Consultancy Services for Social Awareness of Strengthening Access of Women and Vulnerable Groups in Selected LICs to Improve Water and Sanitation Services for Asian Development Fund (ADF) Grant associated with DESWSP, Dhaka WASA.

Module for Training on

‘Gender Inclusive Community Engagement in WASH’

For Dhaka WASA staff

Produced & Implemented by

Dushtha Shasthya Kendra (DSK)

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Introduction

The training on 'Gender Inclusive Community Engagement in WASH' is a collaborative effort between Dhaka WASA, DSK, and ADF facilitators. It targets staff from various MODS Zones, divisions, and projects at the Head Office, to enhance their knowledge and skills in community engagement related to Water, Sanitation & Hygiene (WASH) programs. The primary objective was to empower the participants to better serve women and vulnerable groups, ultimately leading to improved WASH services and practices.

The training will take place in two batches on the 5th and 6th of March 2024, respectively. The venue for both batches will be the Shitalakshya Multipurpose Hall, located on the 3rd floor of the Dhaka WASA Bhaban in Kawranbazar, Dhaka.

By combining the expertise of DSK, Dhaka WASA, and ADF facilitators, the training will offer a comprehensive and diverse perspective on gender-inclusive community engagement in Dhaka WASH initiatives, services & practices. This collaborative approach will enrich the joint learning experience for the participants and the facilitators; and will increase the effectiveness of the training program.

The training will appear to be a well-organized effort to equip Dhaka WASA staff with the necessary knowledge and skills to promote gender-inclusive community engagement in WASH programs, ultimately contributing to improving WASH services and practices in the target areas.

Training Objectives

1. To understand the benefits, ways, means, and values of meaningful 'Community Engagement' in WASH.
2. To increase skill regarding 'Provider – Clients' compliance on community engagement in WASH services.
3. To understand WASH – Health relevance and the communicable diseases.

Training Event Information

Subject: 'Gender Inclusive Community Engagement in WASH' Training for Dhaka WASA staff
Date: 1st Batch 5 March and 2nd Batch 6 March, 2024
Venue: Shitalakshya Multipurpose Hall, 3rd Floor, Dhaka WASA Bhaban, Kawranbazar, Dhaka.

Training Participants

The training participants will be Dhaka WASA staff; from different MODS Zones (in Batch 1), and divisions & projects at the Head Office (in Batch 2).

Training Content & Schedule

SN	Contents	Facilitator	Methodology	Time
1	Introduction, Objectives of the Training, Expectations	Dr. Kallol Chowdhury Training Expert, DSK	VIPP method, Brainstorming, ppt.	10:00-10:10 AM
2	Inauguration of the training	Uttam Kumar Roy Commercial Manager Dhaka WASA Ms. Quamrun Naher Laily Superintending Engineer Saidabad Phase III Project	Speech	10:10-10:20 AM
3	Overview of the DESWSP & Dhaka WASA activities	Md. Azizul Haque SE. & DPD-1 DESWSP, Dhaka WASA/ Gazi Habibul Haider Executive Engineer & DPD-2 DESWSP, Dhaka WASA	Speech, Interactive plenary with ppt.	10:20-10:30 AM
4	Overview of the ADB	Sinora Chakma Social Development and Gender Specialist ADB, BRM	Speech, Interactive plenary	10:30-10:40 AM
5	Importance of Community Engagement in DESWSP, Dhaka WASA activities	Mostafijur Rahaman Executive Engineer, DESWSP Dhaka WASA	Interactive plenary with ppt.	10:40-10:50 AM
6	Overview of the ADF Grant	Md. Shahidul Islam Procurement Officer	Interactive plenary with ppt.	10:50-11:00 AM
	Tea Break			11:00-11:15 AM
7	Overview of Community Toilet	Sayed Nesar Ahmmed Grant Coordinator, ADF Grant DESWSP, DWASA	Interactive plenary with ppt.	11:15-11:30 AM
8	Importance of Gender-Inclusive Community Engagement	Dr. Rita Sen Gender and Social Development Expe	Interactive plenary with ppt.	11:30-11:40 AM
9	Ways, Means & Values in Meaningful Community Engagement	Rukon Uz Zaman Com. Mobilization Expert, DSK Dr. Kallol Chowdhury, Training Expert, DSK	Interactive plenary with ppt.	11:40-12:30 PM
10	Social Behavior Change Strategy with SDG and Five Domains of Hygiene	Sanjida Jahan Ashrafi BCC Expert, Team Leader, DSK	Interactive plenary with ppt.	12:30-1:00 PM
	Lunch			1:00 - 2:00 PM
11	Scopes of Community Engagement in WASH Includes Water Safety Plan (WSP), Hygienic Toilets, Personal Hygiene (Hand	Sanjida Jahan Ashrafi BCC Expert, Team Leader, DSK	Group works, Interactive plenary with PPT.	2:00-3:00 PM

	washing and Menstrual Health Management), Food Hygiene, and Environmental Hygiene			
12	Communicable Diseases and Epidemiology	Dr. Kallol Chowdhury Training Expert, DSK	Interactive plenary with ppt.	3:00- 3:30 PM
	Tea Break			3:30- 3:45 PM
	Continuation of the previous session	Continue	Do	3:45- 4:00 PM
13	Training Feedback	Dr. Kallol Chowdhury Training Expert, DSK	VIPP method	4:00 - 4:15 PM
14	Closing	Dr. Md Mizanur Rahman Deputy Managing Director (R P & D)/ Md. Wahidul Islam Murad SE, PD- PMU, DESWSP, Dhaka WASA	Closing Speech	4:15- 4:30 PM

Training Logistics

Marker, VIPP cards, Black ribbon, A4 white Papers, sign pens, writing pens, projector with screen, laptop, presentations, handouts, etc.

