Community Driven Environmental Health Project (CDEHP)
Khyber Pakhtunkhwa Province, Pakistan

An Australian aid initiative implemented by International Rescue Committee on behalf of the Australian Government

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Research Analysis

On

“Study of comparison of Gender dis-aggregated Environmental Health needs as determined by male and female committee and how this translates into decision-making at village level”

August 22, 2016

A research collaboration between the IRC and the University of Peshawar

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## Abbreviations

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<th>Abbreviation</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDEHP</td>
<td>Community Driven Environmental Health Project</td>
</tr>
<tr>
<td>DFAT</td>
<td>Department For Foreign Affairs and Trade</td>
</tr>
<tr>
<td>CLTS</td>
<td>Community Led Total Sanitation</td>
</tr>
<tr>
<td>SLTS</td>
<td>School Led Total Sanitation</td>
</tr>
<tr>
<td>PLA</td>
<td>Participatory Learning and Action</td>
</tr>
<tr>
<td>WASH</td>
<td>Water, Sanitation and Hygiene</td>
</tr>
<tr>
<td>VWA</td>
<td>Village WASH Activist</td>
</tr>
<tr>
<td>VWC</td>
<td>Village WASH Committee</td>
</tr>
<tr>
<td>FGD</td>
<td>Focus Group Discussion</td>
</tr>
<tr>
<td>KII</td>
<td>Key Informant Interview</td>
</tr>
</tbody>
</table>
Executive Summary

International Rescue Committees is implementing the “Community Driven Environmental Health Project” funded by Department of Foreign Affair and Trade. This program aims to improve access to safe drinking water, improved and low-cost (affordable) sanitation in the rural communities of district Mardan, Nowshera and Peshawar of Khyber Pakhtunkhwa Province. The project relies for its success on a process of community engagement. This will focus first on the poor sanitation coverage in these areas, mobilizing the communities to tackle this issue using their own skills, energy and available local resources. Once this is underway, the community will be invited to turn their attention to other aspects of their community environment, including access to safe drinking water; water and sanitation facilities at schools; the protection of natural resources; and reducing vulnerability of the community to disasters and to climate change.

For this specific study, mixed methods approach was used to gather information simultaneously to understand the research problems. The data obtained in mixed method approach is both qualitative and quantitative.

**Quantitative**
Final environmental health plans were utilized to acquire quantitative information. EH plans for 100 villages were analyzed in terms of gender disaggregation. The data obtained through this process is further examined to explore women’s involvement in decision making around WASH projects. The data acquired through EH plans represents the WASH needs of both men and women.

**Qualitative**
Focus Group Discussions (FGDs) and Key Informant Interviews (KII)s were conducted at community level to gather the data.

**Sampling**
In this particular study, we will use stratified random sampling technique, also sometimes referred as proportional or quota sampling, in which we divide the total no of VWCs into two
subgroups i.e. male and female committees. Then we take a simple random sample in each subgroup. The number of villages intervened along with number of beneficiaries including VWC members (male, female).

- The research involves 304 people altogether including 197 women and 107 men from all three project district.
- FGDs were conducted with male and female committees while KII was conducted with female only and the responses revolved around the empowerment of women through their committees were gathered.
- Respondents believe that Behavior Change (Cleaning environment) & Improving hygiene (wash hands etc) (22%) and conducting regular meetings and raising issues (70%) are the indicators demonstrating the effectiveness of committees while according to 4% men, women committees are not effective at all as compared to remaining 4% who gave no response.
- Most of the EH needs identified by both men and women committees are same (22%), while according to 35% respondents there is not much difference between the needs whereas 27% people mentioned the difference; only 16% gave no response.
- Some of the EH needs identified by women include water supply, communal dustbins, street drainage system, drainage construction, street pavement, latrines, hand pump, protection walls, pipeline. Among these 36% are fully addressed while 60% partially addressed whereas 4% gave no response.
- Women have accessibility to WASH facilities (36%), awareness and adopting hygiene practices (24%), behavior change & reduced disease rate (7%), prosperity (4%) and safety (3%) while 26% gave no response.

