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Also, many WASH specialists from across the organization participated in the consultation, writing, and review required to develop this document. The input of each and every person was invaluable in the creation of this guide, and it is our collective hope that this guide contributes significantly in developing and implementing more GESI-transformative WASH programs.

World Vision is a Christian humanitarian organization dedicated to working with children, families, and their communities worldwide to reach their full potential by tackling the causes of poverty and injustice. We serve all people, regardless of religion, race, ethnicity, or gender.
About this Reference Guide ........................................ 4
List of Acronyms .................................................. 4
Welcome ................................................................... 6
What is GESI? ....................................................... 6
Why is GESI Important for WASH? ....................... 7
Evidence Summary ................................................ 8
Gender Equality in the Christian Faith .................... 9
Disability Inclusion in the Bible ......................... 10
GESI Theory of Change ........................................ 11
GESI Domains .................................................. 13
The Socio-ecological Model ................................. 14
Intersectionality ..................................................... 14
The GESI Continuum ............................................. 15
Applying a Do-No-Harm Lens ............................... 16
GESI Lens in WASH ................................................. 17
GESI Analysis for WASH ........................................ 21
WASH Program Design ......................................... 25
WASH Program Implementation,
Monitoring and Evaluation .................................. 28
GESI Integration In WASH Program Monitoring .... 30
GESI Integration in WASH Program Evaluation and Reporting 31
Staffing GESI-transformative WASH Programs ........ 33
Promising Practices ...................................................... 35
WASH in Schools ............................................... 35
Disability Inclusive WASH ................................. 35
WASH in Communities ......................................... 36
Conclusion ............................................................. 36
Annexes ................................................................. 37
Glossary of Terms .................................................. 38
Sources for Further Guidance ............................... 40
About this Reference Guide

Water, sanitation, and hygiene (WASH) programs will not achieve World Vision’s mission or the Sustainable Development Goals if we exclude the most vulnerable. WASH approaches need to be informed by World Vision’s Gender Equality and Social Inclusion (GESI) approaches to ensure excluded groups can participate in WASH decision-making structures and benefit equitably from WASH-related development interventions.

World Vision’s GESI approach actively strives to examine, question, and change harmful social norms and power imbalances as a means of reaching gender equality and social inclusion objectives in any given context and technical program area. GESI is integral to achieving World Vision’s “Our Promise” global strategy and child well-being objectives. GESI approaches typically tackle access, decision-making, participation, systems, and well-being.¹

Applying GESI principles to WASH work aligns to World Vision’s Core Values, especially: “We value people. We regard all people as created and loved by God. We give priority to people before money, structure, systems, and other institutional machinery. We act in ways that respect dignity, uniqueness, and intrinsic worth of every person - the poor, the donors, our staff and their families, boards, and volunteers. We celebrate the richness of diversity in human personality, culture and contribution.”

This reference guide is not exhaustive and we encourage each field office to innovate around GESI within WASH and to share case studies of promising and best practices with the WASH and GESI teams for dissemination and learning.


LIST OF ACRONYMS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
</tr>
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<tbody>
<tr>
<td>CRPD</td>
<td>Convention on the Rights of Persons with Disabilities</td>
</tr>
<tr>
<td>CEDAW</td>
<td>The Convention on the Elimination of all Forms of Discrimination Against Women</td>
</tr>
<tr>
<td>DME</td>
<td>Design, Monitoring, and Evaluation</td>
</tr>
<tr>
<td>GESI</td>
<td>Gender Equality and Social Inclusion</td>
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<tr>
<td>JMP</td>
<td>Joint Monitoring Programme</td>
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<tr>
<td>MHM</td>
<td>Menstrual Hygiene Management</td>
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<tr>
<td>MVC</td>
<td>Most Vulnerable Children</td>
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<tr>
<td>NCG</td>
<td>Nurturing Care Group</td>
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<tr>
<td>NGOs</td>
<td>Nongovernmental Organizations</td>
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<tr>
<td>SDG</td>
<td>Sustainable Development Goal</td>
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<tr>
<td>UNICEF</td>
<td>The United Nations Children’s Fund</td>
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<tr>
<td>WASH</td>
<td>Water, Sanitation, and Hygiene</td>
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<td>WHO</td>
<td>World Health Organization</td>
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The Purpose of this Reference Guide

This reference guide is one of a series focused on applying the GESI Approach and Theory of Change and the accompanying Toolkit for Integrating GESI in Design, Monitoring and Evaluation to different technical areas. This guide informs with illustrative examples on how to design, implement, monitor, and evaluate a WASH project or program to address GESI. Given the systematic and structural inequalities and exclusion that continue to exist in many parts of the world, this reference guide is designed to help WASH practitioners implement GESI-transformative WASH programs by supporting change across all five GESI domains – access, decision-making, participation, systems, and well-being (see Figures 1 and 2).

Who Can Use this Reference Guide

Both individual technical programs (TPs), National Offices (NOs), and organizations can use this guide to apply a GESI lens in all stages of WASH program design, implementation, monitoring, and evaluation. This includes World Vision staff across different business areas such as proposal/business development; monitoring, evaluation, and research; program management and staffing; and quality improvement. The guideline may also be a useful resource for implementing partners and government stakeholders as they collaborate with World Vision on integrating gender equality and social inclusion in WASH.

The Structure of this Reference Guide

This guide uses illustrative examples on how to apply a GESI lens in design, implementation, monitoring, and evaluation of WASH projects or programs. This reference guide covers the following topics:

1. Introduction
2. World Vision’s GESI Theory of Change
3. Applying a GESI Lens in WASH
4. Conducting a GESI Analysis for WASH
5. Integrating GESI in WASH Program Design
6. Integrating GESI in WASH Program Implementation, Monitoring, and Evaluation
7. GESI and WASH Promising Practices
8. Conclusion
9. Glossary of Term
This section discusses the definition of GESI and why GESI is important in WASH. This is followed by a discussion of GESI Approach and Theory of Change, together with GESI concepts of intersectionality, the GESI continuum and the socio-ecological model. Finally, the section discusses how to apply a do-no-harm lens in WASH.

**WHAT IS GESI?**

GESI stands for gender equality and social inclusion. This is part of Strategic Priority 6 within World Vision’s Our Promise strategy for improved well-being.

Gender equality is the state or condition that affords women and girls and men and boys equal enjoyment of human rights, socially valued goods, opportunities, and resources. It includes expanding freedoms and voice, improving power dynamics and relations, transforming gender roles, and enhancing overall quality of life so that males and females achieve their full potential.

Social inclusion seeks to address inequality and/or exclusion of vulnerable populations by improving terms of participation in society and enhancing opportunities and access to resources, giving voice and respect for human rights. It seeks to promote empowerment and advance peaceful and inclusive societies and institutions. For more definitions of GESI concepts, please refer to Glossary of Terms (Annex 1)

World Vision considers GESI as a *multifaceted process of transformation* that:

- Promotes equal and inclusive access, decision-making, participation, and well-being of the most vulnerable.
- Transforms systems, social norms, and relations to enable the most vulnerable to participate in and benefit equally from development interventions.
- Builds individual and collective agency, resilience, and action.
- Promotes the empowerment and well-being of vulnerable children, adolescent girls and boys, their families, and communities.

Achieving GESI transformation in WASH involves creating enabling environments for everyone to engage in and benefit equally from WASH interventions at individual, household, community, and societal levels so that all persons can enjoy life in its fullness.
WHY IS GESI IMPORTANT FOR WASH?

World Vision’s Global WASH Program aims to improve child well-being, health, nutrition, and education outcomes through access to sustainable and safely managed WASH services. Driven by the vision of transformative WASH for child well-being, and grounded in the values of people, accountability, and leadership, World Vision WASH is committed to 1) accelerating universal and equitable access to WASH services to contribute to SDG6, 2) focusing on the most vulnerable people, especially in fragile contexts, and 3) demonstrating sustainable impact.

The growing recognition of the central role of WASH for all aspects of human development has been stated at the highest levels. Access to WASH is required for the realization of other human rights, such as the right to adequate housing, the right to the highest attainable standard of health, and the right to life. Without adopting a holistic approach to WASH that includes GESI, World Vision will not reach the most underserved population segments and achieve its desired impact.

World Vision needs to apply a GESI-transformative approach to WASH because women and girls, persons with disabilities, and people from marginalized or excluded groups are among those who have less access to safe WASH, and are disproportionately affected by limited or lack of WASH access. Furthermore, harmful social norms often limit the ability of women and girls to participate in decision-making related to WASH.

