

## Equity and inclusion in WASH provision - using the social model of exclusion - Facilitators notes

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NB *Content in italics* is intended as information/guidance for the presenter/facilitator.

Content not in italics is intended as the presenter's narrative

### Slide 2: Contents

*Note to Facilitators:*

*The content of this powerpoint is organised into three sections:*

*Section 1 presents the theory of the 'Social model' of exclusion, using examples related to WASH*

*Section 2 introduces 'Barrier analysis' – how to use the social model to analyse barriers to access and exclusion*

*Section 3 then introduces 'Problem solving' a structured way of identifying solutions to address these barriers.*

*The initial 'Introduction' slide situates the social model in the context of rights-based approach to WASH.*

*Each section can be used as a stand-alone presentation, followed by a discussion or practical activity.*

*At the end of each section, there is a suggestion of a practical activity, to give participants an opportunity to practice what has just been presented, to discuss and ask questions. This activity can be done as a whole group, or in small groups, or individually.*

*It is not recommended to use the presentation from start to finish in one sitting – this is guaranteed to send people to sleep!*

### Slide 3: Introduction

Access to drinking water, sanitation and hygiene is a human right, which is now recognised by the United Nations. The right to water and sanitation underpins all the work of WaterAid, and many others working in the WASH sector.

However, many people in all communities do not enjoy these rights. They are excluded for any number of reasons, and struggle to cope without access to basic water, sanitation and hygiene.

- It may be because they are actively discriminated against and excluded,
- It may be that exclusion is not deliberate, but because their needs are different from the majority, they are not recognised

- Often there are groups that are marginalised within their communities, and lack power and influence

In any society there is unequal distribution of power, and the voices of the people with least power are often ignored, so their needs are not recognised. For example, women are often unheard and unable to make their needs known.

To combat this marginalisation and lack of access,

- the first step is to understand who is likely to be marginalised in any particular situation,
- secondly to identify and analyse the problems that are preventing their access to WASH,
- so that, thirdly, we can start to develop solutions as part of a WASH programme.

The Social Model provides a practical tool to help us do just that – to carry out these 3 steps, and move towards ensuring the right to WASH for all.

#### **Slide 4: Section 1 Social/Individual Model**

We're going to start by introducing some theoretical models of inclusion and exclusion.

These are models that were initially developed by disabled people – activists and academics, to challenge the marginalisation of disabled people. They are known as the individual and social models of disability.

We have adapted these models for use with a broad range of excluded groups, because they are such a powerful tool for analysis and problem solving.

We are using them in the context of WASH programming, but they are suitable for use in any development context.

#### **Slide 5: Individual models of exclusion**

Traditionally, throughout history, most societies (although not all) have tended to exclude people who they perceive as 'different' for whatever reason – often labelling them 'undesirable' or 'abnormal'.

Here you can see two very similar theoretical models to represent this exclusion – which we call the Individual model of exclusion.

*[Talk through each of the figures in the slide]*

This model is particularly relevant to people who have impairments, such as a physical impairment, or an illness, such as epilepsy or HIV.

In many cultures it is applied to women, especially when they are pregnant, or menstruating, when they are seen as different, or unclean.

It can also apply to people who have different practices – like pastoralists, or different occupations, such as manual scavengers or pit emptiers.

For all these groups, the traditional view is that they need to change in some way before they can fit in.

### Slide 6: Social Model of Exclusion/ Inclusion

More recently, a new way of thinking about socially excluded groups is increasingly accepted – this is called the ‘social model’ of inclusion.

The starting point for the social model is that everyone is a part of society, that everyone is different – female/male, young/old, tall/short, weak/strong, and that difference is a normal and natural part of all communities.

Groups who are perceived as ‘different’ have the same needs and rights as everyone else – to be part of a family, to education and personal development, to contribute and participate in the life of family and community, to dignity, employment and so on.

Instead of focusing on fixing the individual, the social model focuses on identifying and removing the barriers in the surrounding environment, community and society, that prevent all these aspects of inclusion. These barriers can be extremely varied. They might include very obvious physical obstacles in the natural or built environment, they could be social or attitudinal factors, to do with people’s perceptions, cultural norms and behaviour, or barriers could take the form of institutional or organisational issues, to do with policies and procedures, the way organisations operate, the way services are delivered.

The social model fits well with rights-based approaches, because it focuses on changing society to enable everyone to be included, in terms of access to facilities and services, but also in terms of inclusion in decision-making.

### Slide 7: Example 1

How does this work in practice? Lets look closely at a few examples of real people.

Chimunya is 17 and goes to school. Like many teenage girls around the world she finds the school toilets unpleasant, insecure and tries to avoid using them. This is particularly difficult when she has her periods.

First we’ll analyse her situation using the individual model, which focuses on the problems of the individual, what is wrong or different about her as a teenage girl at school, and the things she can’t do. These might include... *[talk through the list of problems in the slide]*

This analysis points to individual solutions that focus on ‘fixing’ her problems, such as avoiding food and drink at school, and staying at home when she has her periods. These solutions reinforce her exclusion and the inequity between girls and boys.