Training Session Details

Session 1: Introduction, Objectives of the Training, Contents, and Expectations

- Facilitator: Dr. Kallol Chowdhury, Training Expert, DSK
- Methods: Self-introductions, ppt. Presentation, VIPP method, Brainstorming.
- Time: 10:00-10:10 AM
- Steps:
    - Participants will introduce themselves. Any interesting relevance can be discussed.
    - Presentation to show & discuss about the training objectives & contents.
    - VIPP card distribution (1 card/participant) to collect participants' expectations.
    - Session conclusion.
- Expected Session Output: Participants feel informed & comfortable. A safe & friendly environment is created, and participants' expectations are captured and accommodated within the subsequent training sessions.

Session 2: Inauguration of the Training

- Inauguration by: Uttam Kumar Roy Commercial Manager Dhaka WASA/ Ms. Quamrun Naher Laily Superintending Engineer Saidabad Phase III Project
- Method: Speech on relevant issues.
- Time: 10:10-10:20 AM
- Expected Session Output: Participants will gain insights into the scopes & necessity of gender-inclusive community engagement in Dhaka WASA activities in a broader context.

Session 3: Overview of the DESWSP & Dhaka WASA

- Facilitator: Md. Azizul Haque SE. DPD-1, DESWSP, Dhaka WASA/ Gazi Habibul Haider Executive Engineer & DPD-2, DESWSP, Dhaka WASA.
- Method: Speech and Interactive plenary with PPT.
- Time: 10:20-10:30 AM
- Expected Session Output: Participants will acquire an understanding of the specific goals and components of the Dhaka Environmentally Sustainable Water Supply Project, DESWSP, and Dhaka WASA.

Relevant information of Session 03:

Dhaka Water Supply and Sewerage Authority (Dhaka WASA)

Dhaka Water Supply and Sewerage Authority (DWASA) was established in 1963 as an independent organization with the mandate of Water Supply and Sewage disposal to the city dwellers of Dhaka.

Its activities have been reorganized by 'The WASA Act, of 1996' and according to this act, DWASA is now operating as an autonomous body with corporate culture in its management and operation.

Vision

To be established as Asia's best public sector water provider through environmentally friendly, people-oriented, and sustainable water management.

Mission

- Organizations providing the best customer service;
- Increasing the use of surface water by reducing dependence on groundwater;
- Formulation of corporate systems in management and governance;
- Ensuring high standards of transparency and accountability in all services and activities;
- Increasing efficiency and reducing operational costs in all activities of Dhaka WASA.

Dhaka WASA Turnaround Program

Strategies

- Change of mindset
- Transparency
- Accountability
- Excellence in Customer Service
- Cost-effective management
- Institutional Reform for Capacity Building

Strategic Actions

- Water Master plan
- Sewerage Master plan

Water Supply Demand vs Production

On 2009

- Water demand: 360 sq. km service area with 12.50 million people with a demand of almost 2120 million liters per day (MLD)
- Water production: Water production of Dhaka WASA was 1880 million liters per day (MLD)

On 2023

- Water Demand: 400 sq. km service area with 22 million population, present daily demand is 2600 million liters per day (MLD)
- Water production: Water production of Dhaka WASA 2700 million liters per day (MLD).

Low Income Community (LIC)

The biggest LIC of Dhaka city named "korail Bosti, Sattala Slum, Bhasantek slum" has already been covered with a legal water connection. By June 2025, all Low-Income Communities (LIC) of Dhaka city will be covered through legal water connections.

Session 4: Overview of the ADB

- Facilitator: Sinora Chakma, Social Development and Gender Specialist ADB, BRM
- Method: Speech and Interactive plenary.
- Time: 10:30-10:40 AM
- Expected Session Output: Participants will know about ADB and its role in this project.

Session 5: Importance of Community Engagement in DESWSP, Dhaka WASA activities

- Facilitator: Mostafijur Rahaman, Executive Engineer, DESWSP, Dhaka WASA
- Method: Interactive plenary with PPT.
- Time: 10:40-10:50 AM
- Expected Session Output: Participants will understand about the importance of community engagement including the specific target & activities of the Dhaka Environmentally Sustainable Water Supply Project, DESWSP.

Relevant information of Session 05 :

Community engagement in water, sanitation, and hygiene (WASH), in DESWSP

Community engagement in water, sanitation, and hygiene (WASH) is a dynamic process that aims to improve the health and economic status of a community.

It can help to:

- Improve success of WASH projects
- Increase community control over the impact of WASH responses
- Motivate people to make positive changes
- Strengthen the capacity to reduce public health risks
- Help people make their own decisions
- Create resilient communities
- Contribute to livelihoods, school attendance, and dignity

Benefits of Community Engagement

- Improved Access to Safe Water
- Enhanced Sanitation Facilities
- Promotion of Hygiene Practices
- Sustainability of WASH Programs

Community engagement can be achieved by ---

- Jointly identifying problems
- Addressing concerns and ideas
- Identifying opportunities
- Establishing peer education programs
- Co-designing and co-producing WASH interventions
- Involving women in WASH
- Understanding how people view risk and cope in a crisis
- Focusing on marginalized and less powerful members of a community
- Promoting hygiene to prevent disease outbreaks

Session 6: Overview of the ADF Grant

- Facilitator: Md. Shahidul Islam, Procurement Officer, DESWSP, Dhaka WASA.
- Method: Interactive plenary discussion with PPT. presentation
- Time: 10:50-11:00 AM
- Expected Session Output: Participants will be well-informed about the Asian Development Fund (ADF) Grant associated with the project.