The lack of GESI-responsive and adequate water and gender-sensitive sanitation and hygiene services increases the risk of harassment, violence, injury, and illness, among other issues. Further, the lack of accessible water, toilets, and hygiene facilities is a major challenge for the elderly and people with disabilities, who may have difficulties traveling long distances or using toilets without assistive devices.

Similarly, indigenous peoples and ethnic minorities tend to benefit less from national development opportunities, including WASH services, which perpetuates inequalities. There are also social, cultural and political barriers that exclude indigenous peoples, and the marginalization of indigenous peoples is worsened by their lack of representation at higher political levels.

A lack of informed participation by women, persons with disabilities, and other excluded groups often results in WASH services that are inappropriate, inaccessible, and unaffordable. Omitting GESI-related issues in water governance undermines the effectiveness of initiatives, reduces efficiency through missed opportunities, and can limit trust and engagement with the community as a whole. However, when vulnerable groups (including women, persons with disabilities, and other marginalized or excluded groups – see glossary for full definition) participate in decision-making on WASH services, their rights to water and sanitation are more likely to be fulfilled through services that are accessible, safe, and affordable.

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3 A December 2015 UN General Assembly resolution, defined water and sanitation as two separate rights for the first time, as well as in the Sustainable Development Goals (SDGs), which include the ambitious aim of universal access to improved sanitation by 2030, with targets that include the elimination of Open Defecation. United Nations (2018). Sustainable Development Goal 6, Synthesis Report on Water and Sanitation.
5 Fleifel et al. (2019). Gender Specific Vulnerabilities to Water insecurity.
7 Jansz and Wilbur (2013). Women and WASH. Briefing note.
In summary, GESI-transformative approaches to WASH are required to achieve universal services coverage, which is a core part of Sustainable Development Goal 6 – a principle that is also fully embedded in the World Vision WASH Core Project Model. Much progress has been made in WASH over the past few decades, but we will never achieve this final goal of universal services coverage without adopting a holistic approach to WASH that includes GESI. World Vision has also developed a GESI and Faith and Development reference guide that focuses on the need to promote the well-being of the most vulnerable children and adults.\[12\]

EVIDENCE SUMMARY

In Sub-Saharan Africa, women and girls endure physical strain, carrying water containers on their heads, hips or backs for an average of 5 kilometers each day, spending 40 billion hours per year on water collection.

Women and girls are responsible for water collection in 8 out of 10 households with water off premise.

The inclusion of indigenous peoples' perspectives in water management, despite its challenges, has seen important progress recently. Water planning exercises in some countries strive to include indigenous views, new methodological tools are being developed and evaluated, and guidelines and “good practices” are being produced based on the experience.

Simple hygiene practices during antenatal care, labor, and birth can reduce the risk of infections, sepsis, and death for infants and mothers by up to 25%. A study in Nepal found that handwashing by birth attendants and mothers increased newborn survival rates by 44%.

When women participate in decision-making on WASH services, their rights to water and sanitation are more likely to be fulfilled through services that are accessible, safe and affordable.

Children with disabilities report trying to reduce their consumption of water to minimize the need to go to the toilet with potentially harmful implications.

Children with disabilities are less likely to benefit from WASH in school programs as only 50% of children with disabilities attend school globally.

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12 Refer to World Vision’s GESI and Faith Reference Guide.
GENDER EQUALITY IN THE CHRISTIAN FAITH

As a Christian organization, it is imperative to explore what the Bible—especially the life of Christ—models and teaches about gender equality. At World Vision, we believe the Bible provides a foundation for gender equality, embedded into human design from the first story of creation. We also believe that throughout His life, Jesus challenged cultural and social norms that excluded or suppressed women, setting a standard for Christians to follow.

God originally created all of humanity—both male and female—with the same value and dignity. The Bible says that in the beginning of creation, “So God created mankind in his own image, in the image of God he created them; male and female he created them. God blessed them and said to them, ‘Be fruitful and increase in number; fill the earth and subdue it. Rule over the fish in the sea and the birds in the sky and over every living creature that moves on the ground’” (Genesis 1:27-28, NIV). God created both men and women in God’s image, and He commissioned both males and females to be stewards, or caretakers, of God’s creation.

However, sin led to a disordering or distortion of God’s original design for creation (Genesis 3:16). The introduction of sin into relationships led humans to create systems and power dynamics that favor some groups of people over others. This resulted in gender relationships characterized by abuse, violence, inequality, exclusion, and discrimination. Even today, women and girls are disproportionately impacted by practices such as early marriage, spousal abuse, and exclusion from education and economic opportunities. This brokenness prevents both males and females from reaching their full potential (Genesis 3).

Jesus, more than any other figure in the Bible, elevated the status of women and consistently showed consideration and respect for them. Below are just three examples from the life of Christ that demonstrate how He valued, included, and affirmed women.

- The Samaritan woman at the well (John 4): There are several reasons this story is transformative, including the fact that Jesus speaks directly to a woman from a people group (Samaritans) that Jewish people typically ignored, and that Jesus reveals to her that He is the Messiah. This effectively mobilizes her as a witness to the gospel, though women in that day were not considered credible witnesses. At the end of the story, her powerful testimony leads many to follow Jesus.

- The woman with the issue of blood (Luke 8:43-48): In this famous story, Jesus is touched by a woman who has been bleeding for 12 years—which was scandalous by Jewish religious standards of the day. Not only did a lowly woman touch a respected rabbi, her bleeding rendered her unclean, which meant she was to keep her distance from people. Jesus contradicted both of these norms by speaking to her kindly, affirming her faith, and healing her.

- Mary at the feet of Jesus (Luke 10:38-42): In this story, Mary chooses to sit at the feet of Jesus and listen to His teachings like a disciple. This was not the place of a woman in Jewish culture at the time, but Jesus affirms her choice and says she is doing the right thing.

Paul establishes in Galatians the truth that, in Christ, the things that divide us—including gender, socioeconomic status, and cultural hierarchies—are abolished. In God’s kingdom, all people are redeemed and empowered to live with equity and dignity (Galatians 3:28). Paul considered many women to be partners in building the Church, including Priscilla (Romans 16:3, Acts 18:2), Lydia (Acts 16:14), Phoebe (Rom 16:2), and Nympha (Col 4:15).

World Vision’s work for gender equality and social inclusion aligns with the example of Jesus, who regularly challenged cultural and religious norms in His mission to liberate all people to live life in all its fullness. We seek to follow Christ in this mission and believe we emulate the heart of God when we validate the inherent dignity, value, and equality of all people.
DISABILITY INCLUSION IN THE BIBLE

The Bible is extensive, and yet if one were to summarize the message of the entire Bible from Genesis to Revelation, it would be this: God loves people. This includes persons with impairments. In fact, the Scriptures say a great deal about the dignity of all human beings, and give God’s followers careful instructions for how they are to treat those living with a disability. Perhaps the most powerful statement in Scripture is not a command, but rather the example of Jesus, who loved those with physical, psychosocial, and intellectual impairments.

God created people in His image. From the start, the Bible tells us that God made human beings “in his own image” (Genesis 1:27). This means people are made to look a lot like God, to reflect His perfect character—things like His love, His goodness, and His compassion. As God’s image-bearers, our task is to demonstrate to the world what God is like. This is true of all people, regardless of gender, ethnicity, age, impairment, or any other social factor. To be human is to be made in God’s image, and in that there is tremendous dignity and value that cannot be taken away and should never be minimized.

God instructed His people to treat persons with disability justly. In the laws that God gave to His people in the Old Testament, He included instructions that reveal His great love and concern for people living with impairments. For example, Leviticus 19:14 says, “You shall not curse the deaf or put a stumbling block before the blind, but you shall fear your God: I am the LORD.” Deuteronomy 27:18 states, “Cursed be anyone who misleads a blind man on the road.” What these verses tell us is that God is concerned about persons with disability and expects His people to share that concern. To harm or fail to demonstrate concern for persons with disability disregards God’s concern.

Jesus demonstrated God’s love for persons with disability. Jesus Himself once said, “Whoever has seen me has seen the Father” (John 14:9), so if we want to understand God’s heart toward people with disabilities, we should look to Jesus’ own ministry. Knowing what we do about God’s love for the world, it should come as no surprise to find the Gospels are filled with stories that highlight Jesus’ compassion for people with impairments.

Jesus’ disciples once asked Him about a man born blind: “Rabbi, who sinned, this man or his parents that he was born blind?” (John 9:2). Jesus’ answer shattered their expectations. He said that God had allowed the man to be blind so that God’s works might be put on display for everyone to see (verse 3). Jesus loved the man and even healed him. This scenario contradicts the myth that disability is brought about because of personal sin, family sin, or a curse of some kind. Instead, it reveals the value and dignity of this man and how God’s desire was for him to be welcomed into society and friendship with others.