If we instead use the social model to analyse her situation, this focuses on the barriers (problems/ obstacles) that she faces in her environment. These might include... *[talk through the list of problems in the slide]*

This social model analysis points to solutions that focus not on her as an individual, but on the surrounding environment and society, such as the design and location of the toilet, hygiene education for girls and boys, better systems for ensuring maintenance of the toilets. All of these could be incorporated into a water and sanitation programme.

### Slide 8: Example 2

Here's another example:

Papa Moses is an elderly man, whose gradually lost his eyesight over the last 10 years. This has meant he's become increasingly restricted in his daily life, including using the family latrine.

Again, we can first analyse his situation using the individual model, which focuses on his individual problems, what is wrong with him, the things he can't do, and how much help he needs. These might include... *[talk through the list of problems in the slide]*

This analysis points to solutions that focus on 'fixing' his problems, such as medical treatment for his eyes, or needing care in the face of his helplessness. None of these solutions are likely to be within the remit of a WASH programme.

On the other hand if we use the social model to analyse his situation, this focuses on the barriers (problems/ obstacles) that he faces in his environment. These might include... *[talk through the list of problems in the slide]*

This social model analysis points to solutions that focus not on the individual but on the surrounding environment and society, e.g. design of the toilet, provision of information to the family, e.g. hygiene information, and other simple steps that the family could take. Some of these solutions could be incorporated into a WASH programme.

### Slide 9: Example 3

Here's a second example: **Linda** is 25, her legs are paralysed, so she has to crawl or use a wheelchair

Again, we can first analyse her situation using the individual model. This focuses on her individual problems, what is wrong with her, all the things she can't do, and how much help she needs.

This individual model analysis points to solutions that focus on 'fixing' her problems, such as the need for an operation for her legs, or sending her to a special centre. Neither of these solutions are likely to be within the remit of a WASH programme. They are also unrealistic, and would further isolate her from her family and community.

If we instead use the social model to analyse her situation, this focuses on the problems that she faces in her environment. These include... *[talk through the list of problems in the slide]*

This social model analysis points to solutions that focus not on the individual but on the surrounding environment and society, such as the design of the toilet, and other low-cost steps that the family could take. Some of these solutions could be incorporated into a WASH programme.

### Slide 10:

We've used three examples, an adolescent schoolgirl, a frail elderly man, and a disabled woman.

But there are a wide range of people who may find themselves excluded from WASH facilities.

*[Ask participants]* Who else can you think of who might have difficulty accessing and using existing facilities for whatever reason?

Frail elderly people

Disabled people

People with chronic (long-term) medical conditions

Overweight people

People who are temporarily sick or injured (e.g. with a fever, or broken leg)

Small children

School children - especially girls

Women whilst heavily pregnant or menstruating

Women – if there is lack of privacy or security

Ethnic and religious minorities

Lower castes

Certain occupations, e.g. pit-emptiers, sex workers, manual scavengers...

People with traditions or taboos that prevent use of facilities shared with others – e.g. with father-in-law)

People with nomadic lifestyles, e.g. pastoralists

....

### Slide 11

“Now we're going to take a break and give you some practice at identifying the difference between individual barriers and barriers in the environment.”

*Facilitator:* If you're using this presentation with a large group, stop here and give participants a task. Either as a whole group or split into small groups.

An activity sheet is provided, but you can use any case examples as a basis for the exercise. These could be printed out for participants to read, or presented by participants from marginalised groups based on their own experience.

## Slide 12: Section 2 – Barrier analysis

You will remember from the examples we looked at in Section 1, when we're using the social model, we use the term 'barriers' to refer to anything that prevents access to water, sanitation and hygiene.

## Slide 13

The question is, how can we use this social model in practice?

Let's start with a practical exercise.

Keeping in mind the different groups of people we've been talking about in Section 1, look at the various scenarios in the next few slides. As we go through the slides, your task is to:

"Identify any barriers or obstacles that would create difficulties for vulnerable and excluded groups"

## Slide 14: Images of water points

*Facilitator: Show the slide first with photos only,*

"Here are some images of fairly typical water points, and water sources.

Look at these images, and see if you can identify any barriers that would create difficulties for vulnerable groups" (for women, for disabled people, for older people, for small children, and so on...)

*Facilitator: Allow a few minutes for suggestions and discussion. Then click once only .... The post-its will appear at 2 sec intervals*

## Slide 15 Images of toilets

*Facilitator: Show the slide first with photos only,*

"And how about these fairly typical toilet facilities? Can you identify any barriers that would create difficulties for vulnerable groups?"

*Allow a few minutes for suggestions and discussion. Then click once only .... The post-its will appear at 2 sec intervals*

## Slide 16

*[Show the slide first with photos only]*

Most of the barriers illustrated by the previous slides are physical barriers, which are relatively easy to identify.

Here are some images which relate more to the way services are planned and delivered – what we often call the ‘software’ side of programming. Is there anything here that makes you think of less obvious barriers?