Relevant information of Session 06:

Project Title

Social Awareness of Strengthening Access of Women and Vulnerable Groups in Selected Slums to Improve Water and Sanitation Services for Asian Development Fund (ADF) Grant associated with DESWSP, Dhaka WASA.

Project Aim

To improve access to water and sanitation and promote legal empowerment of women and vulnerable groups in low-income communities (LIC) in DESWSP's commanding and surrounding areas in Dhaka.

The project aim has developed in line with the Project Administration Manual (PAM) of ADB; Output 4: Empowerment of women and vulnerable groups supported.

Partnership Output

- **Output 1: Access of women and vulnerable groups** in selected slums to improved water and sanitation services strengthened
- **Output 2:** Sectoral policies, planning, and capacity for **Gender-responsive and socially inclusive responses to WASH** challenges strengthened.
- **Output 3: Participation** of women and vulnerable groups in water, sanitation, and **slum governance strengthened,** and mechanisms for **their legal empowerment** developed.

Project Information

Contract Signed	17 September 2023
Contract Ref No	46.113.618.00.00 S-04(Vol -2).DESWSP.2023.7833
Note to Proceed Date (Dhaka WASA Memo)	18 September 2023
Commencement Date DSK Memo	21 September 2023
REP No	ADF-RFP-07
Project Period	21 September 2023 to 20 September 2025 (24 Months)
Funded by	Asian Development Fund (ADF) & GoB
Executing Agency (EA)	DESWSP, Dhaka WASA
Consultancy Agency	Dushtha Shasthya Kendra (DSK)
Implementing LICs	41 slums in Dhaka DNCC/DSCC
Contract Value (Total Budget)	BDT 3,15,12,000.00 (Excluding VAT and Tax) BDT 4,00,20,240.00 (Including VAT and Tax)

Deliverables

D1- Office set up and staff mobilization.

Output-1: Access of women and vulnerable groups in selected slums to improved water and sanitation services strengthened

D2- Develop and undertake an awareness campaign and mobilize communities

D3- Conduct training on how to read the meters that will be installed and how to understand the new bills, which will be sent out in due course along with the improved methods of payment, along with operation and maintenance of the water and sanitation facilities

D4- Providing training to the Community-based Organizations (CBOs), WUGs, and DWASA staff on respective issues

D5- Monitor the performance of field-based workers ensuring that all assigned work is delivered within the relevant timeframes to all locations

Output-2: Sectorial policies, planning, and capacity for gender-responsive and socially inclusive responses to WASH challenges strengthened.

D6- Assist in the implementation of and reporting on the relevant areas of the gender action plan

D7- Expansion and operation of DWASA's existing Gender Equality Strategy at the community level and institutional level

D8- Develop Gender-responsive and socially inclusive emergency response plans, prepare communication strategy and raise awareness

Output-3: Participation of women and vulnerable groups in water, sanitation, and slum governance strengthened, and mechanisms for their legal empowerment developed

D9- Provide leadership and coordination training for women and vulnerable groups for their adequate representation and participation in community-level decision-making structures

D10- Support women and vulnerable groups in the slum areas to get access to improved water and sanitation services

D11- Orient existing leaders and youth on the importance of the participation of women and vulnerable groups in decision-making

D12- Periodic Reporting; Monthly, Quarterly, Project Completion

Tea Break: 11:00 -11:15 AM

Session 7: Overview of Community Toilets

- Facilitator: Sayed Nesar Ahmmed, Grant Coordinator, ADF Grant DESWSP, Dhaka WASA.
- Method: Interactive plenary discussion with PPT. presentation
- Time: 11:15-11:30 AM
- Expected Session Output: Participants get specific information about the specific targets, installation plans & types of Community Toilets, under the scope of the project.

Relevant information of session 07:

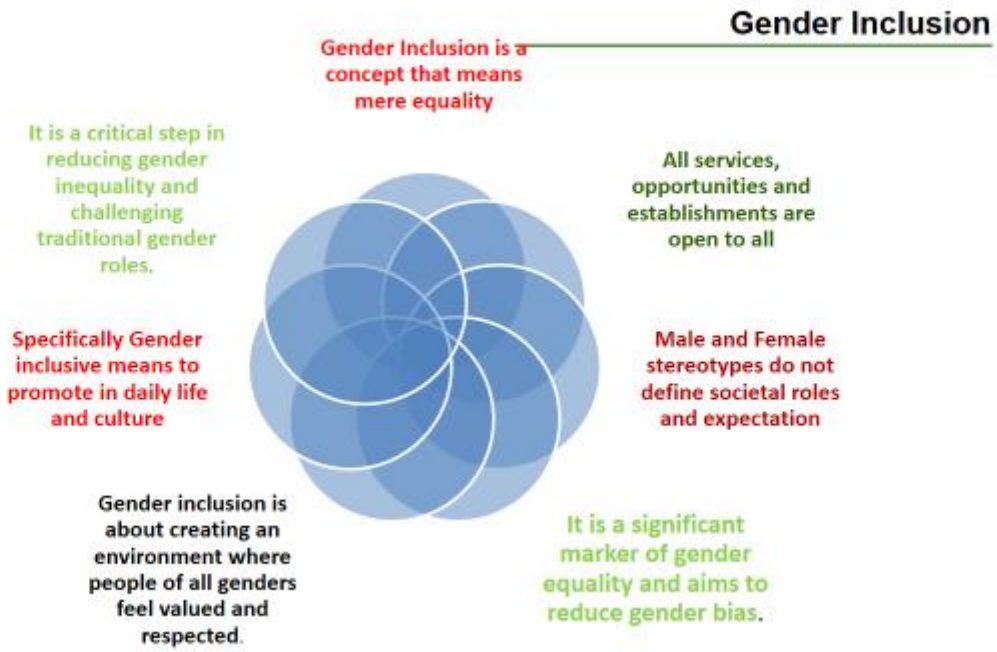
Output	Description	Lot No.	Total Cost (mBDT)	Sub (mBDT)	Net (mBDT)	Taxes (mBDT)
Output-1	Civil works					
A.	Construction of 100 units structure of 300 toilets and bathing facilities	Lot-1	36.0	36.0	30.6	5.4
B.	Construction of 200 units structure of 600 toilets and bathing facilities	Lot-2	72.0	72.0	61.2	10.8
C.	Construction of 200 units structure of 600 toilets and bathing facilities	Lot-3	72.0	72.0	61.2	10.8
D.	Construction of 200 units structure of 600 toilets and bathing facilities	Lot-4	72.0	72.0	61.2	10.8
E.	Construction of 200 units structure of 600 toilets and bathing facilities	Lot-5	36.0	36.0	30.6	5.4
F.	Construction of onsite /offsite collection , Treatment & disposal system	----	35.0	35.0	29.75	5.25
	Total in Equivalent mBDT		323	323	275	48
	Total in Equivalent mUSD		3.82	3.82	3.2453	057