Participation of both men and women is key towards improved EH plans development. EH program should derive EH plans indicating WASH and EH needs rather than needs like school construction, waiting rooms which leads to disagreement. Village WASH Activists and field teams shall not raise hopes of the communities during their field visits.
International Rescue Committees is implementing “Community Driven Environmental Health Project” funded by the Australian Government’s Department of Foreign Affair and Trade. This program aims to improve access to safe drinking water, improved and low-cost (affordable) sanitation in the rural communities of district Mardan, Nowshera and Peshawar of Khyber Pakhtunkhwa Province. The project relies for its success on a process of community engagement. This will focus first on the poor sanitation coverage in these areas, mobilizing the communities to tackle this issue using their own skills, energy and available local resources.

Once this is underway, the community will be invited to turn their attention to other aspects of their community environment, including access to safe drinking water; water and sanitation facilities at schools; the protection of natural resources; and reducing vulnerability of the community to disasters and to climate change.

The awareness regarding sanitation, safe drinking water and hygiene in general is lacking in the proposed project areas. Lack of access to adequate sanitation is one of the most serious problems confronting poor people, leading as it does to sanitation related diseases such as diarrhea and cholera which seriously undermine human health and well-being. Due to sub-tropical climate heat and humidity create ideal conditions for pathogens survival. The open disposal of human excreta, animal dung and spread of sludge water is threatening community health.

This research will closely examine the development process of Environmental Health (EH) plans formulated by Village WASH Committees (VWCs) for each village in all three years of the project. Male and female VWCs identified their EH needs separately, a final EH plan was devised by integrating and prioritizing male and female needs through a process of mutual consultation.

CDEHP team conducted a comparative research to critically study and compare the male and female EH needs as determined by them and what impact this has done at village level in terms of decision making.
In order to serve the objectives and purpose of this study, different tools to answer the questions revolving around the empowerment of women in this project have been applied.

The overall objective of the research was to find out Comparison of gender dis-aggregated analysis of village EH needs, and how this translates into decision-making. However, the study also pertain the following purposes:

1. Find out impact of improved tools and adopt changed approaches to women within decision-making structures
2. To find out impact of improved tools and methodologies to ensure women involvement in decision making around WASH projects
3. To define gender segregated EH need in the targeted communities
4. Identify the key factors that influence women in decision making process
5. Assess the main benefits sought by involving women in mainstreaming
6. Identify the barriers in bringing women in decision making process and their role in developmental projects
7. Provide data that can assist women engagement in community infrastructure
Chapter 2
1. Tools and Approaches

For this specific study, **mixed methods** approach was used to gather information simultaneously to understand the research problems. The data obtained in mixed method approach is both **qualitative** and **quantitative**.

1.1 Quantitative

As discussed in Chapter 1, final environmental health plans were utilized to acquire quantitative information. EH plans for 100 villages were analyzed in terms of gender disaggregation. The data obtained through this process is further examined to explore women’s involvement in decision making around WASH projects. The data acquired through EH plans represents the WASH needs of both men and women.

1.2 Qualitative

Following two methods have been used to collect data for determining “how effectively women’s voice is incorporated into community decision-making.” Along with the overall objective, the qualitative methods below will explore and revolve around the purposes of the study.

1.2.1 Focus group discussions (FGDs)

A total of **twenty three** FGDs were conducted in **twelve** villages of three districts i.e. four villages each district and two FGDs per village (one with male and female committee). Out of these, 1 female committee in district Nowshera did not respond to the FGD due to cultural barriers. The data through this method revolves around the purpose of this study i.e. the data helped in comparison among male and female EH needs and the purposes of the research study.

1.2.2 Key Informant Interviews (KIIa)

KIIa mainly focused on women needs, barriers and empowerment, therefore 120 KIIa were conducted with female community members only. Out of these, 30 KIIa were not responded by the women community members as some of their non-EH needs were not included in the final EH plans.
2. Sampling

In this particular study, the comparison between the male and female EH needs are under study. Therefore, we will use *stratified random sampling* technique, also sometimes referred as *proportional or quota* sampling, in which we divide the total no of VWCs into two subgroups i.e. male and female committees. Then we take a simple random sample in each subgroup. The number of villages intervened along with number of beneficiaries including VWC members (male, female) are listed below in table 1.

