Women’s participation strengthens NGO projects

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Peoples' participation in community activities prevailed in Sri Lanka long before the term community participation became fashionable in modern development jargon. Self help groups, the forerunners of today's formalised Non Governmental Organisations (NGOs) existed in remote rural areas. In a country where 65 percent of the people live in rural areas, these were widespread as active, dynamic informal groups helping one another in activities directed to the common good.

Today community participation is acknowledged as an important tool in the country's mainstream development programmes such as the Integrated Rural Development Programme, the Women's Microcredit Programme, the Janasaviya or Poverty Alleviation Programme of the government and in all development projects of the NGO sector.

Till a decade ago community participation meant men's participation with the women at the periphery - fetching and carrying and providing the men with hot meals and cups of tea. Several factors combined to make planners take a closer look at the enhanced roles, women could be called upon to play. Women's participation in development was already being highlighted through the UN International Women's Decade and the Year of the Child. This spilled over to the International Drinking Water Supply and Sanitation Decade (IDWSSD). Social Justice, equality and elimination of gender based discrimination in the development process were constantly being talked about. There was a particular emphasis on women's participation being crucial to achieving improvement in the health of the people through improved practices in water and sanitation. Women, half the world's human resource, could, it was accepted, contribute positively to building sustainable systems both in their capacity as beneficiaries and as partners in development.

NGOs were also taking a closer look at the failure of water programmes. With their close links with the people and empathy with popular needs, it was not long before they faced the fact that without a supportive partnership with women, water/sanitation projects will always fail.

Involving women was not as easy as facing this realisation. Women's participation meant different things to different people, to different communities. Cultural and traditional practices and taboos had to be tackled just as strongly as men's and other elders' attitudes. Women's own conditioning to traditional attitudes, superstitious beliefs about water and waste disposal, which abound in Sri Lankan lore had to be overcome. The biggest stumbling blocks however, were individual attitudes and beliefs but apathy and indifference born of poverty, constant ill health and malnutrition.

Innovative NGOs viewed women's participation by providing health clinics for their children. Women always respond to these and bring all their children to be measured, weighed and examined by a doctor/nurse team. The captive audience of mothers is treated to posters, flash cards, skits and illustrated talks on safe water and hygiene and the way is for a smooth water sanitation programme.

WOMEN'S NGOs
Women's NGOs have the edge over others in winning women's participation. Talk of toilets and elimination of waste is easier between women and women, as the Girl Guide Association of Sri Lanka found in Beematipone, a little village in the central hills. It was a woman's story all the way, when a Buddhist nun, a former Guide, gifted land in the village to the Guides to set up a Centre. A resident Guide lives here as project officer and the Centre provides a meeting place for women. The women identified water and sanitation as basic needs. The men cooperated with them and the NGO as Guides are a respected community known islandwide in Sri Lanka.

The women admitted the need for toilets, for separate wells for drinking water and for bathing and washing clothes. They decided on the sites and took on the role of managers. Five years after the three wells and eighteen basic toilets were built, the women are still in charge. The toilet superstructures are now rather dilapidated but the insides are dry, clean and fly free. The men assist with occasional thatching of roofs and leave the credit of hygienic use to the women.
The wells are in mint condition, the aprons sparkling clean and the divisions of washing, baking and drinking are as strict as ever. There are informal caretakers — women of course! — supervised by the Guide project officer. The caretakers keep the surroundings clean and flush the drains to prevent them being blocked with mud during the rainy season.

Women's participation in the water sanitation programme has given them new insights into their capabilities — several small income generating activities have been started and links have been forged with government agricultural and medical extension services to facilitate these, and set up a nutrition centre in the village. Four other villages have enrolled their women in these activities and in March when we visited the project there was one query — when are we getting wells and toilets for other villages? This is the very satisfying challenge that the Guide are now facing!

TECHNOLOGY

It is not easy for the sophisticated western mind to grasp the attitudes of simple rural people, especially women, to deep wells and hand pumps. A well to them is an open well where one can see the water sparkle when the sun plays on it. A certain kind of tree growing by it, its roots cascading, the water means that the water in that well is pure and safe to drink. The branches overhanging the well keep the water tasty and cool. Certain kinds of fresh water fish in the water improves its quality. Resistance to using water that they do not see inside a tube well which comes to them through a pump can be grasped only if one appreciates these beliefs.