Total in m BDT: 323; Total in Equivalent mUSD: 3.82; (1 USD=84.6 BDT. Date: 28 Oct-2020)

Session 8: Importance of Gender-Inclusive Community Engagement

- Facilitator: Dr. Rita Sen, Gender and Social Development Expert, DSK.
- Method: Interactive plenary discussion with PPT. presentation
- Time: 11:30-11:40 AM
- Expected Session Output: Participants will realize the Importance of Gender-Inclusive Community Engagement, and will be familiar with social safeguards, and gender & inclusion issues, in relevance to the DHAKA WASA & ADF Grant.

Relevant information of session 08:

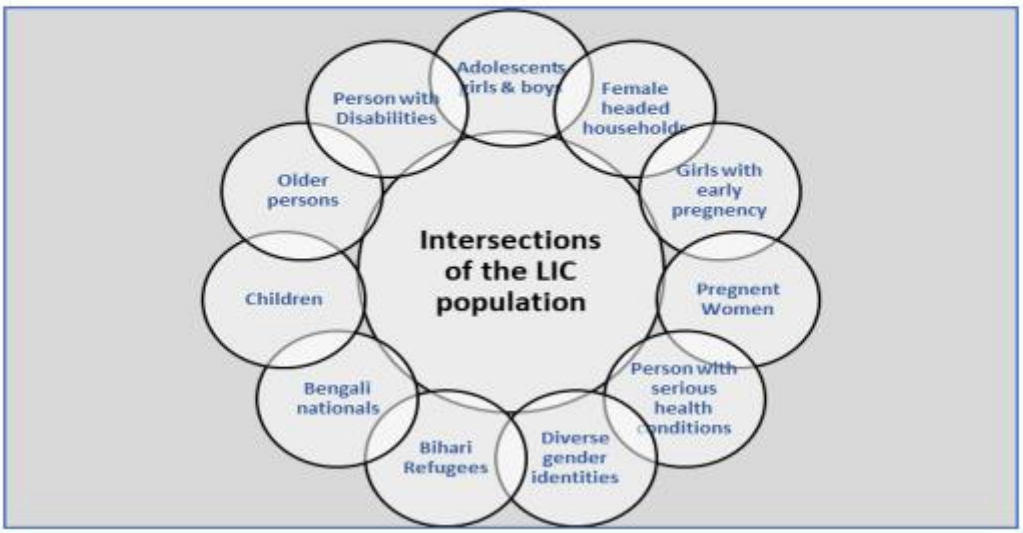


Community Engagement

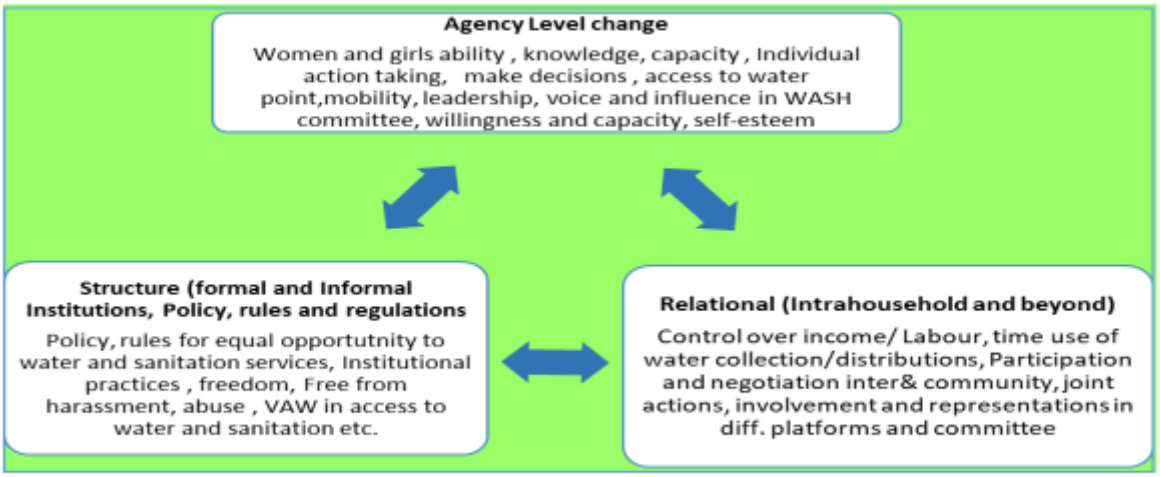
Community Engagement is...