**Sample for FGDs**

<table>
<thead>
<tr>
<th>Districts</th>
<th>Villages Intervened (Year 1-3)</th>
<th>Male Committees</th>
<th>Female Committees</th>
<th>Total Committees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mardan</td>
<td>35</td>
<td>35</td>
<td>35</td>
<td>70</td>
</tr>
<tr>
<td>Nowshera</td>
<td>35</td>
<td>35</td>
<td>35</td>
<td>70</td>
</tr>
<tr>
<td>Peshawar</td>
<td>30</td>
<td>30</td>
<td>30</td>
<td>60</td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>200</td>
</tr>
</tbody>
</table>

*Table 1*

Total No of Villages, N = 100
Sample size, n = 12 (12% of N)

Therefore, 12 villages having 24 VWCs including 12 male and 12 female committees were selected through *simple random* sampling. The purpose of conducting FGDs with male and female committees of the same village is to ensure equal representation as it is vital for the study to compare the gender disaggregated data and its translation into decision making at village level.
Sample for KII

<table>
<thead>
<tr>
<th>Districts</th>
<th>Villages</th>
<th>KII s</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mardan</td>
<td>35</td>
<td>40</td>
</tr>
<tr>
<td>Nowshera</td>
<td>35</td>
<td>40</td>
</tr>
<tr>
<td>Peshawar</td>
<td>30</td>
<td>40</td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
<td>120</td>
</tr>
</tbody>
</table>

Table 2

In this case, three districts were divided into three subgroups and 4 villages were selected through simple random sampling in each district. 120 KII were conducted with women community members in 12 villages (10 KII per village).
Chapter 3
The project area has strong norms, with a blend of religion and culture which supports culture of ‘Pashtunwali’ which has strong themes of honor, solidarity, hospitality, mutual support, shame and revenge which determines social order and individual responsibility. The home is defined as women’s ideological and physical space whereas the world outside the home is perceived as being related to men. On the other hand, while the project is intent on helping to address the space outside the home, Environmental Health issues are closely related to women. Gender roles are very clearly delineated. Men are the decision-makers in the community. A concern since early project is whether this culture may bias decision-making under the Environmental Health project.

A project motto is “Nothing about Us without Us.” If decisions are made that affect the lives of women, then women need to be real stakeholders in those decisions. But in the project area, the pardah(veil/Hijab) system is a common practice. Under this system, women stay close to the home, unless accompanied by a male relative, and are not allowed to talk to men outside their own family. Therefore, women and men cannot meet together in mixed groups. This makes joint decision-making hard to achieve.

The focus of the project is on communities’ leadership in their own prioritization of actions. In each village of the project area, Village WASH Activists (female and male) are identified first, and then CLTS triggering is conducted. After CLTS process is established, it is followed by Village WASH Committees establishment (both men and women). They work through a process of Participatory Learning and Action (PLA) over the course of four months. Led by the Village WASH Activists, the committees discuss various aspects of environmental health of their village, these include drainage, water supply, disaster vulnerabilities, etc. They also discuss actions that could be taken to reduce risks and improve the health of their village. Ultimately, the aim is to develop an Environmental Health Action Plan that prioritizes the most important feasible actions. IRC has an infrastructure budget for each village, which is allocated in accordance with the plan, and the community also discusses which actions can be performed using their own resources, and which are suitable for government interventions under the local government village development fund.

Because women and men cannot meet together, this process is done in parallel by the women and men committees periodically, the plans are cross-shared so that each committee is familiar
with the discussions of the other. Through this process, the two committees must reach an agreed and unified plan before any infrastructure work by IRC can begin.

It was always a project concern that, as men are generally seen as the decision-makers, the deliberations of the male committee would be given more weight-age than those of the female committee. This study aims to evaluate whether weight-age is tilted or not.

