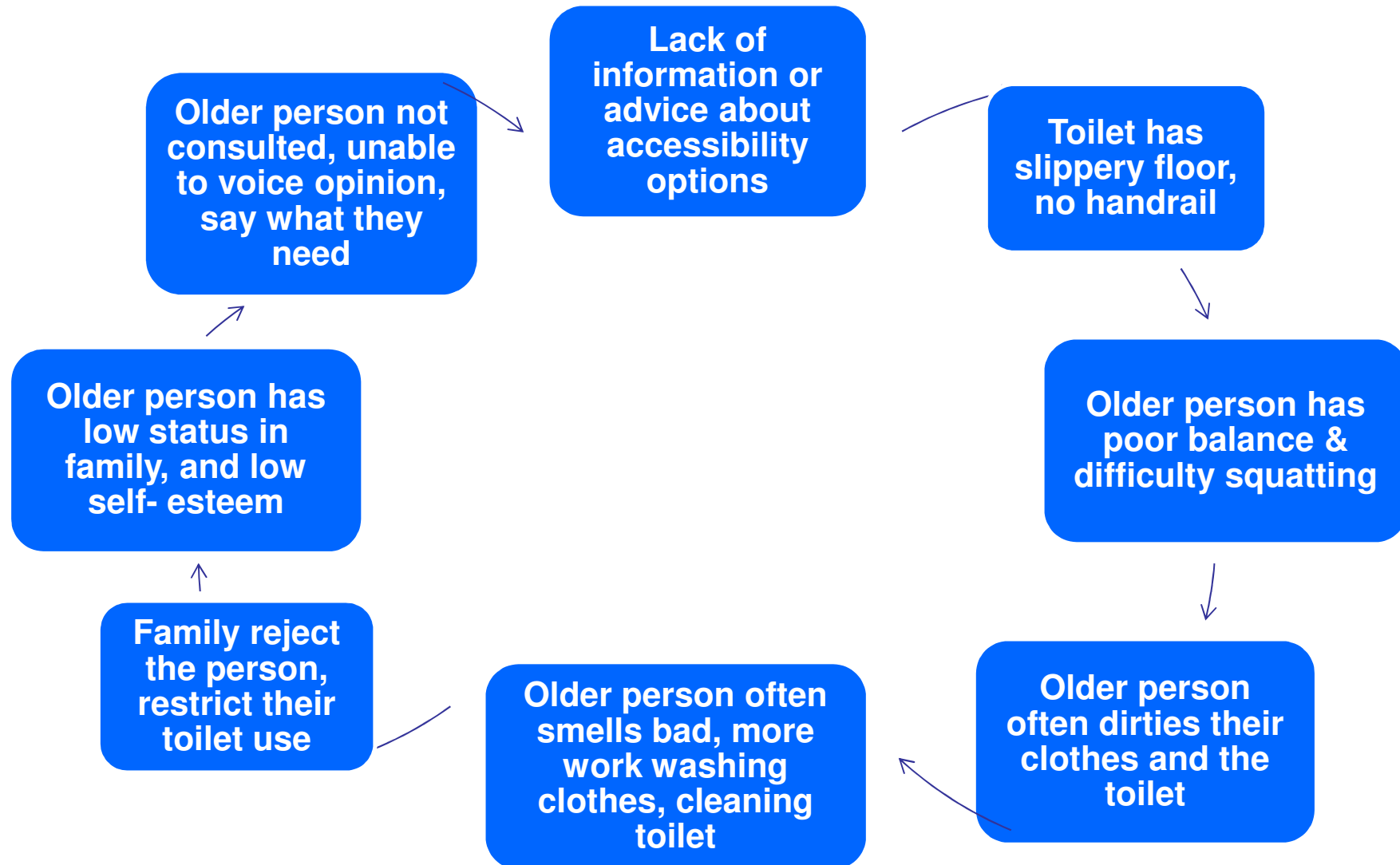
Barriers to inclusion

Physical - natural	trees and bushes	long distances to facilities	uneven slippery paths	contaminated unprotected sources	steep muddy slopes
Physical - infrastructure	broken uneven steps	unsafe location for women	slippery floor high well wall	dark interiors door hard to close from inside no door lack of privacy	lack of space inside no lifting mechanism unstable hole liable to collapse handpumps exhausting to operate
Policy/ Institutional	no platform girls' & boys' toilets close together – lack of privacy	high steps danger of falling into well	no MHM facilities latrine difficult to clean	poorer, lower caste, women, disabled people excluded from consultation	high platform with no step very wide drop hole narrow door
Social/ cultural attitudinal	standard designs do not include accessibility or MHM	lack of info on accessibility options & MHM requirements	no planning to address security and privacy for women	gender based violence is common	lack of knowledge and skills of technicians about accessibility, safety or MHM

Figure 1. Barriers are often interrelated



Vicious cycle of barriers



Activity Sheet 2: Identifying barriers to water, sanitation and hygiene

Now take a break and practice barrier analysis for yourself.