But where nature has not been so abundant with rain as in Neamatipone, deep wells and hand pumps are the only answer to women who have to walk miles to water holes or ponds and drying streams for small quantities of water for drinking, in the dry north central and north eastern parts of the country. Winning women's participation for water projects here is a different story from areas where water is plentiful. Sarvodaya, a large NGO with projects in 5000 villages islandwide has a success story.

Sarvodaya's development programmes had low participation from women in many of these villages. Water borne diseases, low productivity of the women, excessive time spent in water collection and storing were some facts that Sarvodaya identified. There was an overriding need to provide a simple low cost technology for safe drinking water conveniently at hand in these dry areas. The Sarvodaya plan was a costly one supplemented financially and technically by the International Development Research Centre, Canada and backed by research by Sarvodaya Workers. Padiyatalawa in the eastern province dry zone was selected and ten villages were identified for this innovative ambitious plan of involving women in manufacturing, repairing and maintaining hand pumps.

The first programme involved 20 girls. Ten girls were trained for two months in all aspects of technical details for constructing wells. The other ten were trained in planning fitting, welding, lathe work and smithy work required to manufacture hand pumps, at the Sarvodaya's own engineering division close to Colombo. The final training was in assembling the handpumps in monitoring, maintenance and evaluation of performance.

A central workshop was built at Padiyatalawa and equipped with machinery to manufacture hand pumps. Later ten subsidiary workshops were built in each of the selected villages to assemble, repair and maintain hand pumps in use in the village.

UNFEMININE?

It was not too difficult to select a suitable hand pump which pleased the women. But Sarvodaya had many problems in selecting women to be trained. Technical work was not that fathers wanted for their daughters. Married women had other chores, so the selectees were unmarried girls between 18 and 25. Six dropped out of the first batch when they were repeatedly told by fellow villagers that their chances of finding a husband would be minimal if they continued to repair hand pumps — an exclusively man's job and so unfeminine!

The programme, in spite of these drawbacks, has been successfully carried out for six years. Sarvodaya achieved among many things women's participation in the technological aspects of water provision. After the initial hurdles it won men's approval when it was found that men did not have to run to the pump and repair it every time some little thing went wrong! The water problem was solved and later when Sarvodaya changed its thinking and recruited young married women who had greater leisure and did not face the prospect of leaving the village for employment, the project worked even better. It is steadily growing and spreading to other water starved areas today, and in every one of the projects Sarvodaya has won hundred percent women's participation.

There is another aspect to this programme. The entry of rural girls into the field of water technology in the kind of exposed environment contrasts with women's scientific
work behind closed doors in urban laboratories. This is a major breakthrough in changing traditionally demarcated male and female work spheres and gender role perceptions that still prevail both among the women themselves and in society in general.

HEALTH WORKERS
In Punchiwilaththawa’s water/sanitation programme by the NGO Water Supply and Sanitation Decade Service (Decade Service) young women played a completely different role from the Sarvodaya programme. The village based NGO identified health education as a first priority when the Decade Service was able to get six open wells and sixty five basic toilets for its 250 families. Twenty five young school leavers, all under twenty five years of age were selected for training, first by the Decade Service and health extension staff in the village and later at the town hospital eight miles away. The training was in all aspects of health education. The focus however, was on safe water and sanitation. Long before the wells were ready or the toilets were completed, each girl had in her purview ten households where mothers, grandmothers young women and children were given the message of safe water and sanitation by the girls. Keep the wells clean, buckets away from contamination and pass on these messages to the family’s children, the girls exhorted, on their daily home visits.

Sometimes the girls were in tears! With the best of motives each girl was given the ten houses in her immediate neighbourhood whose inmates were people she had known all her life. The O. Level educated health volunteer had been the little girl the families had watched grow, smiled at every time they passed her in the village, met at the temple and at the market all her young life. Now she became an outsider, someone coming with an air of authority to tell them how to run their lives! It was tough.

But the girls won the women over and soon under the village spreading trees there were talks on safe water and hygiene illustrated with huge posters provided by the Decade Service, weighing babies, making notes and boiling water and storing them in large earthen containers covered with scraped coconut shells for safety. The girls also learnt to conduct simple surveys and within the next two years converted an unused school building and set up a nutrition centre. Weekly a nutritious meal of leaves and grains from the neighbourhood was cooked and distributed to pregnant and lactating mothers and children.

The Decade Service was able to leave the project sure of its sustainability in these capable young hands. The six wells and sixty five toilets were only the hardware for a spin off effect of better nutrition, cleaner habits and more educated mothers - and of course, women’s participation at every stage.