- Process of working collaboratively through groups of people
- The community work for special interest, or similar situations to address issues affecting the well-being of them
- It is a powerful vehicle for bringing about environmental and behavioral changes
- It will improve the health (water, toilet , hygiene) of the community and its members
- It often involves partnerships and coalitions that help mobilize resources

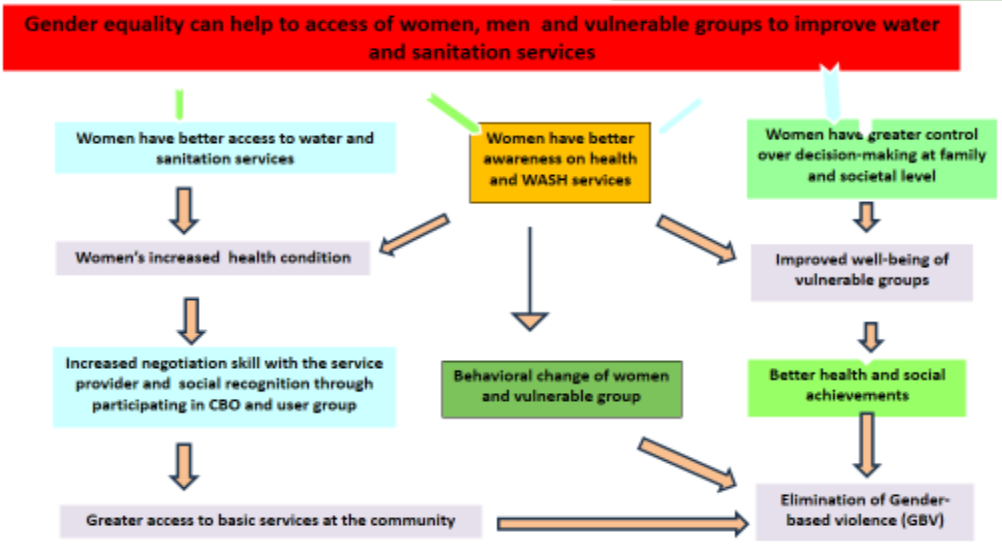
Slum Population



Changes that we expect from the Project



Compound effects of Gender Equality



Session 9: Ways, Means & Values of Meaningful Community Engagement

- Facilitator: Dr. Kallol Chowdhury, Training Expert, DSK; and Rukon Uz Zaman, Com. Mobilization Expert, DSK
- Method: Interactive plenary discussion with PPT. presentation
- Time: 11:40 -12:30 PM
- Expected Session Output: Participants gained knowledge about ways, means, and values of meaningful 'Community Engagement'; and became more skilled regarding 'Provider – Clients' compliance on community engagement in WASH services. Also learned the principles, values, strategies & techniques for managing emotions, attitudes, and behaviors in a professional setting.

Relevant information of session 09:

Meaningful 'Community Engagement' in Water, Sanitation, and Hygiene (WASH) programs
towards creating healthy and resilient communities …

Opportunities & Steps …

1. **Assessment and Understanding**

- Assess the existing WASH situation in the community, including needs and challenges about water sources, sanitation facilities, hygiene practices, and related issues.
- Conduct surveys, interviews, and observations to gather information.
- Identify gaps in access to clean water, sanitation facilities, and hygiene practices.
- Understand the community's demographics, culture, beliefs, social, and economic dynamics that influence WASH behaviors and practices.
- Prioritize areas for intervention based on the severity of need and available resources.

2. **Stakeholder Identification and Mapping**

- Identify key stakeholders, including community leaders, local authorities, NGOs, and other relevant organizations.
- Identify community leaders, influencers, and stakeholders who can facilitate engagement.
- Map out their roles, interests, and influence in the community regarding WASH.

3. **Building Trust and Relationships**

- Establish trust and build relationships with community members.
- Communicate openly, listen actively, and involve them in decision-making processes.
- Respect cultural norms, traditions, and values to foster mutual respect and understanding.

4. **Community Mobilization and Participation**

- Engage the community through meetings, workshops, and participatory approaches to raise awareness about WASH issues.
- Encourage active participation and involvement of community members in decision-making processes and project implementation.

5. **Capacity Building and Training**

- Provide training and capacity-building sessions on WASH-related topics such as water treatment, sanitation, hygiene promotion, and maintenance of facilities.
- Educate them on WASH principles, practices, and maintenance techniques.
- Foster leadership skills and promote ownership of WASH infrastructure and initiatives.
- Empower community members, including women and marginalized groups, with knowledge and skills to take ownership of WASH initiatives.

6. **Collaborative Planning and Implementation**

- Collaborate with community members and stakeholders to develop WASH action plans tailored to the community's needs and resources.
- Ensure that plans are inclusive, feasible, and address community priorities.
- Encourage participation from diverse groups within the community, including women, youth, and marginalized populations.
- Implement WASH interventions according to the agreed-upon action plan.
- Involve community members in construction, installation, and maintenance activities.
- Implement WASH interventions in partnership with the community, ensuring transparency, accountability, and sustainability.

7. **Monitoring and Evaluation**

- Establish monitoring and evaluation mechanisms to track the progress & impact of WASH interventions.
- Collect data on indicators such as access to clean water, sanitation coverage, and hygiene behaviors.
- Conduct regular evaluations to assess the effectiveness of interventions and identify areas for improvement.
- Use feedback from community members to adapt and improve strategies as needed.

8. **Behavior Change Communication (BCC)**

- Design and implement people centered behavior change communication strategies to promote healthy WASH behaviors.
- Utilize various communication channels and tools, including community meetings, posters, radio, and drama, to convey messages effectively.

