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U.S. Agency for International Development (USAID) Report to Congress on the Design and Implementation of Programs in Water, Sanitation, and Hygiene (WASH)

USAID submits this report on the design and implementation of WASH programs pursuant to Section 7019(e) of Division F of Public Law 116-6, the Department of State, Foreign Operations, and Related Programs Appropriations Act, 2019, which incorporates by reference the requirements of House Report 115-829:

The Committee notes that a lack of access to toilets, adequate sanitation, and hygiene products affects women and girls in particular and recommends USAID address this issue in the design of WASH programs. The Committee directs the USAID Administrator to submit a report, not later than 90 days after enactment of this Act, on how such issues are included in the design and implementation of WASH programs, including ensuring the availability of feminine hygiene products.

Sanitation and Hygiene: An Urgent Priority for Women and Girls

USAID recognizes that sanitation and hygiene have wide-ranging benefits for the lives of people around the world, and are highly cost-effective interventions. World Bank research shows an estimated \$5.50 return on every dollar invested in sanitation. Despite the potential for return on investment, access to these services remains a persistent and urgent challenge. Globally, one in three people lacks a hygienic toilet in his or her home, and more than 890 million people practice open defecation. Nearly one in five primary schools worldwide has no sanitation facility, and more than one in three primary schools globally has no hygiene services. The best available data indicate that 19 percent of health facilities in low- and middle-income countries lack sanitation, while 35 percent lack water and soap for handwashing. Poor access to sanitation and hygiene in homes, communities, schools, and health facilities results in losses to the global economy of approximately \$220 billion per year.

This global economic impact reflects effects on individuals, families, and communities. Thousands of children die each year from preventable diarrheal diseases because of poor sanitation, including the inadequate separation of human and animal fecal matter from human contact, and poor hygiene practices. Children also suffer interrupted, or insufficient, opportunities for education and engagement in productive labor when they contract neglected tropical diseases from polluted ground and surface water. Lack of strong government coordination, policies, and regulatory frameworks; insufficient and unreliable finance; and limited skilled staff at water and sanitation utilities exacerbate these challenges.

USAID recognizes that lack of access to safe sanitation facilities and sufficient water and supplies for hygiene, including for menstrual hygiene, disproportionately affect women and girls. Their unique needs for privacy can put them at risk of physical and sexual violence when they seek out sanitation facilities, especially at night. Female teachers and students suffer at schools without safe, private latrines that include sufficient hygiene facilities, supplies, and waste disposal for managing their menstrual hygiene. Female workers in both formal and informal labor face the same challenges. Poor sanitation has a domino effect: Ill health, absenteeism, the risk of an incomplete education or low-quality teaching, compromised livelihoods and productivity levels, and, ultimately, a compromised economy.

Women often do not have decision-making authority in their homes or communities, which prevents them from meeting their own needs for sanitation and hygiene. Women, men, girls, and boys lack accurate information about hygiene and menstruation, which can perpetuate harmful stereotypes, stigma, gender and cultural norms, and practices around menstruation. Lack of sanitation and hygiene in health facilities can contribute to infections such as sepsis (an important factor in maternal and newborn mortality), and to the spread of infectious diseases, such as cholera and Ebola. During humanitarian crises, women and girls generally face increased vulnerability to violence, exacerbated by a lack of access to sanitation and hygiene.

USAID's Strategic Investments in Sanitation

Sanitation continues to be a top priority for USAID, as reflected in the Water and Development Plan that supports the 2017 *U.S. Government Global Water Strategy*. Sanitation directly affects the quality of water and hygiene practices, which is why larger WASH programs integrate many sanitation-focused activities. In Fiscal Year (FY) 2017, USAID invested \$443 million in water, sanitation, and hygiene activities in 41 countries.

As a result, 3.2 million people gained access to improved sanitation, an increase of 7.2 percent from USAID's FY 2016 results; within these numbers, more than 1.5 million women and girls gained access to improved sanitation in 27 countries and the Sahel Region. Also in FY 2017, USAID funded 14 activities to improve menstrual-hygiene management (MHM) in nine countries in Africa and Asia. As a result of USAID assistance in FY 2017, 1.7 million women and girls gained access to improved water sources. These gains contributed to safety by reducing the need for women to walk long distances for water; improved health and reduced caregiving demands by mitigating common, water-related illnesses; and freed time for women to engage in productive work.