The Data

One advantage of separate planning is that there is a clearer record of the priorities that each group came up with, as well as the final prioritization of the village.

To introduce the method, we start with two individual villages as examples. Each of these village plans are summarized briefly in table form, with a graphic interpreting this data. Note that for these presentations, the lists of activities are not in the order of priority, and the priorities themselves, and their wording, are from the committees themselves.

<table>
<thead>
<tr>
<th>Prioritized Actions</th>
<th>Male EH Plan</th>
<th>Female EH Plan</th>
<th>Final EH Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flood Protection Wall</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Early Warning System</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Safe Water Provision</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Latrine Construction</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Street Pavement</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Awareness on Hygiene</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Water Safety Plan</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Solid Waste Management</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Drains Cleaning and Rehabilitation/construction</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Plantation</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Provision of H2S Water testing kits and Chlorine</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>CLTS Triggering</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Dissemination of BCC/IEC materials</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>VWA Training on Water Shed Management</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>DRR training for VWOs</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

*Table 1: List of prioritized actions of the Baghwan banda village of District Mardan as identified by the village men and women committees*
The table and graphic above each present the same information, and show which of the men’s and women’s priorities were included in the final EH plan in this village. In the graphic, blue represents women, green represents men, and grey represents overlap.

The column on the left of the graphic represents all the 15 actions selected by both groups. The blue block at the top represents the six actions that women prioritized; the green block at the bottom the five actions that men prioritized, and the grey area in the middle is the ‘overlap’ – activities that were prioritized by both groups. The two blocks on the right show actions that were either included (top) or excluded (bottom) from the final EH Plan. In this case, three of the four actions that had been prioritized by both groups were included in the final plan – the grey area in the block at the upper right. Three of the actions prioritized by men also found their way into the final plan – represented by the green area of the upper right block. The rest of the actions, which did not get included in the final plan, are represented by the block at lower right. It is evident that all the six actions prioritized by women only ended up in this lower block. (i.e. excluded)

In this case, therefore, it was observed that women’s voice was not heard in decision-making. But in other villages a rather different situation was observed. Below, as given in table 1.1,
another village in the same district is shown. With significantly more blue in the ‘final’ EH plan, it was observed that a balance approach was adopted in the decision making process. The priorities set by women have been given more weight-age in the final decision making.

<table>
<thead>
<tr>
<th>Prioritized Actions</th>
<th>Male EH Plan</th>
<th>Female EH Plan</th>
<th>Final EH Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Development/ Dissemination of BCC materials</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Street Cleaning</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Hand Washing Places</td>
<td>✔</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Water Safety Plan</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>CLTS Triggering</td>
<td>✔</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drains Cleaning and Rehabilitation/construction</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Environmental Hygiene</td>
<td>✔</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provision of H2S Water testing kits and Chlorine</td>
<td>✔</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Solid Waste Points (Segregation)</td>
<td>✔</td>
<td></td>
<td></td>
</tr>
<tr>
<td>VWA Training on Water Shed Management</td>
<td>✔</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DRR training for VWOs</td>
<td>✔</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Table 2.1: List of prioritized actions of the Nazar Khan Banda village of District Mardan as identified by the village men and women committees*

Tracking individual prioritizations in this way, and the use of graphics to represent information makes it easier to aggregate results across many villages. At the time of this study, the EH planning process was already completed in 60 villages, in a series of three batches.
Aggregating all of these plans together (excluding two villages where data was incompletely recorded), the following chart was generated:

The chart appears to suggest a balance approach in terms of accommodating priorities set by men and women voice in the target villages. The pie-chart to the right breaks down across villages whether a higher percentage of female priorities or of male priorities made it into the final EH plan. Again, the villages seem commendably balanced in their prioritizations.

