Revising the Equitable Access Score-card Hygiene, gender, and institutional settings

ON WATER AND WEALTH

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Introduction

Focus area: Hygiene, gender and institutional settings

The proposed amendments seek to:

- 1. Include all types of hygiene practices and distinguishing hygiene practices from sanitation
- 2. Clarify menstrual hygiene dimensions, roles and responsibilities
- 3. Include a gender perspective to eliminate related inequalities in the WASH sector

1. Include all types of hygiene practices and distinguish them from sanitation

Complemented in the glossary:

Sanitation. System for the collection, transport, treatment and disposal or reuse of human excreta and associated hygiene-whether through [...]. + notion of availability of sanitation more clear now.

Hygiene. Conditions and practices that help to maintain health and prevent the spread of diseases. Facilities to meet hygiene requirements must be available wherever there are toilets or latrines, where water is stored and where food is prepared and served.

Modified under the Country/Region profile quantitative questions:

Before	After
% of population without access to wastewater collection	% of population without access to sanitation* (level of wastewater collection and wastewater treatment)
% of population without access to wastewater treatment (any level)	% of population without access to hygiene* (facilities, products, behaviour promotion, and educational activities)

2. Clarify menstrual hygiene dimensions, roles and responsibilities (1)

New definitions proposed in the glossary:



Menstrual Hygiene Management (MMH): It refers to use of a clean menstrual management material to absorb or collect menstrual blood, that can be changed in privacy as often as necessary for the duration of a menstrual period, using soap and water for washing the body as required, and having access to safe and convenient facilities to dispose of used menstrual management materials. Women and adolescent girls understand the basic facts linked to the menstrual cycle and how to manage it with dignity and without discomfort of fear.

Menstrual Health and Hygiene (MHH): It compasses both MHM and the broader systemic factors that link menstruation with health, well-being, gender equality, education, equity, empowerment, and rights. Accurate and timely knowledge, available, safe, and affordable materials, informed and trained professionals, referral and access to health services, sanitation and washing facilities, positive social norms, safe and hygienic disposal and advocacy and policy.

2. Clarify menstrual hygiene dimensions, roles and responsibilities (2)

Proposed revisions to qualitative questions

Area of the Scorecard	Questions:	Before:	After:
Area 1.1 Strategic framework for achieving equitable access	1.1.7	Not included	The WASH sector's plans include measures to ensure equitable access to hygiene (domestic and personal) for all through hygiene roadmaps, guidelines for hygienic-sanitary measures, promotion of hygiene behavior, trained professionals, availability of handwashing facilities and for menstrual hygiene management, and hygiene products (e.g.: soap, menstrual pads/solutions, toilet paper)
All areas of section 3 on Ensuring Access for Vulnerable and Marginalized Groups	3.3.4, 3.4.4,3.5.4, 3.6.4 etc to 3.13.4	Health facilities/Educational facilities/ Prisons etc have relevant complaint mechanisms in place	Health facilities/Educational facilities/ Prisons have effective complaint mechanisms in place, and coordination support is carried out with other institutions and actors (e.g. regulatory and control bodies, municipalities, service providers) in particular with regards to Menstrual Health and Hygiene

3. Include a gender perspective to eliminate related inequalities in the WASH sector (1)

New definitions proposed in the glossary:

Gender diversity – beyond male and female, including transgender, non-binary, genderqueer, and gender-nonconforming individuals

Gender equality – in alignment with the human rights principle of equality and non-discrimination (Annex I)

Disaggregated data – numbers, location, and other information about patterns and causes of discrimination (gender, religion, ethnic group, age, income, geography, etc.)

Quantitative questions on vulnerable and marginalized group at the beginning of Section 3- complemented

Before	After
% of persons with access to safe drinking water in the country/region/city.	% of persons with access to safe drinking water in the country/region/city. If you have disaggregated data* on gender diversity* available, please indicate it
% of persons with access to safe drinking water by the poorest fifth of the population.	% of persons with access to safe drinking water by the poorest fifth of the population. If you have disaggregated data on gender diversity available, please indicate it
% of persons with access to sanitation in the country/region/city.	% of persons with access to sanitation in the country/region/city. If you have disaggregated data on gender diversity available, please indicate it
% of persons with access to sanitation by the poorest fifth of the population.	% of persons with access to sanitation by the poorest fifth of the population. If you have disaggregated data on gender diversity available, please indicate it
% of water and sanitation facilities open to the public that are accessible to people with disabilities.	% of water and sanitation facilities open to the public that are accessible to people with disabilities. If you have disaggregated data on gender diversity available, please indicate it

3. Include a gender perspective to eliminate their inequalities in the WASH sector (2) Proposed revisions to qualitative questions						
Area of the Score- Card	Ques tion	Before	Proposed changes			
Area 3.1 Public policies to address the needs of vulnerable and marginalized	3.1.2	Relevant policies in other sectors (e.g. social inclusion, social protection, education, health, prisons, housing) include their role in ensuring access to water and sanitation by vulnerable and marginalized groups	Relevant policies in other sectors (e.g. social inclusion, social protection, gender, education, health, prisons, housing, climate change) include their role in ensuring access to safe drinking water, sanitation and hygiene by vulnerable and marginalized groups			
	3.1.5	Integrated approaches (involving different administrations) have been adopted to	Integrated approaches (involving different administrations) have been adopted to support the delivery of safe drinking water sanitation and			

ave been tion and support the delivery of water and sanitation hygiene services for vulnerable and marginalized groups and eliminate groups services for vulnerable and marginalized their inequalities progressively applying a gender equality perspective

groups 3.2.1 All areas of There is data on levels of access to safe There is data on levels of access to safe drinking water, sanitation and 3.3.1 section 3 on hygiene by persons with special physical needs/.../... If you have drinking water and sanitation by persons with 3.4.1 special physical needs/ prisoners/.../... **Ensuring Access** disaggregated data for this category of vulnerable and marginalized group for Vulnerable and 3.5.1 available, please indicate it. Marginalized Etc..

Groups 3.3.5 Health facilities have separate toilets for Health care facilities have water fountains (or other source of safe Area 3.3 Users of males and females as well as adequate drinking water), separate and sufficient* toilets for males and females, health facilities, facilities for menstrual hygiene management adequate facilities for menstrual hygiene management*, functional

handwashing facilities, and hygiene products (soap, menstrual

pads/solutions, toilet paper)

including

healthcare workers

Thank you for your attention!



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