Another time, Jesus spoke to the religious leaders of His day and told them they are to invite people with disabilities into their houses and to their tables (Luke 14:12–14). In that culture, like most today, to invite someone to eat at your table was a sign of acceptance and friendship. Following Jesus and obeying Him means welcoming and fully including people with impairments, just as you would your closest friends.

God created all people to live with dignity and hope for the future, and He commands those who love Him to reject stigmas surrounding disability. God’s desire is that we reflect His good heart by seeking justice for and inclusion of those who are vulnerable. This means we need to understand and address the variety attitudinal, institutional, and environmental barriers persons with disability face.
WORLD VISION’S
GESI Theory of Change
World Vision’s GESI Theory of Change highlights the relationship between the five GESI domains of access, decision-making, participation, system, and well-being. These domains are required to achieve gender equality and social inclusion for all.

FIGURE 1: WORLD VISION’S GESI THEORY OF CHANGE

**IF**
Women and girls, men and boys, people with disabilities and other vulnerable populations have equal access, decision-making and participation at individual, household, community and society levels;

*Systems* are equal, fair and inclusive at individual, household, community and society levels; and

The most vulnerable have enhanced *well-being*;

**THEN**
Individuals are empowered to achieve agency, voice and full potential;
Households have equity, fairness, shared responsibility and balance relations;
Communities engage in collective action, mobilization and resilience; and
Societies establish transformational systems change;

**THUS**
Vulnerable children, families and communities experience life in its fullness.

For more information on these GESI domains please see: *Gender Equality and Social Inclusion: the World Vision approach and theory of change.*
We use these domains in this guide to help teams adopt a GESI lens in designing and implementing their GESI-transformative WASH programs. (Figure 2).

**FIGURE 2: GESI DOMAINS**

**ACCESS**
The ability to access, use, and/or own assets, resources, opportunities, services, benefits, and infrastructure.

**DECISION-MAKING**
The ability to make decisions free of coercion at individual, family, community, and societal levels. This can include control over assets and ability to make decisions in leadership.

**PARTICIPATION**
The ability to participate in or engage in societal affairs and systems of power that influence and determine development, life activities, and outcomes.

**SYSTEMS**
The availability of equal and inclusive systems that promote equity, account for the different needs of vulnerable populations, and create enabling environments for their engagement.

**WELL-BEING**
The sense of worth, capability status, confidence, dignity, safety, health, and overall physical, emotional, psychological, and spiritual well-being. This includes living free from gender-based violence, HIV, and all forms of stigma and discrimination.

It is important to reflect on how we addresses all five GESI domains to ensure our programs are GESI-responsive, taking into account of differences in needs, opportunities and experiences of women, men, girls, boys, persons with disabilities, ethnic minorities, internally displaced persons (IDPs), and other vulnerable groups, and incorporating these into our program goals, activities, strategies, and practices. The goal is to achieve a transformative and sustainable change within an ecosystem, considering gender and social inclusion barriers and/or opportunities at the ecosystem’s individual, household, community, and societal levels.  

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THE SOCIO-ECOLOGICAL MODEL

The socio-ecological model considers the complex connections between individual, household, community, institutional, and societal/policy factors that affect GESI. For example, if you only work at the policy level, will relevant institutions have the capacity to implement the policy and will individuals and communities have the knowledge they need to hold policymakers and institutions accountable for non-delivery? If you work at the household level to empower women, persons with disabilities, and other vulnerable groups to speak out in WASH Committee meetings without also addressing male attitudes or society-level norms about the role of women in the community, women’s attempts to speak out in meetings may result in their voices being disregarded or even actively silenced, ultimately working against goals to empower women to participate and make decisions.

As you work to make your WASH program more GESI-transformative, it is important to be mindful to operate at different levels to create opportunity for change. **Your program should have an impact across all levels from individual to societal.**

INTERSECTIONALITY

Intersectionality represents the various social and political categorizations that apply both to individuals and groups that influence whether a person or group is included or excluded in society. These categories include gender, disability, class, religion, ideology, geographic origin, ethnicity or marital status. These complex factors overlap and inter-relate to determine which people or groups are included or excluded from political, societal, and familial support and resources. For example, women with disabilities may face double marginalization because of gender norms as well as stigma toward persons with disabilities. However, a woman with a disability may be less excluded if she is the daughter of a village leader or from wealthy family enabling her to complete her education or have better access to WASH services.

For WASH programs to be GESI-transformative, intersectionality must be explored, understood and applied. For instance, an elderly woman living alone would need a toilet designed differently than an elderly woman living with children, or a young woman living with small children. A person with a disability in a lower caste or societal group might have more obstacles to overcome than a person with a disability from a majority group. These marginalized and excluded groups are often among the most vulnerable in the places where World Vision works. To reach these individuals, we must explore and address the complex, intersecting issues that inhibit not only access but full participation and enjoyment of an improved WASH environment.

THE GESI CONTINUUM

The GESI continuum (see Figure 4) describes the degree of GESI-responsiveness in any given project or program, including WASH. All World Vision programs should be in the realm of GESI-responsive, with an increasing growth from GESI-accommodating toward being GESI-transformative. GESI-accommodating programming acknowledges that disparities exist in the community that affect vulnerable groups, but programs do not actively work to address the root causes of those inequalities and exclusions.

A WASH project is GESI-transformative when it is structured to challenge harmful social norms and power imbalances in order to change the position of vulnerable groups, it is committed to ensuring protection, building relationships, understanding intersectionality, addressing unintended consequences and potential harm, and addressing the root causes of inequality and exclusion to achieve a lasting transformation at individual, household, community, and societal levels.

The goal of WASH is to apply an increasingly GESI-transformative approach in all World Vision’s WASH programs. Classifying current programming along the GESI continuum is important in identifying the gaps and capacity, resource, design, and implementation adaptations needed to make programs more GESI-transformative. When a GESI-transformative approach is applied, whole communities are more cohesive, resilient, and able to thrive, and no individual or group is excluded.

FIGURE 4 : WORLD VISION’S GESI CONTINUUM

<table>
<thead>
<tr>
<th>World Vision® GESI Continuum</th>
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<tbody>
<tr>
<td><strong>Not GESI Responsive</strong></td>
</tr>
<tr>
<td><strong>GESI Absent</strong></td>
</tr>
<tr>
<td>There is no consideration of gender norms and unequal power relations, or potential patterns of gender equality or social inclusion in the design or delivery of program activities.</td>
</tr>
<tr>
<td>There is no discussion of the gendered or inclusive dimensions of the environment where programs may be operating in and how this may affect interventions.</td>
</tr>
<tr>
<td><strong>GESI Exploitative</strong></td>
</tr>
<tr>
<td>Reinforces, uses and/or takes advantage of gender inequalities, social norms and stereotypes.</td>
</tr>
<tr>
<td><strong>GESI InSensitive</strong></td>
</tr>
<tr>
<td>Gender norms and social inequalities are acknowledged as key aspects of context but not brought into any aspects of program planning, delivery, or feedback.</td>
</tr>
<tr>
<td><strong>GESI Accommodating/Sensitive</strong></td>
</tr>
<tr>
<td>Acknowledges but works around gender, disability or other social differences and inequalities to achieve project objectives.</td>
</tr>
<tr>
<td>Interventions address practical needs of vulnerable groups but not the underlying root causes of inequality or exclusion.</td>
</tr>
<tr>
<td>There is a “missed opportunity” to shift norms that reinforce inequality and exclusion.</td>
</tr>
<tr>
<td><strong>GESI Transformative</strong></td>
</tr>
<tr>
<td>Actively seeks to engage with and transform gender and social inequalities in the long term to achieve GESI sustainable change.</td>
</tr>
<tr>
<td>Challenges or shifts gender norms, unequal power relations, stereotypes and discriminatory practices.</td>
</tr>
<tr>
<td>Promotes equitable systems.</td>
</tr>
</tbody>
</table>

**GOAL** | Better development outcomes for the most vulnerable.
APPLYING A DO NO HARM LENS

GESI-responsive institutional practices, policies, operations, and accountability mechanisms should be guided by do-no-harm and protection principles. “Do-no-harm” refers to a conscious effort to ensure that no negative consequences or harm caused by the project occurs to anyone – including consequences which are unintended – because of actions taken. It is important for a WASH program to assess all possible risks for vulnerable groups to participate in program activities and develop mitigation strategies to manage those risks.

The risk of harm is heightened when WASH programming seeks to influence discriminatory norms and practices (such as gender roles in WASH) that may be deeply entrenched. These actions can result in resistance, backlash, and violence directed at the very people the program intends to support.

