CASE STUDY

Training that Changes Things

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PROGRAM OVERVIEW
Community training is a core part of CARE International in Vanuatu’s WASH program. Participatory Hygiene and Sanitation Transformation and Drinking Water Safety and Security Planning workshops have been carried out in 17 communities in Aniwa, Erromango and Tanna to ensure that improvements to people’s water security, sanitation and hygiene are changes that last. Because CARE focuses on women and girls as key agents for change, our training also includes specific gender and social inclusion components that are helping to change the way that communities see women and other marginalised groups – when it comes to WASH, and the rest of life too.

Gender and Social Inclusion in CARE’s training

When it comes to changing habits, taking the time to think about what you’ve always done and why is an important first step. That’s exactly where CARE’s two community-based training activities, Participatory Hygiene and Sanitation Transformation (PHAST) and Drinking Water Safety and Security Planning (DWSSP) start – and the results are often eye opening for the people who take part.

“PHAST is a new language that the CARE trainers translated for us,” says George Nawry, the chairman of the PHAST Committee in the small community of Ikwarmanu in eastern Tanna. “Before the training, my life was like a straight road – I only saw what was in front of me. But now we can cope with anything.”

Often, one of the biggest discoveries for communities who join CARE’s training is that while water, sanitation and hygiene (WASH) affect everyone, not everyone is affected in the same way. In Vanuatu, women are usually responsible for household duties, including child care, washing, cooking and gardening, and so need to use more water than men. Women’s water use also impacts more people – for instance, safe water hygiene practices of women will keep families healthier, while poor hygiene practices of women are more likely to make families ill because they are preparing food and caring for children and the
elderly. Women typically collect two-thirds of a household’s water\(^1\). And yet, women have limited access to resources and are often marginalised from decision making. This gap can cause serious problems for communities, but the implications of excluding women and other community members, like those living with disability, are rarely challenged or even thought about in everyday community life.

For this reason, tackling inequality in water – and life in general – is a key part of CARE’s PHAST and DWSSP training. Up to a quarter of each training is dedicated to exploring the differences between the jobs that different members in the community, such as women, men and people living with typically have, how that impacts their water needs and usage, and whether any changes should be considered within households and the community.

“We find that the sessions on gender really get people talking,” says Leimet Nok, CARE’s Senior PHAST Officer. “The men are usually surprised to see the long list of jobs that women do every day. Often it is the men who say that things have to change – the women already know!”

“Women are more involved in hygiene activities like preparing food, so we were more likely to pass sickness on,” says Roline, a woman who participated in PHAST training in Ieneula in Tanna. “Before, we weren’t washing our hands or cleaning food before preparing it – it was like we were adding sickness to our bodies. People were going to the clinic every day, every week, but now it’s a lot less. We asked the clinic why we weren’t sick so much, and they said, ‘Because of the hygiene training!’ Now we are faithfully washing hands after the toilet and before eating.”

Each workshop aims to have equal numbers of male and female participants, and after the workshop, the community chooses representatives to form a PHAST and a Water Safety Committee. CARE encourages communities to make these committees gender-balanced and provides them with training on gender-sensitive community hygiene promotion and how to conduct sanitation and hygiene assessments, including a gender and social inclusion analysis. Beyond the community-level, CARE is also working to spread the word about gender and social inclusion throughout the WASH sector, and has provided inclusion-focused training to other NGOs and provincial government staff.

CARE’s hygiene promotion and water safety training is helping to improve people’s health by increasing communities’ knowledge and changing their sanitation and hygiene practices, but the impact of this training extends even further. The way that women and other marginalised members of the community see themselves, and are seen by others, is changing – and that changes everything.

“Before we saw men as higher than women, but now we see them as equal. We are sharing responsibilities at home because the gender division before meant that women had lots of work to do at home, and we men hadn’t realised it before.”

\(^1\) UNICEF, 2017