Section 3

PROBLEM SOLVING –

identifying solutions to address barriers

Identifying solutions

	Barriers	Solutions
Environment - natural	<ul style="list-style-type: none"> • long distances to facilities • uneven slippery paths, steep slopes, trees and bushes 	
Environment - infrastructure	<ul style="list-style-type: none"> • high steps, no steps, narrow doors • handpumps exhausting to operate • lack of privacy and security, no MHM facilities • lack of space in cubicles • slippery floors, nothing to hold onto 	
Policy/ Institutional	<ul style="list-style-type: none"> • standard designs don't include accessibility or MHM • marginalised groups excluded from consultation • lack of knowledge & skills on accessibility, safety & MHM • policies & procedures do not consider excluded groups • no planning to address security and privacy for women • hygiene education inaccessible 	
Social/ cultural/ attitudinal	<ul style="list-style-type: none"> • decision-making male-dominated • traditional beliefs about disability, gender, caste, HIV, • stigma, prejudice, shame, • taboos & ignorance about menstruation • gender based violence is common... 	
Individual	<ul style="list-style-type: none"> • poor eyesight • difficulty walking, weak, stiff, easily tired • monthly menstrual bleeding 	

Identifying solutions

	Barriers	Solutions
<i>Environment - natural</i>	<ul style="list-style-type: none"> • long distances to facilities, • uneven slippery paths, steep slopes, trees and bushes 	<ul style="list-style-type: none"> • Install facilities closer to users • make paths smooth and non-slip, clear bushes for line of sight
<i>Environment - infrastructure</i>	<ul style="list-style-type: none"> • high steps, no steps, narrow doors • handpumps exhausting to operate • lack of privacy and security • no MHM facilities; • lack of space in cubicles, • slippery floors, • nothing to hold onto, 	
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<i>Policy/ Institutional</i>	<ul style="list-style-type: none"> • standard designs don't include accessibility or MHM • marginalised groups excluded from consultation; • lack of information, knowledge & skills on accessibility & MHM • policies & procedures do not consider excluded groups; • no planning to address security and privacy for women • hygiene education inaccessible 	

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Identifying solutions

	Barriers	Solutions
<i>Social/ cultural/ attitudinal</i>	<ul style="list-style-type: none"> • decision-making male-dominated • traditional beliefs about disability, gender, caste, HIV, • stigma, prejudice, shame, • taboos & ignorance about menstruation • gender based violence is common 	<ul style="list-style-type: none"> • provide opportunities for women to voice opinions • awareness-raising on rights, equity and inclusion • provide information to challenge stigma and taboos • include discussions on risks to violence and how to minimise
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The remit of the WASH sector?

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Environment - natural	<ul style="list-style-type: none"> • long distances to facilities • uneven slippery paths, steep slopes, trees and bushes 	<ul style="list-style-type: none"> • Install facilities closer to users • make paths smooth and non-slip, clear bushes for line of sight
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definitely!

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definitely!

The remit of the WASH sector?

	Barriers	Solutions
<i>Social/ cultural/ attitudinal</i>	<ul style="list-style-type: none"> • decision-making • traditional beliefs • gender, caste, HIV, • stigma, prejudice, shame, • taboos & ignorance about menstruation • gender based violence is common 	<ul style="list-style-type: none"> • provide opportunities for women to voice opinions • awareness-raising on rights, equity and inclusion • provide information to challenge stigma and taboo • include discussions on risks to violence and how to minimise
<i>Individual</i>	<ul style="list-style-type: none"> • poor eyesight • difficulty walking • weak, stiff, easily tired • monthly menstrual bleeding 	<ul style="list-style-type: none"> • eye test, medical care, spectacles • physiotherapy, mobility equipment • health care, nutrition, medication • affordable sanitary pads/ reusable cloth

The remit of the WASH sector?