For example:

- Overlooking disadvantaged groups in community WASH processes (or publicly discussing these groups without permission) can increase the risk of marginalization, stigmatization, and violence, and result in the introduction of WASH services that may not benefit them.
- Persons with disabilities or the elderly may face extra barriers such as additional costs for adapted access to water, toilets or handwashing facilities, lack of locally available equipments or expertise for ensuring accessibility, or family members who don’t understand their needs or who aren’t willing to allocate required resources. This can result in a return to open defecation with its associated negative health impacts and loss of dignity.

It is important that the multiple principles detailed in this guide are used to apply a do-no-harm lens. For instance, accounting for aspects of intersectionality and considering the layers of complexity within the socio-ecological model, will help to ensure that our GESI-transformative WASH programs do no harm.

The following sections of this guide walk through practical steps that can be taken to design and implement more GESI-transformative WASH programs. We begin with four key steps to introduce a GESI lens in WASH. After taking these four steps, we provide guidance on developing a GESI and WASH analysis. Finally, we share guiding questions on how to design, implement and monitor GESI-transformative WASH programs. Many of these sections are marked with guiding questions, since the application of a GESI-transformative WASH program must take the context into account.

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17 SNV (2019). Developing approaches to “Do No Harm.”
18 Water Women Fund 2021. Gender Equality and Social Inclusion Self-Assessment Tool: Facilitation guide for WASH project Managers, Researchers And Self-Assessment Facilitator
19 SNV (2019). Developing approaches to “Do No Harm.”
APPLYING A GESI Lens in WASH

This section discusses how to apply a GESI lens in WASH programs and provides four steps and practical ways to incorporate this lens into a WASH program, as either a targeted or integral component of the program. The section also provides guiding principles and questions that a field office can use to design, assess, or adapt their WASH program to be more GESI-transformative. These are complementary to existing project models, tools, and processes that are the mainstay of World Vision’s Development Programming Approach. The following are steps to applying a GESI lens:

**FIGURE 5: STEPS TO APPLYING A GESI LENS**

<table>
<thead>
<tr>
<th>Step 1</th>
<th>Incorporate GESI-related objectives in the project</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>GESI Objectives</strong></td>
<td>How does your project align GESI objectives with organizational strategic goals?</td>
</tr>
<tr>
<td><strong>GESI Targeting</strong></td>
<td>How does your project identify and target the most vulnerable?</td>
</tr>
<tr>
<td><strong>GESI Theory of Change</strong></td>
<td>How does your project integrate World Vision’s GESI Theory of Change?</td>
</tr>
<tr>
<td><strong>GESI Indicators</strong></td>
<td>What indicators has your project identified to address the five GESI domains?</td>
</tr>
</tbody>
</table>

**Step 1 | Incorporate GESI-related objectives in the project**

In this step, the question to ask is, how does your project align GESI objectives with organizational strategic goals?

Aligning GESI objectives with organizational strategic goals will help to effectively tackle gender inequality and social exclusion in programs. This will require two things. First, make sure that staff’s personal beliefs are inclusive, anti-discriminatory, and that World Vision’s organizational culture challenges inequality and exclusion. Increasing personal and institutional awareness and sensitivity is a key step in addressing GESI in programs. The Reflection Checklist Tool (Tool 1.3 in the Toolkit for Integrating GESI in Design, Monitoring and Evaluation) can help World Vision staff reflect on their own biases, sources of power, and barriers to GESI. This tool helps to expose hidden or unconscious individual biases that, if unaddressed, may prevent WASH programs from becoming GESI-transformative. It is also important for staff to participate in GESI orientation and training to provide opportunities to promote reflection, build awareness, and address biases. Once staff understand and address their personal GESI-related biases, they are better equipped to identify how each project can support GESI-related organizational objectives and integrate GESI-transformative approaches into WASH projects.

Secondly, ensure that the field office environment can support a strong GESI-focused program. Use the GESI Minimum Standards Tool (Tool 1.2 in the Toolkit for Integrating GESI in Design, Monitoring and Evaluation), which provides a checklist for projects to assess how well they are doing in addressing GESI issues within their programming and their organization as a whole. It is not enough to address GESI issues solely through programming. This tool is designed to help organizations assess nine areas where you should be meeting minimum standards necessary to advance equitable and inclusive development and emergency relief. The checklist covers issues of policy, capacity and culture, participation and partnership, budget, analysis, data collection, indicators, do-no-harm, and accountability.
Step 2 | Target the most vulnerable

How does your WASH project or program identify and target the most vulnerable and address their overlapping or intersectional vulnerabilities?

Inherent in our World Vision WASH approach is the goal to reach everyone in the community. With our increasing focus on universal services coverage, no one in a community should be left behind in safely managed and dignified WASH services access. This means that, from the very outset, we need to make efforts to understand and identify who are the most vulnerable; how they currently experience their vulnerability in terms of WASH; what are the root causes of their vulnerabilities; what are their needs, concerns, expectations and priorities; and what WASH approaches and interventions would best address them.

Step 3 | Integrate World Vision’s GESI Theory of Change

How does your WASH project or program currently integrate World Vision’s GESI Theory of Change and its five GESI domains?

This question invites further consideration on how current WASH programming addresses each of the five GESI domains at individual, household, community, and societal levels. Further on, in the GESI analysis section, guiding questions will help you consider how you can incorporate interventions that address the GESI domains more clearly in future programming.

WASH is a foundational sector for many of World Vision’s relief and development work, including health, child protection, livelihoods, and education. Therefore, WASH has a significant role to play in each of the five GESI domains. It should not just improve access to WASH services and the well-being for vulnerable individuals and groups. All the other domains—decision-making, participation, and ensuring systems are equal and inclusive for all—must be considered.
The following are illustrative examples of how WASH can integrate GESI domains:

**ACCESS** The most straightforward point of connection with GESI, as a mainstay of World Vision’s WASH programs is to provide access to safe WASH services for all. We work to ensure that all WASH infrastructure we provide meets the needs of women, girls, persons with disabilities, and others from marginalized or excluded groups.

**DECISION-MAKING** Ensure the program promotes equal and inclusive decision-making, for example, increasing representation of women, persons with disability, youth, etc., in decision-making and helping to amplify the voices of the marginalized to ensure their views are considered.

**PARTICIPATION** Ensure the program identifies and addresses barriers that limit participation of vulnerable groups, such as activities that promote participation of women and persons with disabilities in WASH Committees. This may include meeting venues to accommodate persons with disabilities, providing child care during meetings so women can participate, providing transport or reimbursement for those who can’t afford to travel to the venue, and adjusting the timing of the meeting to allow everyone to attend.

**SYSTEMS** Efforts to engage in advocacy for strong WASH policies as well as engagement with faith leaders on WASH behavior change are intended to reinforce healthy WASH governance and social systems that support the needs of vulnerable groups.

**WELL-BEING** When WASH services are high-quality, safe, and sustainable, we reinforce the well-being of vulnerable groups. Besides protecting people from WASH-related infections and diseases, it promotes an improvement in overall quality of life. For instance, for women, access to safely managed WASH services can reduce the burden of daily tasks and incidents of violence. It can also influence cultural and societal norms that affect their role in the community.

How can your WASH project or program contribute to enhancing GESI within World Vision’s wider programming? How can it change gender or social norms or enhance the agency of vulnerable men, women and children?

Not only do WASH programs directly address key barriers to inclusion in a community, how we implement WASH programs can also have an impact on key GESI challenges experienced by communities within World Vision’s wider programming. Since WASH is often one of the first interventions in a community, WASH has the opportunity to set an equitable and inclusive tone by how we engage with the community, listen, and develop participatory designs.

**Step 4 | Identify indicators along the five GESI domains**

**What indicators has your WASH project or program identified to assess progress towards GESI-related goals?**

Ensure you select indicators to measure the five GESI domains and that they capture the needs of the most vulnerable.

The core Global WASH indicators do include some indicators and disaggregation that link to GESI (see Table 1 later in this document). The Toolkit for Integrating GESI in Design, Monitoring and Evaluation also includes some other suggested GESI and WASH indicators for consideration. Other indicators should be used that link to programming goals and objectives. For technical support on developing GESI-transformative WASH indicators, please reach out to the World Vision WASH team or the GESI team.
A GESI analysis for WASH is an analytical approach that helps identify, understand, and explain the GESI gaps and disparities in WASH, their root causes, and how to address them. The results of a GESI analysis will help to develop a GESI-transformative program that intentionally addresses intersectional vulnerabilities and the identified root causes of inequality and exclusion in WASH. Although GESI analysis can be conducted at any time during the program cycle (proposal development, program design, implementation, and evaluations), ideally it should be conducted at the beginning of a program or during its conceptual stage. This will ensure that GESI is integrated right from the design stage and GESI activities are integrated and budgeted for, from the very beginning.

