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Gender Equality and Social Inclusion (GESI) Assessment for the CWISE Project in Khulna of Bangladesh

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Spectra Tulip, House # 10, Flat #102, Road # 5/1
Block # D, Niketan R/A, Gulshan, Dhaka-1207, BANGLADESH.
e-mail: devresonance.bd@gmail.com; Phone: +88 01731730455; +8804478014505
www.devresonance.com

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Core team of the research, DevResonance Ltd

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LIST OF ABBREVIATION AND ACRONYMS

ADB	Asian Development Bank
CDC	Community Development Cluster
CT	Community Toilet
CSO	Civil Society Organization
CWISE	City Wide Inclusive Sanitation Engagement
DPHE	Department of Public Health Engineering
FGD	Focused Group Discussion
FSM	Fecal Sludge Management
GAIM	Gender Analysis and Integration Matrix
GESI	Gender Equity and Social Inclusion
KCC	Khulna City Corporation
KCDO	Khulna Community Development Organization
KDA	Khulna Development Authority
KII	Key Informants Interview
KU	Khulna University
KUET	Khulna University of Engineering and Technology
KWASA	Khulna Water and Sanitation Authority
MoU	Memorandum of Understanding
MoWCA	Ministry of Women and Children Affairs
NGO	Non-government Organization
PT	Public Toilet
ST	School Toilet
SVC	Sanitation Value Chain
UN	United Nations
UNDP	United Nations Development Program
UPPR	Urban Partnership for Poverty Reduction

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EXECUTIVE SUMMARY

The study is titled Gender Equality and Social Inclusion (GESI) Assessment for the CWISE project in Bangladesh which is located in Khulna city. The broad objectives of the current assignment, as agreed under the terms of the contract offered by SNV Netherlands in Bangladesh to DevResonance, were adhered to. The objective of the study is to conduct an assessment to identify the current norms, practices and gaps to address Gender Equity and Social Inclusion (GESI) issues for increasing access and use of WaSH services for all, particularly in Khulna. The research team developed a framework for appropriate compilation of primary level qualitative data, compiled such data from secondary sources as exhaustively as possible, used those to provide insights into analysis pertaining to gender equality and social inclusion, and undertook assessment of these two issues.

Review of the policy, strategy and guidelines of different government and non-government agencies on sanitation reveals that these consider men and women only regarding gender in their documents. Regarding inclusion, the documents mention about hard core or extreme poor, people living in slums, low income settlements, and geographically hard to reach areas, and female headed households. Voice and participation of women, third gender, marginalized people in planning and design process of project and services is absent as current system and mechanism in government agencies do not have scope for this. There is a lack of orientation and training on gender and social inclusion related to sanitation among the staff in these agencies. However, there are evidences of commitment and enthusiasm at individual level in these agencies in the area of policy shift, recruitment, capacity building for inclusion of women, third gender, and marginalized people in sanitation.

Gender stereotype roles and norms play significant role in sanitation and hygiene behavior. It is found that women carry most of the day-to-day sanitation burden from latrine cleaning to children's sanitation needs. The women and girls are the main caregivers of children, disabled and elderly--they accompany them to the toilets. They also consider FSM (Fecal Sludge Management) to be men's work and allow male family members to speak on this topic. However, it is most often the women who bring up issues related to sanitation and overflowing sludge with their husbands. Men are usually found to be engaged in toilet maintenance and financing construction. Regarding sanitation value chain, men do not allow women to work on sludge as it is a man's job. It is also believed that this work demands a lot of physical strength which a woman usually doesn't have including the perception that they cannot get into the tank and go to the dumping station at night.

There are also stigma and security attached to this. Caretaker of a public toilet is considered one of low standard jobs to women and hides from the relatives and own family about the work. Harijan women were previously engaged as family assistance, currently their educated children dissuade them in engaging in the sanitation value chain (SVC). On the other hand, while Hrishi community (shoe repairer community) view cleaning toilets as being beneath them, few women are already involved in cleaning toilets in houses and commercial places and earning income.

The women and girls do not regularly use public toilets (PTs) because: they are dirty, have bad odor, are not located conveniently, men are often present near the entrance, caretakers are male, doors to female chambers are broken, there are no MHM facilities, entrance faces in the direction of men's urinals, there is poor lighting, western style facilities as they are unfamiliar with them and are more accustomed to pit latrines. They only use PTs during long journeys and emergencies.

There are no third gender CTs/PTs in Khulna. Hijra usually use women's chambers and MSM (Men having sex with men) use men's chambers at PTs. Person with disabilities face added disadvantages