*After allowing a few minutes for suggestions and discussion, click once only .... The post-its will appear at 3 sec intervals*

These institutional and organisational barriers are often less easy to identify, but they are equally problematic, if not more so.

And of course the social attitudes and cultural beliefs, which underlie everything that we think and do, can be the most difficult barriers to deal with.

### **Slide 17: A range of barriers are identified**

So, we’ve identified a whole range of barriers, but what do we do with them now?

We need to organise them somehow. One way to do this, is to group them into categories of similar types ... Can you spot barriers that fall into similar types or categories?

*Allow a few minutes for suggestions and discussion, then...*

There are barriers to do with the physical environment - these might be barriers in the *natural* environment [*click*] or barriers to do with the *built infrastructure*

*then* there are barriers to do with the way services are delivered [*Click*] – including policies, organisational issues and procedures

and underlying them all [*Click*] there are social barriers, including attitudes, cultural beliefs, and traditional practices

### **Slide 18: Table of barriers to inclusion**

Here are these barriers again, but tidied up in a table.

*[Click once for each type of barrier]*

As we’ll see later, analysing and organising the barriers using this framework, also help to highlight the areas where an intervention can make the most difference.

### **Slide 19: Barriers are often interrelated**

You may have found that some barriers can be hard to separate, and may fall into more than one category. This is because barriers are almost always interrelated.

Take the example of an excluded individual who has very low social status in the family and community. This low status means they are never consulted when decisions are made, even decisions that directly affect them, such as toilets. As a result the toilet facilities at home and at

school are not suitable for them, which makes them difficult to use. This makes them dependent on others for help with toileting, which reduces their dignity and self-esteem.

### **Slide 20: Vicious cycle of barriers**

These barriers can also be part of a cycle that becomes self-perpetuating.

In this example of an older person's situation, you can see numerous barriers of different kinds:

- Individual barriers such as difficulty squatting, and low self-esteem
- Physical barriers such as the unsuitable toilet design
- Social barriers – rejection by the family, low status in the family

and even

- Institutional barriers, in the form of lack of available information about how to make the toilet accessible

### **Slide 21: Activity sheet 2**

“Now we're going to take a break and give you time to practice barriers analysis for yourself.”

*Facilitator: If you're using this presentation with a large group, stop here and give participants a task, either as a whole group, or split into small groups.*

*Activity sheet 2 is provided, but you can use any case examples as a basis for the exercise. These could be printed out for participants to read, or presented by participants from marginalised groups based on their own experience.*

### **Slide 22: Section 3 Problem solving**

Having identified barriers to water sanitation and hygiene, the next step is to identify what can be done about them.

### **Slides 23-28: Identifying solutions**

Identifying and categorising the barriers helps to make the issues more manageable, and enables us to identify areas where intervention can make a difference.

Using a selection of the barriers that we have previously identified, we are now going to see how many solutions we can identify that will reduce or eliminate any of these barriers.

*Facilitator: Allow a few minutes for suggestions and discussion. You can either:*

- *Brainstorm as a whole group*

- *Go through the categories of solutions one by one*

*or*

*Divide participants into groups to come up with solutions, or give each group one or two categories to focus on, then come back to the main group to pool their ideas*

### **Slides 29-32: The remit of the WASH sector?**

The solutions proposed on these slides are just suggestions, based on practical experience of what has worked in specific contexts. We have to bear in mind that what works in one community may not work in another. The solutions that you identify may be completely different.

Bearing this in mind, which of the solutions that have been identified here do you consider are within the roles and responsibilities of WASH service providers?

### **Slide 33**

We can see from this analysis that there are possibilities for intervention on several different levels

- directly on the hardware side, in terms of construction and modification of facilities ,
- Institutionally, in terms of improved designs of facilities, capacity building of staff and partners, organisational procedures, and development of partnerships
  - And raising awareness of rights and challenging negative attitudes and exclusion

There some specialised areas that are beyond the remit of the WASH sector, which may be better dealt with by developing partnerships with relevant agencies.

### **Slide 34: Possible intervention points**

Let's look at how this multi- faceted approach might apply using a previous example.

If we look again at our example of the vicious cycle of barriers, you might be able to identify several possible intervention points.

*Allow a few minutes for suggestions and discussion. Then click once...*

Each of these solutions may not be sufficient on their own, but a combination of solutions and approaches is likely to be more effective.

### **Slide 35: Activity sheet 3**

“Now we're going to take a break and give you time to practice identifying solutions for yourself.”

*Facilitator: If you're using this presentation with a large group, stop here and give participants a task, either as a whole group, or split into small groups.*

*Activity sheet 3 is provided, but you can use any case examples as a basis for the exercise. These could be printed out for participants to read, or presented by participants from marginalised groups based on their own experience.*

### **Slide 36: Check what you have learnt**

*Facilitator: This slide can be used to refresh what has been learnt, or to monitor participants' learning.*

*It can be used:*

- *As a whole group*
- *In small groups, with results then reported back to the whole group*
- *As an individual exercise to monitor learning*

### **Slide 37: References for further reading**