



A women's dialogue group gathers to discuss how they have been socialized into subordinate gender roles in Juba, South Sudan. Photo credit: L. Nabie/IOM

Supporting Safe Sanitation and Preventing Gender-Based Violence in South Sudan

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South Sudan has long had some of the world's lowest development and health indicators. Less than 30 percent of South Sudanese primary school-aged children are actually in school. Maternal mortality rates are the fifth highest in the world, at 789 deaths per 100,000 live births. Then in 2013, civil war broke out, making the environment for development that much more difficult.

The struggles in South Sudan to improve its water, sanitation, and hygiene (WASH) mirror the challenges it faces on other fronts. Alfonso Cuevas, WASH coordinator for the UN's International Organization for Migration (IOM), says that water resources and sanitation services simply are not available nationwide. "Only 10 percent of the population has basic sanitation, and 61 percent of the population still practice

open defecation,” he says. If that wasn’t bad enough, women and girls are particularly vulnerable to violence when they visit latrines or go for open defecation, and when they collect water.

Joseph Amuda, USAID/South Sudan WASH program management specialist, puts it bluntly. “The state of WASH is so pathetic, you know this is not how human beings are supposed to be living.”

The situation is daunting, but USAID’s Integrated WASH Response and Prevention of Gender-Based Violence (GBV) Project is helping. The four-year, \$34.3 million project is working directly with communities to improve access to safe water and sanitation and raise knowledge around hygiene, sanitation, women’s leadership, and GBV prevention, thereby increasing community well-being.

The project, implemented by IOM, includes building new or repairing nonfunctional water points and distribution systems, as well as sanitation infrastructure for both households and public institutions such as health centers and schools. It promotes good hygiene and latrine adoption, providing WASH items such as jerry cans and handwashing containers, tools to dig latrines, and dignity kits for menstrual hygiene management, and encourages women’s leadership in water management and maintenance. What makes it different from other WASH projects is that it also makes clinical management of rape services available and raises awareness to prevent GBV.

Central to the project’s approach is strong community involvement at all stages. Community members are part of the team that decides where new boreholes and latrines will be located, and are trained in borehole and latrine maintenance. “The idea is to implement the project with the active participation of the people, to involve and engage the people in the whole process,” says Cuevas.

Improving the quality and management of boreholes, drilling new ones to increase proximity of improved water points to communities, and creating more access to safe sanitation can greatly enhance the security of women and children. Given the prevalence of GBV in South Sudan, particularly during times of conflict, it is essential that women and girls take the lead on these activities.

“They (women) should be the ones taking the key role in deciding where water points are to be located to ensure their safety,” says Amuda. The project encourages processes that take into consideration the concerns of women and vulnerable individuals while also empowering the voices of women in their communities.

Another way women’s voices are captured and amplified is through the community committees that are set up to manage the new WASH facilities. At least 50 percent of the members of each committee must be made up of women. But Amuda says that these women are not just silent, token members. “Women take key roles because of the awareness raising that has been created amongst women and men on the important association of women and water,” he says, explaining that women and girls are mainly responsible for fetching household water. Similarly, both men and women are trained in WASH infrastructure maintenance.

“When we talk about gender issues, we are not only talking about women, we are also bringing men into the equation; most perpetrators of GBV in South Sudan are men, and women are the victims. We can’t address GBV in South Sudan without targeting the men alongside the women,” explains Amuda.

One way the project is doing this is through a series of dialogues adapted from the International Rescue Committee approach called “Engaging Men through Accountable Practices.” The first part is a series of discussions, held over the course of eight weeks, with selected women in a community covering gender-related issues as those women experience them. In the second part, facilitators take the specific issues the women outlined and adapt a 16-week program for men in the community that responds to those issues.

Amuda says this approach is already showing results, which he and his colleagues heard about on a recent site visit. “Some women were telling us that even at the household level, their husbands are now ready to support and help them with domestic work, like taking their children to the clinic,” he says. “Before the dialogues, they would not want to support them in any domestic work. They are now able to think positively and start taking up some of the roles.”

Catherine Hingley, a GBV specialist with IOM, agrees that this pilot activity shows great promise, both for the community members and also for the local organizations running the trainings. “We’re proud of the kind of change that we’ve seen within the teams working on this and even within the communities,” she says. “Once the activity begins, this starts challenging the attitudes around harmful gender norms, which feeds into the wider WASH work.”

“The change must start with us, within our teams.”

The Integrated WASH-GBV project has encountered challenges of logistics, transport, and lack of locally available materials that are common in South Sudan. An additional challenge unique to WASH is a resistance to sharing latrines. Sharing latrines with in-laws or seeing a member of the opposite sex going to the latrine is considered culturally unacceptable. This is also an example of the deeply ingrained gender taboos the project confronts, even sometimes among South Sudanese staff who work on the project. Amuda concedes these challenges, but says that they are not a reason to give up. “There are also communities in the country that really want to see changes in bad cultural practices,” he says. “They listen. And they act. Once they are given the opportunity, they are able to do things pretty fast in the right direction.”

Consequently, 38 percent of the project’s female beneficiaries reported that their perception of safety when going to fetch water or using sanitation facilities has improved, mainly because the long walks to water points through bushes where they felt exposed to rape and other forms of violence have been reduced now that rehabilitated or newly drilled boreholes are closer to home.

“There are many good things that are being done,” Amuda says enthusiastically. “It’s not all really bleak in South Sudan.”

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