Objectives of the GESI analysis for WASH:

- Identify different WASH needs, priorities, and vulnerabilities of women, men, girls, boys, persons with disabilities, and other vulnerable people, and account for the fact that WASH issues affect people differently.
- Identify who has access, participation, and decision-making powers to WASH.
- Identify gender and social norms and practices that exclude vulnerable populations when it comes to WASH and how to address them.
- Identify how well the current WASH services meet the needs of the most vulnerable (including unintended consequences).
- Identify existing programs and promising and best practices that can be incorporated.
- Understand the gender and social dynamics around the domains of decision-making, participation, and systems that drive inequalities in WASH.
- Provide recommendations to address GESI gaps so that WASH can be equal and inclusive.

It is highly recommended to use a mixed method and collect both quantitative (e.g., through surveys and secondary data) and qualitative data (e.g., through focus group discussions, desk reviews, and key informants’ interviews). Make sure you collect information on each GESI domain for each vulnerable group (e.g., women, youth, the elderly, refugees, widows, persons with disabilities, etc.) to help understand the situation and how to better address the gaps.

The full process of conducting a GESI analysis can be found in section 2 of the Toolkit for Integrating GESI in Design, Monitoring and Evaluation. This includes guidance on how to conduct desk reviews and primary and secondary quantitative and qualitative data collection.

**HOW IS GESI ANALYSIS DIFFERENT FROM A MOST VULNERABLE CHILDREN (MVC) MAPPING?**

Your field office is likely to be very familiar with MVC mapping, which identifies the main vulnerabilities faced by children and the number of children who are classified as the most vulnerable based on the four domains of MVC. While the MVC mapping is a great starting point for a GESI analysis, more effort may be required to develop a comprehensive GESI WASH analysis.
Guiding Questions for Conducting a GESI Analysis for WASH

The following are guiding questions to ask in doing a GESI analysis for WASH. These are provided for illustration only. It is important to contextualize, as applicable.

Access

What services need to be developed or extended to meet the needs of vulnerable groups?

Note: The questions in this section are mostly closed, yes/no questions. After answering each, follow-up with more detail. Examples: If yes, consider what characteristics make these facilities properly equipped and safe for all people? What can be done to make them safer? If no, what is needed to render these services safer, more user-friendly and more accessible to all people?

- Is there safe, user-friendly public access to water points, latrines, and hygiene facilities that are accessible to persons with disabilities and are equipped to meet the hygiene needs of women and girls, especially in marketplaces?
- Do all boys and girls have equal access to quality and inclusive WASH services?
- Are orphans and those with disabilities given equal and affordable access to WASH?
- Are all people in the community, regardless of sex, age, religion, socio-economic class, ability, ethnicity, etc., able to access basic WASH services? If no, who is excluded and why?
- In schools, do boys and girls—including children with disabilities—have equal access to safe and appropriate toilets, water, and handwashing stations? Do girls’ toilets include accommodations for menstrual health management? Are toilets accessible to persons with disabilities?
- Are household WASH facilities appropriate and accessible to all household members?
- What are the barriers to access? Why are underserved groups underserved? Do they have less political power? Are there religious or cultural beliefs that prevent vulnerable groups from fully enjoying WASH infrastructure? How can we address such power dynamics in our programs? How can we advocate for GESI in government service provision?
- Do operation and maintenance plans include infrastructure specifically for supporting hygiene needs of women/girls and/or persons with disabilities?

Decision-making

How can vulnerable groups be engaged in decision-making on WASH?

- Are there groups/committees/associations that address WASH concerns for the community and/or local institutions (i.e., schools or health facilities)?
- What is the selection process for these groups/committees?
- What level of participation do vulnerable groups have in these committees—token participation, active involvement, decision-making or ownership and control? Are they actively involved and feel their voices and opinions are respected?
- What decision-making role do vulnerable groups play in WASH committees?
- What are barriers to decision-making? Any social norms or formal systems that exclude vulnerable groups from making decisions? How can we address this?
- How can vulnerable groups be more involved or represented in both participation and decision-making roles in these groups?
- To what degree do women, children, and persons with disabilities participate in household decision-making regarding WASH?
Participation

How can vulnerable groups have equal and inclusive participation in WASH?

• Who are the key actors involved in WASH within the family, community, and/or government? Be sure to consider differentiating this question by sex, age group, disability status, or other exclusion factors (ethnic or religious minority, lower caste, location, socio-economic status) to understand and address the different roles that each group plays in WASH.

• What prevents vulnerable groups from participating in WASH activities? What impact does that have on how WASH issues are acknowledged and addressed in the community?

• Who participates in the local WASH or water-user committee? Are there men, women, persons with disabilities, the youth and other vulnerable groups? Are all members able to participate equally? Are there any key groups who are not represented? Who are they and why?

• What support may be needed for families, schools, healthcare facilities and communities to better understand GESI and WASH issues? How will these be inclusive of and address the different roles that people play in WASH issues?

Systems

How can the current WASH systems be more equal and inclusive of vulnerable groups?

• Do government policies and standards support and promote GESI accessible infrastructures and systems? If not, what laws or policies need to be changed, improved or added?

• Are the equal rights of girls and boys, women and men, persons with disabilities, and persons from ethnic minorities, clearly articulated in WASH policy across the life cycle?

• How are WASH policies applied? Are they applied equitably across vulnerable groups?

• What social or gender norms are in place that influence WASH? Are there broader social or gender norms/attitudes or stigma that make WASH less accessible for certain people? Who is responsible for upholding these broader social or gender norms? Who would be able to influence social and or gender norms? Groups to consider here might be traditional leaders, religious leaders/institutions, culture/family dynamics, etc.

• How are WASH messages created and communicated in the community? Is this accessible to both men and women, children, those who don't understand the dominant language, or persons with disabilities?
Well-being

What issues need to be addressed by WASH to enhance the well-being of vulnerable groups?

- How do people feel about WASH, and what challenges related to WASH services do they face?
- What is the impact of improved WASH services on overall well-being — their health, education or livelihood options? Specifically, how do these services provide safety, dignity, privacy, comfort, and/or financial or time savings?
- What role does WASH play in fulfilling household goals and ensuring its members are healthy and have reduced time burdens for WASH-related activities?
- What is the self-esteem of a boy child versus a girl child? Do they feel equally safe? Can they equally imagine having access to safe and dignified WASH facilities in their household, school or community, regardless of where they were born?
- Are persons with disabilities supported and able to reach their full potential and live with dignity?
- Which people are most at risk from different WASH risks in your context, such as disease, injury, violence, extra burden of WASH responsibilities (such as water fetching, domestic chores and caring for the sick)? This should be disaggregated by age, sex, disability or other exclusion or vulnerability factor (ethnic or religious minority, lower caste, location (rural/urban), family separation, domestic violence, socio-economic status, etc.).
- What safeguarding considerations are already included in programming? Are there other vulnerable groups that should be included in safeguarding work?

The results of WASH GESI analysis will help inform where your project or program may need to focus its efforts to achieve GESI-related transformation.
INTEGRATING GESI IN WASH Program Design

The Toolkit for Integrating GESI in Design, Monitoring and Evaluation provides five tools to help this process, related to proposal development, program design, indicators, a GESI Integration Action Plan, and GESI-responsive budgeting. A GESI Integration Action Plan can be particularly useful as part of a workshop with staff during the project start-up phase, particularly if many of the staff were not involved in the design process. By planning together, staff can achieve a common understanding of how they can advance GESI within program implementation.

Key considerations in designing a GESI-transformative program are listed below, by domain area. Each has a guiding question with some subsequent questions that will inform the guiding question.

Access

Are vulnerable groups able to access relevant preventive and responsive WASH services?