While results from the data seems promising in terms of gender role balance in decision making process. However, the data must be treated with some caution. This data analysis is intended to underpin a gender study which will include interviews and focus groups with women in the
villages, to analyze how they perceive the project so far. We don’t know if this data will reflect their perceptions. In discussions with the IRC project team before this data became available, they had felt that they had only partially succeeded in ensuring that women’s voice was heard. In their view, women’s Village Wash Committees varied in strength across the villages, with some being surprisingly empowered, but others much less so. More qualitative studies are needed to have an insight into the data presented.

The project has so far been carried out in three batches to date, and the planning process has not been entirely consistent across time and across districts.
YEAR 1 BATCH 1 – 10 villages

YEAR 2 BATCH 1 – 25 villages
YEAR 2 BATCH 2 – 25 villages

The charts above appear to indicate declining trend in preference for women’s priorities across the three batches and it needs to be investigated further. In some cases, where there was a high ‘balance’ of priorities, this was because the final plan was an ‘omnibus’ of all the priorities. In other cases, the data suggests that the planning process may have been too closely ‘guided’ by IRC staff, leading to conclusions that were more constrained than we would wish. This has been a difficult balance to get right. On the one hand, we want villagers to reach their own
conclusions, but on the other hand, the prioritization of girls’ vocational centers and health clinics, while perhaps important, is not something that can be addressed in an Environmental Health project.

Again, focus group discussions and interviews with women who were engaged in the planning process is expected to access the situation further. The discussions are expected to help us understand whether the figures reflect critical needs of women, what influences them as well as barriers to decision making.

The study is also intended to:

- Explore perceptions of women and girls in the project communities, and effectiveness of project outcomes as they relate to women and girls.
- Explore the impact of tools and adopted approaches to empowering women within decision-making structures.
- Explore women’s involvement in decision making around WASH projects.
- Assess the main benefits sought by involving women in mainstreaming.
- Identify the barriers in bringing women in decision making process and their role in developmental projects.
- Provide culturally appropriate recommendations to the project team that can assist in engaging women more effectively in planning and implementation of the EH project.

![Graph 3.2: List of prioritized actions as identified by the village men and women committees.](image-url)
The research involves 304 people altogether including 197 women and 107 men from all three project district. FGDs were conducted with male and female committees while KIIIs were conducted with female only and the responses revolving around the empowerment of women through their committees were gathered. In this comparative research, gender segregated responses of both men and women committees can be found in detail in annexure (findings)\(^1\) at village and district level.

However in this chapter, encoded responses are analyzed through descriptive analysis. In case of FGDs, combined responses of both male and female community members against each research objective are examined and interpreted through percentage. However, the comparison of male and female committee responses can be found in detail in annexure at village level. While in KIIIs, the responses of female community members are explored individually and represented in percentage against each research question.

**Focus Group Discussions**

In response to the impact of tools and approaches adopted to empowering women within decision making structures, respondents believe that Behavior Change (Cleaning environment) & Improving hygiene (wash hands etc) (22%) and conducting regular meetings and raising issues (70%) are the indicators demonstrating the effectiveness of committees while according to 4% men, women committees are not effective at all as compared to remaining 4% who gave no response.

The approaches including CLTS, SLTS and PLA has a significant effect specially on women though their awareness on hygiene practices & sanitation (40%), improved sanitation by building latrines on self initiative (29%), the number of women storing and maintaining the water source at household level stands at 4%. Women spreading hygiene messages (15%) have developed better coordination and communication with males (3%)\(^2\), while 4% women gave no response as compared to equivalent men in District Peshawar who believed that no approaches are being taught to women when asked about the impacts of such tools in terms of empowering women and their knowledge around WASH.

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\(^1\) See Details in attached Annexure
\(^2\) This percentage is the response from male committee only.
The contribution of women towards the development of community is indicated through various self initiatives and success stories of the community at HH and village level. The women are raising WASH issues (33%) at the committee meetings along with disseminating WASH knowledge (11%) to community while executing hygiene & sanitation activities (37%) including Cleaning streets, solid waste garbage dumping properly, cleaning campaign, personal hygiene and domestic hygiene and house cleaning etc. While 19% respondents including both men and women gave no response.