WOMEN MANAGERS
The Lanka Mahila Samiti (LMS) is one of the oldest women’s NGOs in the country with a network of training women at community level in all 24 districts. When it launched on a water/sanitation programme in a dry zone village of 140 families where already a committee of trained volunteers worked at grass-roots level, it went in with the philosophy that women should be involved in water and sanitation schemes not because it is they who go to the well and carry the pot of water, but because "women are a potential human resource and if they are actively integrated in water programmes at every stage there could be a definite impact on their own development".

Water and sanitation had only to be mentioned in this village and there was a ready response, from both men and women. This did not happen when other development activity was discussed - nutrition, family planning, even pre schools.

Building on this response the LMS got the women to do a house to house survey to get the actual water/sanitation picture, available water sources, toilets that were needed and then drew a map of the village. The women selected the sites, pinning flags on the map. To some women this was the first time they had seen a map, let alone drawn one! The LMS active involvement was only to assist them to get the funds. The women opened a Bank Account handled all the accounts, bought the bricks and selected the toilet sites with the advice of the health officials.

The women supervised the work and some were actual bricklayers, masons and combined these roles with those of monitor/evaluator.

Daily evaluations were conducted with the extension workers using LMS techniques of participatory evaluation.

Almost from the start of the project the women had gained a new status in the village. They specified the bathing hours at the wells and were ready to settle quarrels over the use of water... but they had a tough fight. First, they had to overcome their own
inhibitions, then the attitude of their men and the men's interference. How much the men were convinced we will never know. But after some time the husbands, male officials in the village, the school teacher and the monk in the temple agreed to let the women handle the project – they saw a new role for the women, other than cooking their meals and waiting on them.

The promise of the project could not be seen in full. No evaluation was possible. The project had to be abandoned some time later due to terrorist activity in this part of the country. But the LMS is determined to replicate the idea in another village to enable women to win greater participation in water/sanitation programmes as a stepping stone to being full partners in other areas of development, painting a new status in their communities and fulfilling their potential.

A CONTRAST
The Kitulawa project – a small wet zone village subject to periodic flooding – is a study in contrasts. The provision of basic toilets to this rural community was a Gildes project where a conscious effort was made to involve women in mainstream activities in sanitation and water. The Gildes used the pre school related Mother Group as a focal point for discussion on health and nutrition problems and their relationship to water and sanitation, thus motivating the women to participate actively in the programme. The 100 toilets were completed on schedule, sited where the women wanted and health education going on space long before they were completed. A visit this year – six years after they were completed – confirms their use and hygienic maintenance. The health officials report positively that diarrhoeal disease is much less. The toilets still look good, their floors have no cracks the roofs are in repair and the doors lock securely.

The six deep wells that were given to the village at the same time show less success. Women's participation was symbolised only by one of the wells being dug by the women. The participation ended there and six months after they were completed the handpumps were rejected by the community. The water from the tube wells was used only for washing as the women did not "trust" the water. Drawn through a handpump was it safe enough for drinking? There was a rusty colour and taste and the women did not use it for cooking. They did not even like to bath in the well water as the "hair turned brown". Today, six years later we find that the handpumps in three of the wells are not in working order.

The iron removal filters fitted at a later date for controlling excessive quantities of iron were broken and the pump in the well near the pre school which serves as a demonstration unit to the community is in a state of disrepair. The pre school kids have no source of water at hand.

The trained pump caretakers are all male and only one lives in the village. There has been no response to requests to have the pump repaired which is serious and needs expert help. Earlier there had been other development activity for the women, skills training in handicrafts batik printing and packeting condiments. Today there is no evidence of sustenance of women's involvement, though the pre school remains a potential focal point for such development.

SHARING EXPERIENCES
These are not great success stories of NGO efforts of winning and sustaining women's participation. But they are a good beginning. Sri Lankan NGOs will always require special efforts to achieve women's participation and will need to address cultural constraints and barriers to women's participation in public.

Male attitudes must be overcome. More women in NGOs and more women's NGOs will have to be catalysts to involve women at every level. Women's role models are needed for rural women to be more comfortable assuming new roles. The basic idea that water and sanitation is a masculine field will need to be revolutionised and the entire field feminized.

It has taken a decade for this process to get going. We have thanks to NGOs, reached a point where no longer is the concept to women's participation a source of amusement and resistance. At the highest levels they are realising the importance of full participation of women. But questions remain. The most important is 'how' in our little village, in my developing country, do we win the full participation of women? The strategies may not be so different from your little village in your highly developed country. Let us share them.