- Have we developed clear criteria and mechanisms for identifying vulnerable groups? Does this address intersectionality?
- Have we focused on providing WASH services in geographic areas that are currently underserved?
- Are we providing, strengthening, or promoting WASH services that are needed by the most vulnerable people? Consider:
  - Specific needs of women and girls, including menstrual hygiene, security, etc.
  - Specific needs of persons with disabilities.
  - Traditional or cultural implications that may affect someone’s ability to access a particular WASH service.
- Are some groups underserved because they have less political power, etc.? How can we address such power dynamics in our programs? How can we advocate for GESI related to government service provision?
- Have we developed/outlined a plan to enhance service provider capacity to provide services to underserved groups?
- How are we working to ensure the necessary materials are available at points of need? These can include assistive devices for persons with disabilities and the elderly, materials to manage menstrual hygiene, etc.
- Do operation and maintenance plans include all infrastructure, such as GESI accessible infrastructure?
- When we provide accessible WASH infrastructure, how do we work to ensure that the broader infrastructure is accessible? For example, when we provide disability accessible toilets in schools, do we work with the school or partners to help make the school building accessible also?
- Have we included a budget for an inclusion fund to help vulnerable groups and their families to access services?
- Have we included a feedback mechanism (hotline, Citizen Voice and Action, focus groups, surveys, etc.) and indicators to monitor the accessibility and quality of WASH services from the perspective of vulnerable groups?
- Has our communication plan been designed to ensure that all members of the community receive appropriate information regarding WASH (in appropriate language, supporting those with minimal literacy and those with visual or hearing impairments, those who can’t attend community events)? How will this information reach different sectors of the community (e.g., children, parents, teachers, employers)?
- Have we removed all physical, financial, attitudinal, language, and other barriers to accessing services for the most vulnerable children and their families? Some ideas for removing these barriers are outlined on the next page.
<table>
<thead>
<tr>
<th>Barrier</th>
<th>Possible actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Language</td>
<td>Provide interpreters for WASH meetings, provide information in all relevant languages, including sign language.</td>
</tr>
<tr>
<td>Cultural</td>
<td>Hire people from cultural minority groups to train WASH providers to be sensitive to cultural needs</td>
</tr>
<tr>
<td>Physical distance</td>
<td>Provide mobile/virtual WASH services to supplement existing services</td>
</tr>
<tr>
<td>Religious beliefs</td>
<td>Engage religious leaders in behavior change approaches, share which religious texts support these behaviors</td>
</tr>
<tr>
<td>Financial</td>
<td>Budget for an inclusion fund to support access, support complementary savings groups or income generation work, use local-level advocacy approaches to advocate to government investment.</td>
</tr>
<tr>
<td>Lack of physical mobility</td>
<td>Provide assistive WASH devices (e.g., adapted access ramp, improved pump parts, wheelchairs/crutches), accessible transport, coordinate with other sectors for continuity in providing accessible infrastructure</td>
</tr>
<tr>
<td>Restrictions on individual travel and agency</td>
<td>Conduct household visits to negotiate permission to access and provide services, behavior change approaches to increase individual agency</td>
</tr>
<tr>
<td>Attitudinal</td>
<td>Behavior change approaches on importance of the service</td>
</tr>
<tr>
<td>Childcare</td>
<td>Provide childcare services at the point of delivery and to support women's attendance during WASH meetings and other events</td>
</tr>
<tr>
<td>Work, caregiving, household responsibilities</td>
<td>Schedule meetings at times that are most accessible for those who have time restrictions due to caregiving, household, or work responsibilities. This may mean offering multiple meetings to ensure inclusive representation</td>
</tr>
<tr>
<td>Security</td>
<td>Provide services in safe locations and times when it is considered safe</td>
</tr>
<tr>
<td>Stigma/discrimination</td>
<td>Accompany vulnerable group, plan and work with service providers to address any stigma or discrimination, promote positive images of excluded groups</td>
</tr>
</tbody>
</table>

**Decision-making**

**Does the program engage vulnerable groups in decision-making around WASH?**

- Are vulnerable groups consulted at all phases of project design? Are participatory design methods used to ensure that WASH services are suitable for all people?
- Are vulnerable groups included in WASH committees and groups that make decisions on WASH issues?
  - Do they have a prominent role in that committee or group?
  - Do they actively engage in the decision-making process?
  - Do these groups or committee members actively engage in any local government meetings, which shape decisions on activities and budgets?
- Do women, girls, and family members with disabilities contribute to or lead household decisions regarding WASH? Are their decisions valued?
Participation

Does the program engage vulnerable groups in WASH services and related activities?

- Are vulnerable groups involved in key WASH activities, including design, monitoring, maintenance, and management?
- Have barriers to the participation of vulnerable groups been identified and addressed?
- Does the program include a feedback mechanism or regular focus groups to allow vulnerable groups to comment on the program? How will they be made aware that these mechanisms exist and how to access them? Will all people have equal access to these mechanisms? Does the program address feedback equitably (i.e., does not disregard or discount feedback from vulnerable groups)?

Does the program include CVA or another social accountability mechanism that engages vulnerable groups and their families to ensure their concerns are addressed in monitoring the quality of WASH services?

Systems

Does the program ensure that WASH services are delivered more equally and inclusive of vulnerable groups?

- Does the program address any inequalities, and actively encourage equality, in the law, policies, or regulations/local customs around WASH through advocacy, CVA or another means?
- Does the program address harmful gender and social norms that create inequalities and exclusion in the WASH system using social and behavior change communication?
- Does the program engage religious and/or traditional leadership in WASH promotion? How are GESI issues reflected in that promotion?

Well-being

Does the program address the issues needed to enhance the well-being of vulnerable groups?

- Is the program addressing the major WASH issues affecting vulnerable groups that are identified in the GESI analysis?
- Does the program outline the different approaches to addressing these issues in ways that meet the needs of different people?
- Does the program have a mechanism and indicators to monitor well-being that can identify differences in well-being between different types of people?
- Does the program minimize the risk of people experiencing backlash due to their involvement in the project?
- Do World Vision staff and community members — especially those from vulnerable groups — know where to seek support?

In addition, the design process needs to ensure that:

- The budget contains an inclusion fund/allocate funds for GESI activities and other costs to remove barriers to access and participation (e.g., sign language during WASH meetings)
- Training for staff is planned to address any gender or social norms that may harm their ability to implement the program for all people
- Intentional hiring and training of vulnerable groups to the WASH team to promote diversity
- A more detailed or additional GESI analysis is planned and budgeted if the initial GESI analysis was insufficient to answer all the programming questions needed
- A risk analysis is conducted to ensure that the project can mitigate potentially unintended consequences for vulnerable groups as program activities will have a different impact depending on their vulnerability.
- A strong monitoring and evaluation plan is developed that can capture GESI-related outcomes and that disaggregates data by sex, age, disability and other context-specific vulnerability (e.g., ethnicity, religion, HIV status, refugee, internally displaced person, indigenous persons, etc.)
INTEGRATING GESI IN WASH Program Implementation, Monitoring, and Evaluation

The key to implementing a GESI-transformative WASH program is to have a good initial design based on a comprehensive GESI analysis as outlined in Step 3 on How to Apply a GESI Lens and to then use good monitoring and evaluation tools to inform changes to program activities to make sure that both GESI and WASH-related goals and objectives are being realized. During the implementation phase, continuous multi-stakeholder dialogue, and continuous engagement with vulnerable and marginalized groups, are good ways to ensure effective implementation of GESI in WASH programming. The more domains a program addresses, monitors and evaluates, the more GESI-transformative it will be. Section 4 of the Toolkit for Integrating GESI in Design, Monitoring and Evaluation outlines a range of tools to help you to include GESI in your monitoring and evaluation process.
GESI INTEGRATION IN WASH PROGRAM MONITORING

At a minimum, make sure you do the following:

1. Conduct a GESI analysis for WASH and collect GESI disaggregated data at the beginning of the program to establish a baseline. This will help to determine the impact the program has towards achieving GESI goals.
2. Use GESI-responsive WASH indicators and make sure to include indicators in each GESI domain. (see table 1 below)
3. Develop a GESI monitoring plan that includes specific information on how and when you will collect, analyse, and report WASH data. Make sure to use both qualitative and quantitative methods and to collect GESI disaggregated data. Also, ensure your WASH team is GESI aware and diverse as applicable to your specific context.
4. Develop a plan for monitoring visits to track progress towards GESI-transformative WASH goals and objectives and find ways to address any challenges.

Monitoring GESI activities can be carried out by conducting focus group discussions, mapping of WASH services, users’ scorecard, sanitation monitoring toolkits developed by UNICEF, and Gender and WASH monitoring tool developed by Plan International. Another new and innovative tool to explore is the Empowerment and WASH Index which aims to measure agency, participation, and empowerment in the water and sanitation sector.

GESI INDICATORS FOR WASH

The table below includes current GESI indicators for WASH that are useful in tracking and analyzing whether the program is reaching and serving the most vulnerable. It is important to note that data collected must be disaggregated by social characteristics such as sex, age, disability status, ethnic group, level of education, among others.