<table>
<thead>
<tr>
<th>Women Involvement in EH plans</th>
<th>Needs Addressed</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Committee meetings &amp; discussions</td>
<td>45% To some extent (32%)</td>
<td>- Easy discussions &amp; accurate decisions</td>
</tr>
<tr>
<td>Sensitization &amp; needs identification</td>
<td>26% Yes (62%)</td>
<td>- Enhanced awareness &amp; confidence</td>
</tr>
<tr>
<td>Trainings</td>
<td>11%</td>
<td>- Improvement in hygiene practices at HH level</td>
</tr>
<tr>
<td>Discussions with family</td>
<td>10% No (6%)</td>
<td>- Women needs/issues highlighted</td>
</tr>
<tr>
<td>No Response</td>
<td>8%</td>
<td></td>
</tr>
</tbody>
</table>

Figure 1: Impact of improved tools and methodologies to ensure women’s involvement in decision making around WASH projects

Most of the EH needs identified by both men and women committees are same (22%), while according to 35% respondents there is not much difference between the needs whereas 27% people mentioned the difference; only 16% gave no response. Some of the benefits attained by involving both men and women in the development of EH plans includes behavior change (6%), both needs are addressed & represented (19%), good coordination for better decisions (15%), clean & healthy environment (16%), supporting each other in solving issues (10%) and challenges are overcome through discussions (16%); while 18% respondents gave to response.
Awareness of women on domestic issues (19%), equal representation of women & experience (34%), improvement in service delivery (4%) and the right to opportunity (10%) are the reason for women to get involved in decision making as per the respondents. While 32% community provided no response. Women needs were addressed fully (85%) and partially (7%) due to their involvement in decision making as compared to 9% which were not included in EH plan. The reason is the needs not being EH. The impact on the wellbeing of women due to addressing their needs is the improvement in quality of life (33%) through awareness on WASH (15%) and accessibility of water and latrine (21%). While 30% people gave no response.

Some of the EH needs identified by women include water supply, communal dustbins, street drainage system, drainage construction, street pavement, latrines, hand pump, protection walls, pipeline. Among these 36% are fully addressed while 60% partially addressed whereas 4% gave no response. Women have accessibility to WASH facilities (36%), awareness and adopting hygiene practices (24%), behavior change & reduced disease rate (7%), prosperity (4%) and safety (3%) while 26% gave no response. The needs including dispensary and sewing centre couldn’t be addressed due to project limitations.
Figure 2: Challenges and factors influencing women at decision making structures and its impacts on their well being.
Key Informant Interviews

The KIIs were conducted with 120 women including village WASH activist, committee members and community members of all three years and districts. 30 women were not happy and refused the KIIs as their voices were not heard through decision making structures in the final EH plans.

The women are participating effectively (62%) in the village WASH committees by arranging and participating in meetings and sessions, carrying out cleaning campaigns, delivering trainings and awareness sessions on MHM, disseminating WASH messages, raising WASH issues at committees. While 14% women are partially engaged in above activities whereas 19% women gave no response due to restrictions on them to participate by their husbands.

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The changes observed in women life (73%) through their effective engagement in committees includes improved sanitation system, awareness on WASH and behavior change, improved personal hygiene, confidence building, safe water handling, hygiene practices followed and spread and women empowerment. While 27% women gave no response.

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The EH needs identified by women (64%) includes water supply (hand pumps), rehabilitation and construction of drainage lines, solid waste points, latrines and street pavements whereas 36% women gave no response. 65% women believe that their needs are mostly related to in-house activities including cleanliness of house and children, water handling at HH level etc while according to 7% women, there is not much difference between male and female EH needs as compared to 28% giving no response. According to 72% women, their involvement in the development of EH plans is important because it will build their confidence and their needs will be addressed.

**Figure 3: Impact on women wellbeing through involvement in the development of EH plans**

**Figure 4: Key factors influencing women at decision making structures**
According to 70% women, their involvement in the project has brought significant impacts in their lives including behavior change around WASH, communal unity and good coordination, enhanced WASH knowledge and clean environment along with awareness on their role in development. While 3% women believe that there is no big impact in their lives as compared to 27%, who gave no response. 66% women believe that these impacts are long lasting in comparison with 5% who believe opposite. Whereas 4% women feel discouraged due to their needs not being addressed.