Also in FY 2017, USAID invested approximately \$336 million in humanitarian WASH programs in more than 40 countries. These activities included a focus on the distribution of "dignity kits" that contain menstrual-hygiene supplies and the rehabilitation of sanitation infrastructure. This funding not only protected women and girls from the immediate challenge of surviving instability or conflict, but also laid the foundation for greater resilience beyond crisis.

Strategic Approaches

Through a systematic, evidence-based approach that considers behavior-change communications, institutional development, and a commercial orientation, USAID continues to invest in sustained access to sanitation in both rural and urban areas. To build national capacity and support equitable services, our priorities include promoting private-sector engagement, diversifying financing and marketing options, expanding community coverage, and improving the disposal of fecal waste. Our goal remains to move people away from open defecation and urination toward sustainable, basic sanitation services available to each household, with an emphasis on poor and underserved communities, including women and girls.

Our hygiene activities continue to focus on women's empowerment, such as social- and behavior-change communication that includes not just teaching handwashing, but also changing gender and social norms. We also fund research into preferred hand- and menstrual-hygiene products to ensure our investments support supplies that are acceptable, affordable, and available. Our ongoing MHM interventions serve women and girls of all ages, both in school and out.

USAID also aims to increase women's roles in decision-making around sanitation and the management of water resources. Building off the approach noted in last year's report, the programs we fund incorporate the needs of women and girls into decisions around the targeting of activities supported by water, sanitation, and hygiene funds. This approach recognizes links not only to MHM, but also to gender-based violence, self-esteem, education and workforce opportunities, and other sanitation-related challenges specific to women and girls.

Examples of Activities – Sanitation and Hygiene

1. **WASH Partnership and Learning for Sustainability (WASHPaLS)**, a five-year \$15 million Task Order Contract is financing global actors and local organizations to conduct policy-relevant research in nine countries (Bangladesh, Cambodia, Ethiopia, Ghana, India, Kenya, Laos, Nepal and Zambia). For example, a small-grants program (\$1.5 million total) allows WASHPaLS to fund a collection of innovative ideas in behavior-change programming to improve hygiene. In addition, WASHPaLS has recently launched a \$950,000 activity on MHM at work, which will conduct research and implement a pilot learning activity to test the applicability of the findings in actual workplaces to inform USAID's future investments in MHM for women's economic empowerment. *Prime Implementing Partner:* Tetra Tech International Development.

2. The **Integrated Emergency WASH Response and Prevention of Gender-Based Violence (GBV) Program in South Sudan**, an investment of \$34.3 million, aims to increase access to safe, equitable, and adequate WASH services, and to prevent, and respond to, gender-based violence (GBV). Recognizing the high rates of GBV in South Sudan, and the links between GBV and the lack of safe, private latrines, this activity aims not only to provide first-time and improved access to sanitation, but also to mainstream best practices for preventing GBV into

WASH programs. The activity delivers social- and behavior-change trainings and messages on both hygiene and the prevention of GBV; trains WASH providers in the prevention of, and response to, GBV; and conducts WASH safety audits to determine ways to improve protection for women and adolescent girls. This activity complements USAID/South Sudan's Emergency Education Program through the promotion of general and menstrual hygiene, as well as the distribution of MHM kits, which help keep girls in school. In particular, the activity aims to increase a feeling of safety when women and girls go about their daily activities, such as collecting water and using the latrine. *Prime Implementing Partner:* International Organization for Migration

3. **The Women + Water Alliance** is a partnership between USAID and Gap, Inc., that is committed to improving and sustaining the health and well-being of women and communities touched by the apparel industry in India. The Alliance focuses on women's pivotal role in society, and their unique needs, while engaging both men and women. It draws on USAID's technical expertise, strong bilateral relationships, and programmatic investments at the community level, and on the experience of Gap, Inc., in implementing its life-skills training program—Personal Advancement and Career Enhancement (P.A.C.E.)—and sustainability efforts across its global supply-chain. To help advance women's autonomy, around 20,000 rural women currently participate in the P.A.C.E. program, a number expected to multiply tenfold in the next three years. To help accelerate women's access to sustainable WASH services and unlock WASH financing for households, Alliance partner water.org contributed to the release of a nationwide circular, or official national guide, from the Union Ministry of Drinking Water and Sanitation to District administrations, to promote private lending for water and sanitation projects. Lastly, in the past year the Alliance completed an assessment of national and international best practices on the stewardship and management of water, which will serve as a foundation to aggregate stakeholders to improve the management of community water resources in India. *Implementing Partners:* Gap, Inc.; Water.org; CARE; the Institute for Sustainable Communities; and the International Center for Research on Women.