9. **Resource Mobilization and Sustainability**

- Mobilize resources from government agencies, donors, and other stakeholders to support WASH initiatives.
- Promote sustainable practices, including community ownership, cost recovery mechanisms, and long-term maintenance plans for WASH infrastructure.

10. **Advocacy and Policy Influence**

- Advocate for policies and regulations that support improved access to WASH services and facilities.

- Collaborate with local authorities and decision-makers to prioritize WASH on the development agenda and allocate sufficient resources for implementation.

11. **Continued Engagement and Adaptation**

- Maintain ongoing engagement with the community to address emerging challenges and opportunities in WASH.
- Adapt strategies and interventions based on feedback, lessons learned, and changing circumstances to ensure long-term impact and sustainability.

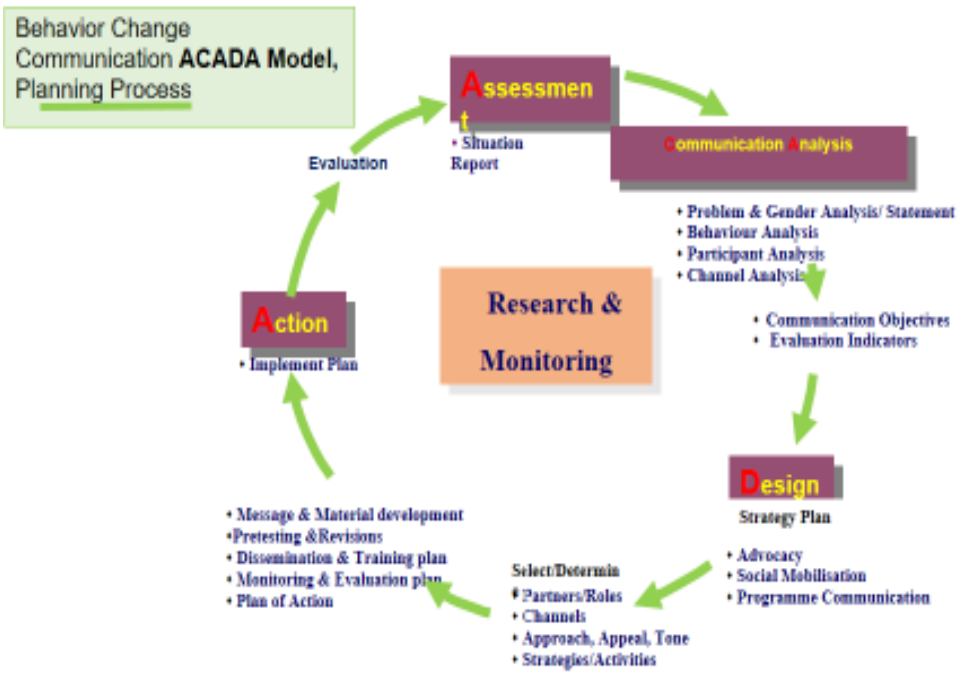
12. **Celebrating Success and Sustainability**

- Celebrate achievements and milestones with the community.
- Reinforce the importance of continued WASH practices and maintenance.
- Explore opportunities for long-term sustainability through local partnerships and capacity building.

Session 10: Social Behavior Change Strategy with SDG and Five Domains of Hygiene

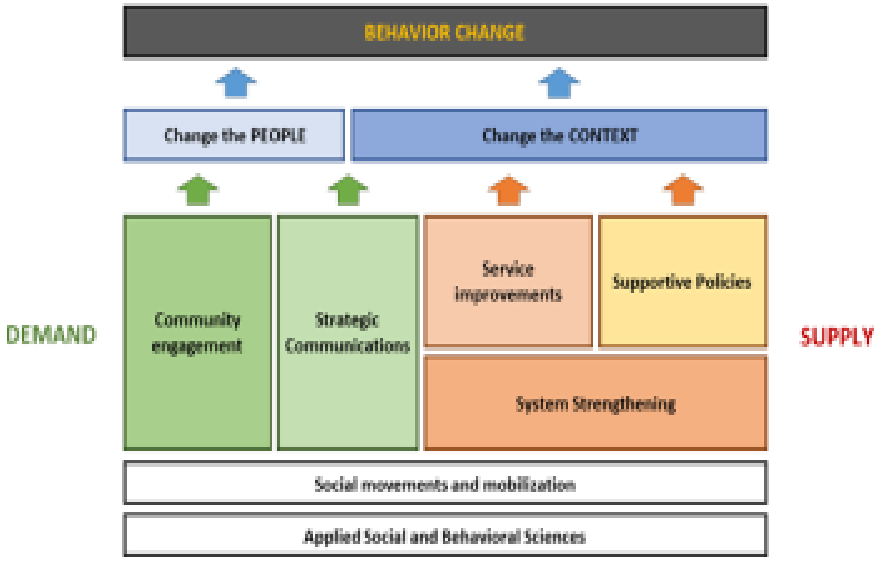
- Facilitator: Sanjida Jahan Ashrafi, BCC Expert, Team Leader, DSK.
- Method: Interactive plenary with ppt. presentation
- Time: 12:30-1:00 PM
- Expected Session Output: Participants learned about the effective strategies for influencing social behavior change in the awareness-raising programs. Also got insights about Sustainable Development Goals (SDGs) and Five Domains of Hygiene.