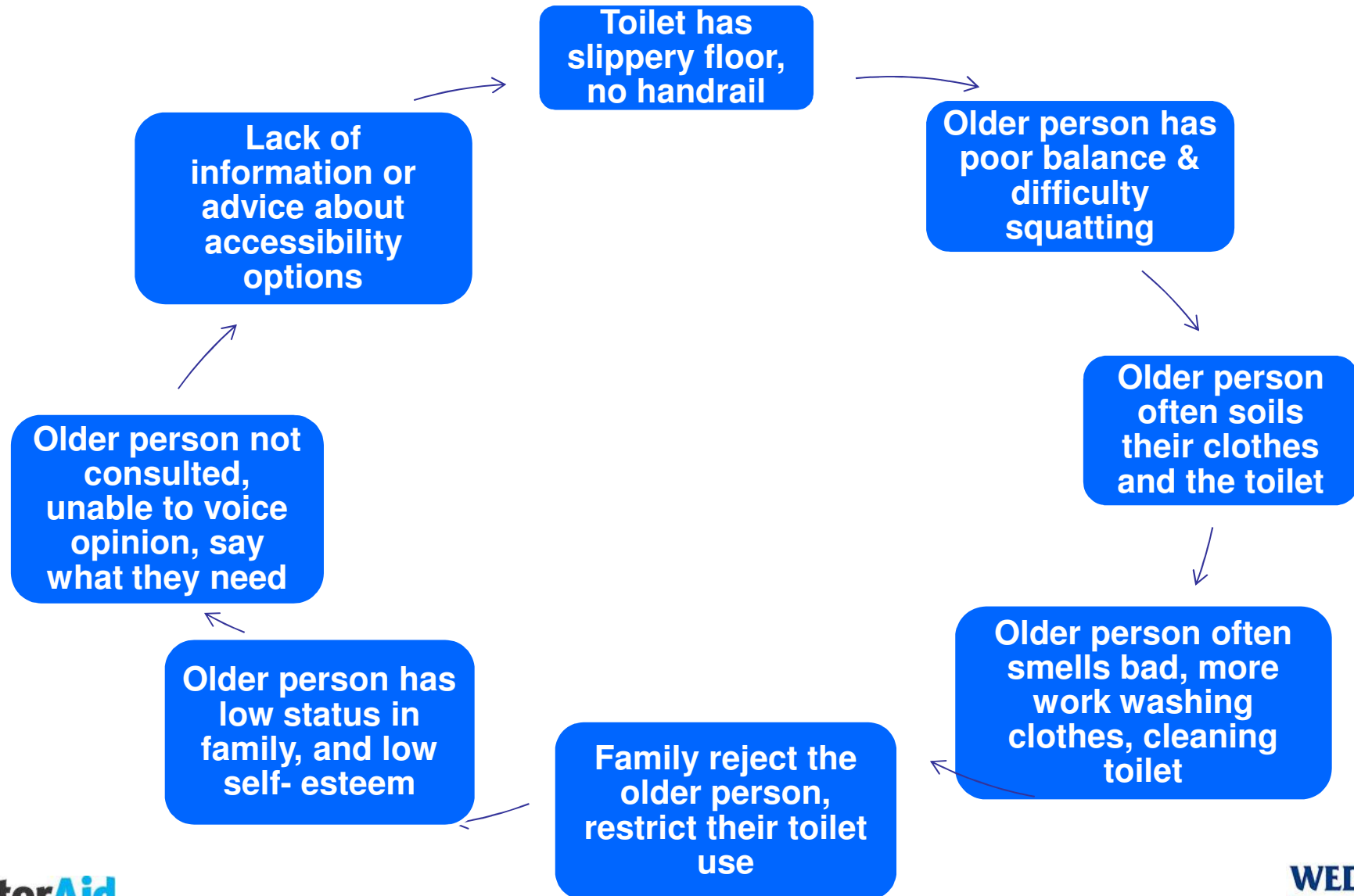
	Barriers	Solutions
<i>Social/ cultural/ attitudinal</i>	<ul style="list-style-type: none"> • decision-making power held by men • traditional beliefs about gender, caste, HIV, etc. • stigma, prejudice, shame, etc. • taboos & ignorance about menstruation • gender based violence is common 	<ul style="list-style-type: none"> • provide opportunities for women to voice opinions • awareness-raising on rights, equity and inclusion • provide information to challenge stigma and taboo • include discussions on risks to violence and how to minimise
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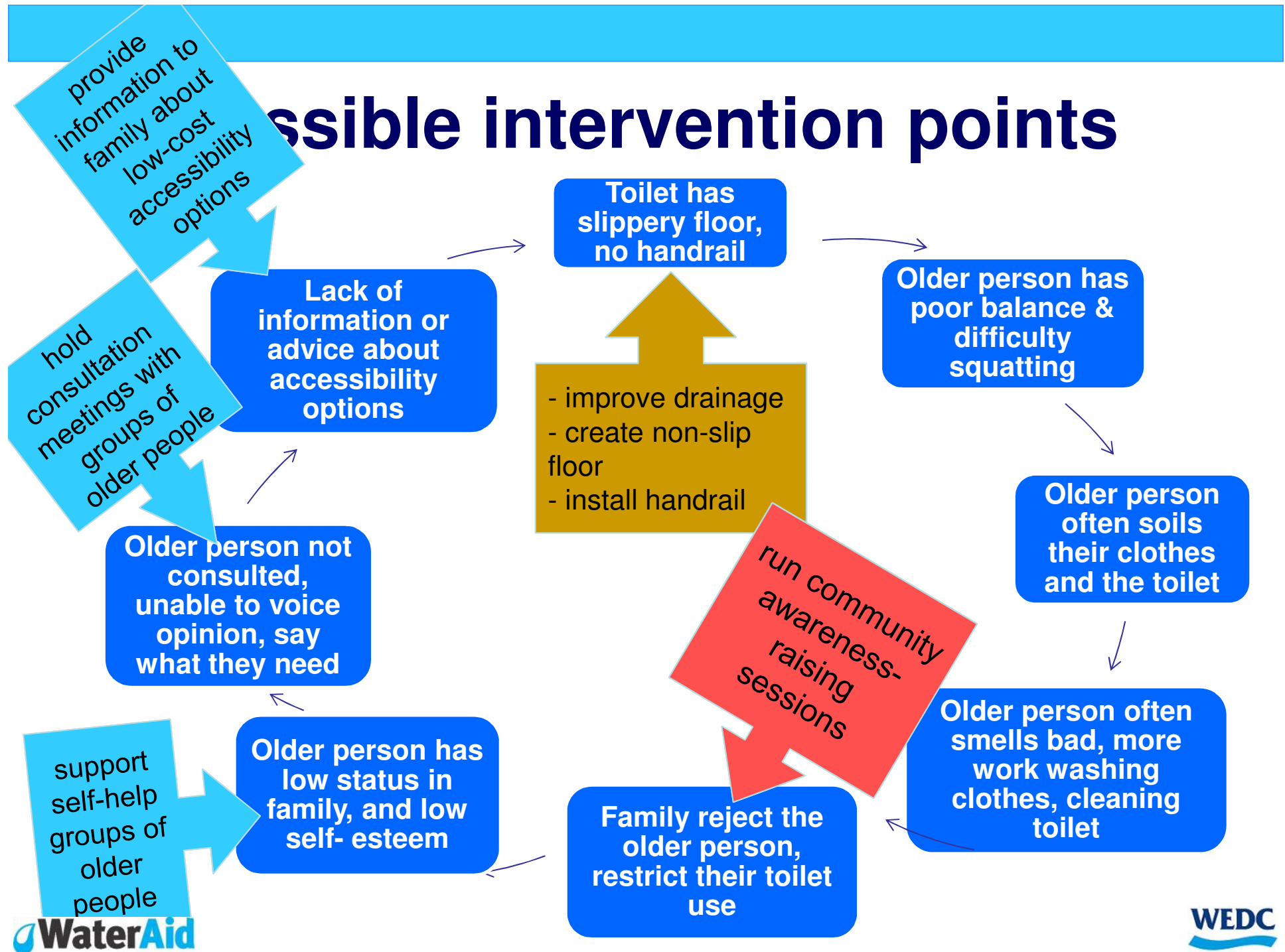
unlikely

definitely

Possible intervention points



Possible intervention points



Activity Sheet 3: Identifying solutions to water, sanitation and hygiene

Now take a break and practice identifying solutions for yourself.

Check what you have learnt...

- What are the different types of barriers to access and inclusion?
- List some solutions to the barriers?
- Describe one new thing you have learnt.
- In your situation which are the most challenging barriers to address?

References for further reading

(1) *The Human Right to water and sanitation*

<http://www.ohchr.org/EN/Issues/WaterAndSanitation/SRWater/Pages/SRWaterIndex.aspx>

(2) *World Vision (2011) Travelling Together* <http://www.worldvision.org.uk/what-we-do/advocacy/disability/travelling-together-publication/>

For more Equity and Inclusion learning materials, including:

- *Activity Sheet 1: Using the social model to identify individual and environmental barriers*
- *Activity Sheet 2: Identifying barriers to water, sanitation and hygiene*
- *Activity Sheet 3: Identifying solutions to reduce barriers to water, sanitation and hygiene*

go to:

WEDC Equity and Inclusion page: <http://WEDC-Knowledge.Lboro.ac.uk/collections/equity-inclusion>

or

Inclusive WASH: <http://www.inclusivewash.org.au/>