Spotlight: MHM

USAID's approach to sanitation and hygiene recognizes that women and girls stand to benefit most from these services. One reason for this disproportionate benefit is menstruation. Correct information about menstruation is extremely scarce in many countries and communities among women and men, boys and girls. Gender norms, myths, stereotypes, and social taboos can prevent the inclusion of menstruation in school curricula, and girls often have no one from whom to request information, support, or supplies. For many women and girls, purchasing disposable menstrual supplies is cost-prohibitive, and the knowledge of how to make and clean reusable supplies is limited. Latrines often lack sufficient space to change and clean reusable products, or waste bins and disposal methods for disposable products, which causes unhygienic conditions and solid-waste pollution. Social, cultural, and gender norms, biases, and practices can prevent menstruating women and girls from gaining access to food, shelter, water, and other common goods; affect their ability to attend school or work; and compromise their dignity.

1. **Multi-Sectoral Approaches to MHM in Development:** USAID funds MHM activities through a multi-sectoral approach that links to life-skills development, water and sanitation, or economic-empowerment objectives. For example, the **CycleBeads App** is a digital platform that helps girls and women track their menstrual cycles. USAID partner, Georgetown University's Institute for Reproductive Health and Cycle Technologies, tested the app in Egypt, Ghana, India, Jordan, Kenya, Nigeria, and Rwanda, to improve its ability to address this unmet need; findings from this pilot showed strong initial results. In 2017, the **President's Malaria Initiative** provided funding in seven districts in Rwanda to provide 1,440 reusable pads for menstrual-hygiene management to seasonal workers who conduct indoor residual spraying (IRS), which helped minimize absenteeism during IRS campaigns and increased their reach.

2. **MHM in Humanitarian Crises:** USAID's Office of Foreign Disaster Assistance (OFDA) funds the distribution of hygiene and dignity kits, including MHM supplies, to women and girls in humanitarian crises, and the disposal of these supplies in camps for internally displaced persons. USAID/OFDA also collaborated with the International Rescue Committee and Columbia University to develop a toolkit on MHM in Emergencies, which now guides many of our activities. In FY 2018, USAID/OFDA furthered this partnership by funding a new project to build evidence on best practices including through field-level assessments, and provide specific technical guidance to support the disposal and laundering of MHM supplies.

Looking Forward

USAID is working toward fulfilling the ambitious targets established in the Water and Development Plan, including by helping to provide at least eight million people with access to sanitation by 2022. To have the greatest impact with limited taxpayer dollars, USAID seeks to increase its focus on the governance of financing for water and sanitation in our partner countries as part of the Journey to Self-Reliance. This includes supporting governments to develop strong policies and regulatory frameworks, secure financing for improved utilities, and build a cadre of professionals in water and sanitation to help ensure the sound management and maintenance of infrastructure.

As with our focus on sanitation, our efforts to improve governance and finance will emphasize women. For example, we will conduct gender-equality training with utilities and communities, and support the development of institutional policies and plans to empower women and improve equality between them and men. Similarly, USAID will fund capacity-building and women's education to help build a trained sanitation workforce. The new Women's Global Development and Prosperity Initiative (W-GDP), spearheaded by Advisor to the President Ivanka Trump, which represents the joint efforts of ten Federal Departments and Agencies (including USAID), is a potential tool for advancing this objective.

As reflected in forthcoming implementation guidance on the Water and Development Plan, empowerment of women and girls is a cross-cutting priority of USAID's investments in sanitation and hygiene. Improved access to sanitation, hygiene, and menstrual-hygiene services,

supplies, and information contribute directly to resilience at the household, community, and national levels, and, ultimately, to advancements along the Journey to Self-Reliance.