Relevant information of session 10:



Behavior Change Communication Strategy

Area Selection and Rapport Building	Situation Analysis	Audience Segmentation
Needs Assessment and Action Plan	Develop Key Messages and Materials	Capacity Building
Community Engagement	Partnership	Monitoring and Evaluation



- For the demand side there will be intensive community endangerment and strategic communication with the CBOs and community. Thus people will change their behavior.
- In the supply side, there will be intervention on the system strengthening of public service providers, service improvement, and provision of supportive, pro-poor policy and legal rights. Thus it will influence the change in the context.
- Throughout the process, there will be social mobilization and behavior change campaign to change the key behavior of the community.

WASH SDG Targets and Indicators

SDG targets (2016 – 2030):

- Achieve universal and equitable access to safe and affordable drinking water for all
- Achieve access to adequate and equitable sanitation and hygiene for all and end open defecation paying special attention to the needs of women and girls and those in vulnerable situations

SDG targets indicators:

- Percentage of the population using safely managed drinking water services
- Percentage of the population using safely managed sanitation services, including a hand-washing facility with water and soap

WASH SDG Targets and Indicators

Water Supply: Population using an improved drinking water source which is:

- **Accessible**: located on premises
- **Available**: available when needed
- **Safe**: free of feacal and priority chemical contamination

Sanitation: Population using an improved sanitation facility (including a handwashing facility with water and soap) that is:

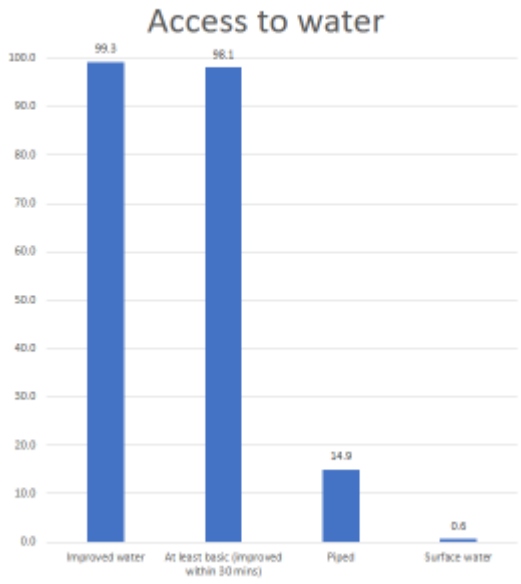
- not shared with other households
- excreta are safely disposed in situ or transported and treated off-site

Sanitation ladder (WHO and UNICEF)

Service level	Definition
Safely managed	Use of improved facilities that are not shared with other households and where excreta are safely disposed of in situ or removed and treated offsite
Basic	Use of improved facilities which are not shared with other households
Limited	Use of improved facilities shared between two or more households
Unimproved	Use of pit latrines without a slab or platform, hanging latrines or bucket latrines
Open defecation	Disposal of human faeces in fields, forests, bushes, open bodies of water, beaches and other open spaces or with solid waste

Note: Improved sanitation facilities are those designed to hygienically separate excreta from human contact, and include: flush/pour flush toilets connected to piped sewer systems, septic tanks or pit latrines; pit latrines with slabs (including ventilated pit latrines), and composting toilets

Where is Bangladesh in terms of progress towards the SDGs?



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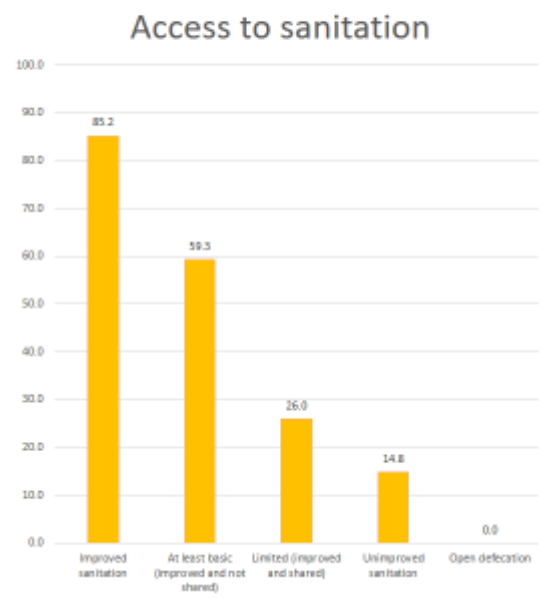

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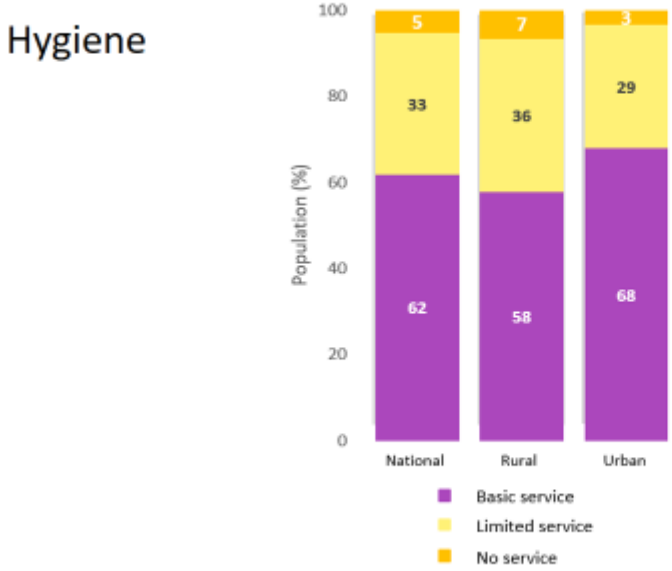


Lunch Break: Time: 1:00 - 2:00 PM

Session 11: Scopes of Community Engagement in WASH, Includes Water Safety Plan (WSP), Hygienic Toilets, Personal Hygiene (Hand washing and Menstrual Health Management), Food Hygiene, and Environmental Hygiene.