TABLE 1: CURRENT GESI INDICATORS FOR WASH

<table>
<thead>
<tr>
<th>WASH Indicator with links to GESI</th>
<th>GESI Domain</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>WATER</strong> Disaggregated by age, sex and disability</td>
<td></td>
</tr>
<tr>
<td>1 # of people with access to a BASIC drinking water source in communities</td>
<td>Access</td>
</tr>
<tr>
<td>2 # of people gaining access to basic drinking water services</td>
<td>Access</td>
</tr>
<tr>
<td>3 # of people gaining access to SAFELY MANAGED drinking water services</td>
<td>Access</td>
</tr>
<tr>
<td>4 # of people benefiting from the adoption and implementation of measures to improve water resources management</td>
<td>Access</td>
</tr>
<tr>
<td>5 # of children at an education facility with access to BASIC drinking water</td>
<td>Access</td>
</tr>
<tr>
<td>6 # of NEW people with access to emergency water services</td>
<td>Access</td>
</tr>
<tr>
<td><strong>SANITATION</strong> Disaggregated by age, sex and disability</td>
<td></td>
</tr>
<tr>
<td>1 # of people with access to household handwashing facilities</td>
<td>Access</td>
</tr>
<tr>
<td>2 # of children with access to BASIC sanitation facilities, at education facilities</td>
<td>Access</td>
</tr>
<tr>
<td>3 # of NEW people with access to emergency sanitation services</td>
<td>Access</td>
</tr>
</tbody>
</table>
### HYGIENE

*Disaggregated by age, sex and disability*

| 1 | # of people with access to household handwashing facilities | Access |
| 2 | # of NEW people that have access to basic hygiene items in emergency settings | Access |
| 3 | # of people with access to household handwashing facilities | Access |
| 4 | # of NEW people that have access to basic hygiene items in emergency settings | Access |
| 5 | # of education facilities with at least one basic handwashing facility, constructed or subsidized by World Vision, that meets the needs of people with limited mobility | Systems |
| 6 | # of NEW people that have access to basic hygiene items in emergency settings | Access |

### GESI-Specific Indicators

| 1 | # of functional bathing or shower rooms with water available for women in postnatal care area built or subsidized by World Vision | Access |
| 2 | # of education facilities with at least one basic handwashing facility, constructed or subsidized by World Vision, that meets the needs of people with limited mobility | Access |
| 3 | # of education facilities with improved sanitation facilities, which are sex-separated, built or subsidized by World Vision, with at least one toilet or every 25 girls, and one toilet and one urinal for every 50 boys | Access |
| 4 | # of education facilities with at least one improved sanitation facility that meets the needs of those with limited mobility, built or subsidized by World Vision | Access |
| 5 | # of education facilities that have at least one private improved toilet designated, built or subsidized by World Vision for women and girls which provides facilities to manage menstrual hygiene needs for washing, changing, and disposal of menstrual waste | Access |
The Toolkit for Integrating GESI in Design, Monitoring and Evaluation provides illustrative GESI indicators that have been adapted from various organizations such as Plan International (2018)\(^{20}\), USAID, and other international organizations. These indicators have been aligned to World Vision’s GESI domains. Below are GESI indicators taken from the toolkit.

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Domain</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 % of males, females, and persons with disabilities accessing adequate safe drinking water</td>
<td>Access</td>
</tr>
<tr>
<td>2 % of males, females, and persons with disabilities accessing sanitation services</td>
<td>Access</td>
</tr>
<tr>
<td>3 % of males, females, and persons with disabilities accessing sanitary toilet systems/technologies</td>
<td>Access</td>
</tr>
<tr>
<td>4 % of boys and girls practicing hygiene and sanitation practices at school and home</td>
<td>Access</td>
</tr>
<tr>
<td>5 % or # of water points and latrines that are universal in design</td>
<td>Access</td>
</tr>
<tr>
<td>6 % of males and females reporting making decisions about the use of water (i.e., how much to use and for what purposes)</td>
<td>Decision-making</td>
</tr>
<tr>
<td>7 % of males and females reporting independent decisions about the source of drinking water</td>
<td>Decision-making</td>
</tr>
<tr>
<td>8 % of males, females, and persons with disabilities making decisions about the use of sanitary practices and technologies (such as type of toilet in the household)</td>
<td>Decision-making</td>
</tr>
<tr>
<td>9 Men, women, and persons with disabilities’ level of participation in community WASH activities (developing well for public use, working in community water distribution system, etc.)</td>
<td>Participation</td>
</tr>
<tr>
<td>10 % of males, females, and persons with disabilities participating in water user associations</td>
<td>Participation</td>
</tr>
<tr>
<td>11 # of trainings in WASH geared towards diverse social groups which are socially and culturally appropriate</td>
<td>Participation</td>
</tr>
<tr>
<td>12 % of males, females, and persons with disabilities participating in WASH trainings</td>
<td>Participation</td>
</tr>
<tr>
<td>13 % of males, females, and persons with disabilities responsible for collecting water, and hours spent</td>
<td>Participation</td>
</tr>
<tr>
<td>14 % of males, females, and persons with disabilities reporting regular sanitation &amp; hygiene behaviors</td>
<td>Participation</td>
</tr>
<tr>
<td>15 % of males, females, and persons with disabilities utilizing WASH technologies (hand-washing stations, water filters, sanitary latrines) in their household</td>
<td>Participation</td>
</tr>
<tr>
<td>16 Number of water and sanitation sector institutions strengthened to manage water resources or improve water supply and sanitation services(^{21})</td>
<td>Systems</td>
</tr>
<tr>
<td>17 Availability of policies, laws, and institutions related to promoting and ensuring gender equality and social inclusion in WASH at different levels</td>
<td>Systems</td>
</tr>
<tr>
<td>18 Men and women’s level of satisfaction with division of time and labor spent collecting water for women</td>
<td>Well-being</td>
</tr>
<tr>
<td>19 Men and women’s level of satisfaction with the quality of drinking water source</td>
<td>Well-being</td>
</tr>
<tr>
<td>20 Men and women’s level of understanding of health hygiene and sanitation practices</td>
<td>Well-being</td>
</tr>
</tbody>
</table>

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GESI INTEGRATION IN WASH PROGRAM EVALUATION AND REPORTING

When conducting an evaluation for WASH program consider the following:

1. Carefully select your evaluation team to include at least one WASH expert and one GESI expert, or an expert in both WASH and GESI who is able to design or lead GESI-responsive WASH program evaluations.
2. Make sure the scope of work or terms of reference for evaluation contracts includes a WASH GESI analysis.
3. Ensure evaluations collect information in each GESI domain, capture GESI-related disaggregations, and use both qualitative and quantitative methods.

STAFFING GESI-TRANSFORMATIVE WASH PROGRAMS

GESI-transformative WASH programming requires staff competency to implement well. It is recommended that each WASH program either hire a GESI and WASH expert or work closely with their field office’s GESI advisor. Also, WASH teams should be familiar with the GESI-transformative WASH competencies, ensuring WASH teams are evaluated against the appropriate competency and that plans are intentionally made to build competency in GESI-transformative WASH. It is also important to pursue diversity among staff, intentionally recruiting and training staff from vulnerable groups.
GESI AND WASH

Promising Practices

This reference guide is not exhaustive and we encourage each field office to innovate around GESI-transformative WASH and to share case studies of best practices back with the WASH and GESI teams for dissemination and learning.

**WASH IN SCHOOLS**

- **WASH UP!** Since 2015, World Vision and Sesame Workshop have teamed up to bring the WASH UP! program to communities in Africa, Latin America, the Middle East and Asia through videos, play mats, books, and songs, all featuring a vibrant 6-year-old Muppet named Raya and her friend Elmo. By taking advantage of animated characters and improving knowledge with engaging materials and activities focused on the child, this program allows children to be agents of change in their homes, schools, and communities. School children are learning critical behaviors such as handwashing, wearing shoes to go to the latrine, and safe water storage. Children are encouraged to take these healthy habits home to teach their parents and siblings.

