# WATER, WOMEN AND DISABILITY STUDY

### **ACCESS TO SANITATION**

#### SUMMARY

The Water, Women and Disability study\* found that in Vanuatu's SANMA and TORBA Provinces there was low satisfaction with sanitation facilities recorded by both those with and without disabilities, with only half of all households having access to improved sanitation facilities (an improved sanitation facility is defined as one that hygienically separates human excreta from human contact). The distance and inaccessibility of latrines has a large impact on people with disabilities and those with incontinence issues, leading to alternative undignified solutions being found and limitations on individuals ability to participate in daily life occurring regularly.

#### **KEY FINDINGS**

## 55% of all households surveyed had access to an improved sanitation facility

This figure did not change depending on whether there was a person within the household with a disability or not. Households in rural areas had lower access to improved facilities with the study finding 73% improved in rural settings and 91% in the urban setting of Luganville

Rural households were eight times more likely to report having a ventilation improved pit latrine or pit latrine with slab compared with households in urban areas.

14% OF PEOPLE WITH DISABILITIES DID NOT USE THE SAME SANITATION FACILITY AS OTHER MEMBERS OF THEIR HOUSEHOLD, WITH 38% REQUIRING ASSISTANCE TO USE THE TOILET

### 32% of people with disabilities found it difficult to use the toilet without coming into contact with faeces or urine.

This was more likely for older people, and people with mobility and self-care limitations.

Participants with disabilities cited the distance to the latrine, unsafe route to reach it, lack of lighting and privacy as major barriers.

In addition, older people and people with mobility limitations said that a lack of support structures inside the toilet made it difficult or impossible to use. Inaccessible latrines are a more significant challenge for people who experience incontinence, as they need to reach a toilet quickly. This indignity affects a person's ability to leave home and participate fully in daily life.

THE STUDY FOUND THAT **BARRIERS CAUSED BY INACCESSIBLE LATRINES ARE COMPOUNDED BY THE LACK OF AFFORDABLE INCONTINENCE PRODUCTS ON THE MARKET**, SUCH AS BED PANS AND ADULT DIAPERS, AND INFORMATION ABOUT MANAGEMENT STRATEGIES. WITHOUT BEDPANS OR COMMODES, PARTICIPANTS WHO ARE UNABLE TO SIT UNAIDED OUT OF BED AND EXPERIENCE INCONTINENCE USE UNCOVERED BUCKET LATRINES, WHICH ARE PLACED NEXT TO THEIR BEDS.

> People without disabilities reported their satisfaction with their sanitation situation as 6/10 compared to people with disabilities who reported their satisfaction score to be 4.9/10

Maintenance of personal hygiene was explored during the study. Not having access to soap, not being able to bathe as frequently as desired or required to prevent contamination, and carers' feeling under equipped to provide personal hygiene support were all identified in the study findings as issues faced by people with disabilities, people who experience incontinence, women who menstruate and, in particular, people with disabilities who menstruate or experience incontinence.

\* The Water, Women and Disability study findings on disability prevalence are based on data collected from 56,402 individuals across SANMA and TORBA provinces in Vanuatu, from 11,446 households. In addition, a case-control study of 1516 participants was also carried out. This means a sub-sample of survey participants identified as having a disability age 5+ and an equal number of people without disabilities were examined more closely to assess differences in WASH access and experiences about a range of topics such as education, menstrual hygiene and incontinence explored by the study.