Figure 5: Women engagement in community infrastructure

- Awareness on WASH
- Empowerment of women
- Good health and safer environment.
- Improved access to market
- Improved access to water & sanitation
- Improved infrastructure
Chapter 4
Research studies indicated following reasons for women to not be able to take part in EH program

- Lack of education
- Dependability on men
- Lack of Knowledge to solve issues
- Male dominance & cultural barriers
- Lack of confidence in women due to low or no education

The study provides a variety of insights into the life, beliefs and practices of both men and women community members. It also indicates that there are clear and specific differences between men and women needs, however there is also a variety of common threads that run across all communities in terms of needs relating to water, sanitation hygiene and environmental health. But it is still a challenge to address those needs properly as there are still lots of barriers for women to fulfill their WASH needs as men are the power holder in the communities.

The studies indicated that power dynamics within the villages are complex. In general, religious leaders, teachers and influential leaders at village while men at household level have the sole power of decision making. Furthermore, women are considered as a symbol of respect and are confined to home, to be covered and kept with honor. It is cultural and religious obligation on them to be at home. However the trend of seclusion is changing as the analysis have shown the participation of women in environmental health plans development as well as in the percentages to which the needs of women have been addressed. The average of women needs addressed are encouraging and indicates the success of IRC-EH program in voicing the opinions of women in such a male dominant society.

Women are not always able to press for their interests. This exercise reflects the need and possible benefit of engaging women more on discussions about their roles, needs and how the program impacts them or changes their lives. Given the very conservative culture in the region, the pardah culture, and a tendency for decision-making to be seen as in the sphere of men, these results are encouraging. However there is still dire need of work to be done in the targeted areas as in KII around 30 women refused to take part in the activity as their men would not allow them to; 11% women did not took part in the development of EH plans while 6% shared that their infrastructural needs are not fulfilled in the EH plans. However as per discussion with field teams and keeping the detailed EH plans shared by women; some needs
like school construction, waiting room and sewing centers cannot be covered under the umbrella of EH program. Thus there is need for field teams and village activists to replicate and highlight issues relating to WASH and EH.

Overall average and percentage of the EH plan development and addressing women needs are encouraging. In the start of the program there were misperception around the work of organization in field areas and men were reluctant to allow women to take part in the program activities however; in spite of misperceptions and pardah culture, it is a huge achievement and success on part of the EH program to fulfill needs of women in such high percentage.
Chapter 5
During the studies women were asked if they have any ideas on how to ensure their full participation in program activities and to address their needs equally, recommendations are as under:

- Awareness programs for men regarding the rights of women
- Religious sermons in mosques
- Training and sensitization for men around women issues regarding WASH
- Communal discussions to be encouraged both at household level as well as outside
- Activist coordination and discussion with male members
- Committee coordination with religious leaders

Apart from above recommendations; it is recommended that:

- Formulating a clear communication plan highlighting both men and women needs, roles and responsibilities regarding WASH and EH inside and outside household
- BCC strategy indicating both men and women needs, rights and their role as a whole in EH
- Derive EH plans indicating WASH and EH needs rather than needs like school construction, waiting rooms which leads to disagreement
- Village activists and field teams should not raise hopes of the communities during their field visits
- Participation of both men and women is key towards improved EH plans development
- Encourage religious leaders, teachers and especially women religious leaders to highlight women rights and needs and their role in resolving those needs
- Reach women through cultural and formal communication channels i.e. access women through men communities. It is important to build rapport with male communities members at first and enter women communities member after getting male’s confidence
- Exposure visits
- PLA sessions and process shall be closely monitored by IRC staff at the final phase so that reconciliation shall be done accordingly
Annexure:

The framework and findings are attached with this report which depicts the information gathered at village and district level in FGDs and KIIIs.