- **WASH UP! Girl Talk** is a follow-up program to the WASH UP! program, developed in partnership with Sesame Workshop. It was first piloted in Zimbabwe starting in 2017. Girl Talk seeks to overcome period poverty. World Vision ensures that school WASH infrastructure is girl friendly, including appropriate facilities to manage menstrual hygiene. Girls and boys engage in education and activities that demystify periods and help keep girls in school—and on track for successful futures. Designed for both girls and boys, it addresses facts about puberty and periods, techniques for menstrual hygiene management, and girls’ empowerment. An independent assessment of the program’s impact by the global nonprofit Education Development Center demonstrated its initial success, finding it had a significant impact on all students’ knowledge about puberty and periods, dispelled common myths about menstruation, and improved girls’ practical knowledge about their cycles.22

**DISABILITY INCLUSIVE WASH**

- World Vision and Messiah College partnered together to explore and address issues of disability inclusion. Disability inclusion focuses on the ultimate removal of barriers—physical, environmental, attitudinal and institutional. Physical barriers are addressed through adaptations to infrastructure, such as ramps or assistive devices for toileting or modified water transportation devices. The remaining barriers are addressed through community engagement, advocacy, and training. Disability-inclusive WASH at school helps children with disabilities attend and stay in school. Disability-inclusive WASH at home supports a child’s acceptance in society.23

- Starting in 2015, World Vision Iraq has accelerated its focus on inclusive, disability-friendly WASH facilities for internally displaced people in Kirkuk. An example of this work is explained in the Disability Inclusive WASH in Iraq (2018) documentary.

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23 Norman, Ray (2010), Water, Sanitation and Disability in West Africa, Messiah College.
WASH IN COMMUNITIES

- **Nurturing Care Groups (NCGs):** NCGs involve regular meetings of “Leader Mothers,” chosen from groups of 10-12 neighboring households, who meet in groups of 10 with a community health worker. In general, NCGs have been used to promote behavior change in multi-sectoral contexts focused on nutrition, RMNCAH (reproductive, maternal, newborn, child and adolescent health), and livelihoods outcomes. NCGs have the potential to ensure that everyone in a community is included in a program, to allow neighbors to help each other perform target behaviors, and to provide enough high frequency, whole-of-community coverage to catalyze changes in social norms.

**Conclusion**

World Vision’s traditional focus on WASH access and participation in WASH committees is a foundation upon which we must build. The journey must start within. We must work to ensure a more GESI-transformative mindset within World Vision as an organization. Our WASH teams must include staff from vulnerable groups as much as possible. We must take on the challenge and do the hard work of listening and responding appropriately to those we most seek to serve. This must be done with sensitivity, bringing all program participants along on the journey, lest we inadvertently put those we serve at risk of further marginalization or harm.

Focusing on GESI-transformative WASH is essential to achieve World Vision’s mission to reach and serve the most vulnerable. It is critical that those who use this guide use it carefully and with courage. This guide represents a stage along an important journey in deepening and maturing our focus on women, girls, people with disabilities, and others from marginalized groups. We cannot stop here. We must individually and collectively engage this process to learn and improve. Future iterations of this guide will share and build upon the learnings gleaned from the use of this guide.
Annexes
### Glossary of Terms

| **Agency** | The capacity of individuals (and groups) to act independently and to have control over their lives, resources, beliefs, values, and attitudes, and to have the right to freely choose, act and influence their lives, households, communities, and societies. Agency is attained when vulnerable individuals (and groups) who previously exercised little power develop their own capacities for self-understanding and expression, and gain control over their lives, resources, beliefs, values, and attitudes. Agency facilitates self-empowerment power to and power within—through individual consciousness and the transformation of personal attitudes, self-perceptions and power relations.  

| **Disability** | Any condition of the body or mind (impairment) that makes it more difficult for the person with the condition to do certain activities (activity limitation) and interact with the world around them (participation restrictions).  

| **Equality** | The state or condition that affords all people equal enjoyment of human rights, socially valued goods, opportunities, and resources. It means equal valuing of the different roles, perspectives, capabilities, abilities, and outcomes for women and girls and men and boys. Achieving equality involves addressing systemic and structural inequality, discrimination or differential treatment based on social characteristics such as sex, age, disability status, and other social characteristics so that vulnerable populations can freely make choices and reach their full potential. More than parity or laws, genuine social equality is expanded freedom and improved quality of life for all.  

| **Equity** | The process of being fair and just to all people, based on their respective needs. This involves addressing cumulative and historical economic, social, and political disadvantages, inequalities, and ongoing marginalization that prevent vulnerable and marginalized groups from operating on a level playing field. To achieve equity, marginalized groups need to be raised up the same level or “starting position” as others where they can access the benefits that society provides to everyone else. This may mean providing different treatment such as giving more to those who need more in order to achieve equality.  

| **Empowerment** | Empowerment is context specific. It includes awareness-raising, building of self-confidence, expansion of choices, gaining control over resources and ideology and is connected to agency. It challenges deep structures of inequality and exclusion, and enhances human rights, power and agency of vulnerable populations (GESI Theory of Change). It is relational and inherently political because the process is about shifts in power relations. Supportive relationships are crucial to promoting positive social change by transforming structures and institutions that reinforce and perpetuate discrimination and inequality.  

| **Gender Equality** | The state or condition that affords women and girls and men and boys equal enjoyment of human rights, socially valued goods, opportunities, and resources. It includes expanding freedoms and voice, improving power dynamics and relations, transforming gender roles and enhancing overall quality of life so that males and females achieve their full potential.  

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26 Ibid.
| **Vulnerable groups** | Anyone who might experience deprivation, marginalization, exclusion or harm due to GESI-related aspects of their identity. These groups vary according to context and social norms, but generally include categories like gender, disability status, class, religion, ideology, geographic origin, ethnicity, or marital status. |
| **Intersectionality** | The interplay of multiple social characteristics (such as gender, race, class, disability, marital status, immigration status, level of education, ethnicity, etc.) that increases vulnerability and inequality in privilege and power, and further entrenches inequalities and injustice. These characteristics overlap, or intersect, and cannot be examined separately from one another. |
| **Marginalized or excluded groups** | Individuals who experience discrimination or exclusion are limited or completely prevented from participating in their communities and benefiting fully from community services and structures. Marginalization and exclusion are based on unequal systems or relations and social constructs such as “race”, “gender” and “disability”; all domains are impacted by existing structures, social norms, and relationships. |
| **Menstrual health and hygiene (MHH)** | Encompass both menstrual hygiene management (MHM) and the broader systemic factors that link menstruation with health, well-being, gender equality, education, equity, empowerment, and rights. These systemic factors have been summarized by UNESCO as accurate and timely knowledge; available, safe, and affordable materials; informed and comfortable professionals; referral and access to health services, sanitation and washing facilities; positive social norms; safe and hygienic disposal; and advocacy and policy. |
| **Menstrual hygiene management (MHM)** | Refers to management of hygiene associated with the menstrual process. According to WHO and UNICEF, MHM includes access to clean menstrual hygiene products to absorb or collect the flow of blood during menstruation, having access to soap and clean water for washing the body and clothes, the privacy and ability to change menstrual materials as often as needed and having access to safe and convenient facilities to change and dispose used menstrual materials. This also includes having basic knowledge on the menstrual cycle and how to manage it with dignity and comfort, without fear. |
| **Persons with Disabilities** | All persons with disabilities including those who have long-term physical, mental, intellectual or sensory impairments, which in interaction with attitudinal and environmental barriers hinders their full and effective participation in society on equal terms. |
| **Social Inclusion** | Seeks to address inequality and/or exclusion of vulnerable populations by improving terms of participation in society and enhancing opportunities, access to resources, and validates dignity and human rights. It seeks to promote empowerment and advance peaceful and inclusive societies and institutions. |

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ANNEX 2

Sources for Further Guidance

Below are recommended resources for more information and evidence around GESI-transformative WASH programs. This list is by no means comprehensive, and new research and documentation is published regularly.

- Gender Equality and Social Inclusion (GESI) in WASH (2020)
- Empowerment in WASH Index (2019)
- Engaging Men and Boys in Sanitation and Hygiene Programmes (2018)
- Gender Equality and Female Empowerment in WASH (2020)
- Water and Gender Methodology, Indicators and Toolkit (2019)
- Walking the Talk: Integrating Gender and Social Inclusion from the Start (2019)
- GESI Toolkit for Project Preparation (2019)
- “Do No Harm” - Women’s Empowerment in WASH (2019)
- Water, Sanitation and Hygiene and Indigenous Peoples: A Review of the Literature (2014)
- Water Currents: Gender and WASH (2017)
- Mainstreaming disability and ageing in water, sanitation and hygiene programmes. (2013)
- Towards Inclusive Education: The Impact of Disability on School Attendance in Developing Countries (2016)
- Gender-Responsive Water, Sanitation and Hygiene: Key Elements for Effective WASH Programming (2017)
- Who Carries the Weight of Water? Fetching Water in Rural and Urban Areas and the Implications for Water Security (June 2017)
- Understanding Menstrual Hygiene Management & Human Rights (2017)
- wH2O: The Journal of Gender and Water (ongoing publication)
- Gender and Water Alliance (GWA) (ongoing publication)
- Water, sanitation, and women’s empowerment: A systematic review and qualitative metasynthesis (2022)
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