- Facilitator: Sanjida Jahan Ashrafi, BCC Expert, Team Leader, DSK.
- Method: Group works, Interactive plenary with PPT.
- Steps:
  - Group work:
    Total 5 groups to form; and brief the participants that, each group will work on each of the 5 Domains of Hygienic Behavior. The 5 domine topics are – G1. Safe Sanitation, G2. Safe water, G3. Personal Hygiene, G4. Food Hygiene, G5. Environmental Hygiene.
  - Presentations & discussion on the group works.
  - Summarization of the group work outputs.
  - Interactive plenary with ppt.
  - Session summary & closing.
- Time: 2:00-3:00 PM
- Expected Session Output: Participants acquired updated & practical-oriented knowledge on safe sanitation, water safety, and hygienic practices, including food and environmental hygiene.

Relevant information of session 11:

National Strategy Paper on Promotion of Revised Healthy Behavior, 2022

Objectives

- Ensuring sustainable use of improved and safe water supply systems, safe sanitation and handwashing infrastructure;
- Reducing the incidence of water and sanitation-related diseases and reducing the immediate impact of the Covid-19 pandemic and other infectious diseases such as dengue, chikungunya and bird flu by developing an integrated hygienic behavior and capacity building enabling environment; and
- Strengthening multisectoral coordination and developing integrated initiatives at national and local levels to promote healthy behavior through the participation of relevant stakeholders.

Healthy behavior

- **Hygiene** is a state and practice that helps protect health and prevent the spread of disease, and maintained through hand washing, menstrual hygiene management, following safe food practices, and maintaining a clean environment.
- Hygienic behavior refers to behavior that promotes safe hygienic behavior practices in a wide range of ways to keep people and their environment clean, enhance social status, prevent the spread of disease, reduce malnutrition and maintain good health.

Behavioral Domains

1. **Safe sanitation** practices and sewage disposal i.e. hygienic behavior regarding sanitation;
2. Hygienic practices related to **safe water**, means selection, use, and storage of safe water sources and safeguarding water during water collection, transportation, storage, and use;
3. **Personal hygiene** including hand washing, menstrual hygiene, and use of basic protective equipment (eg: masks, hand gloves, etc.);
4. **Food hygiene** / clean eating, means hygiene during the preparation and serving of food items;
5. **Environmental sanitation** like small sewer and household waste management, rural or urban waste management, epidemic-related waste management, etc.).

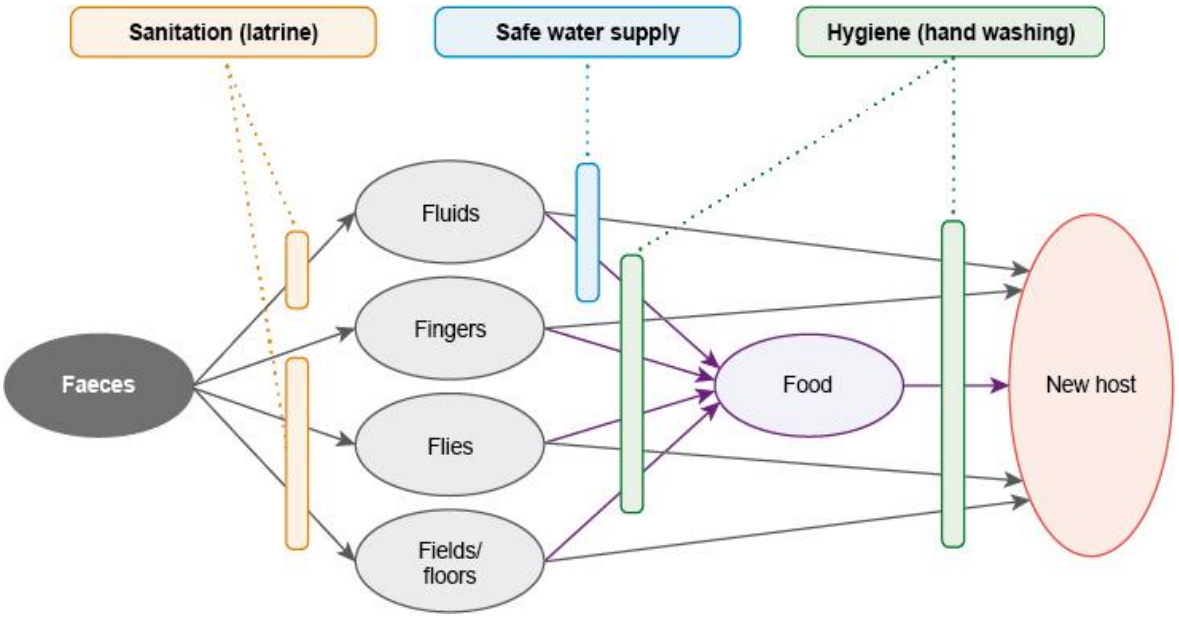
Initiatives to promote hygiene and basic sanitation practices in Bangladesh

Hygiene practice programs have been implemented for a long time by the initiative of national and international organizations in Bangladesh to promote hygiene activities, which have already had a great impact on the improvement of hygiene throughout the country.

Initiatives to promote hygiene activities include -

- Global Handwashing Day (GHD) – 15 October
- World Toilet Day (WTD) – 19 November
- Hand Hygiene for All (HH4A) – Adoption of a roadmap to achieve 100% Hand Hygiene for All
- International Menstrual Health Day (MHD) – 28 May
- World Water Day (WWD) – 22 March
- National Sanitation Month – October (National Sanitation Campaign)
- World Environment Day -5th June

F Diagram of germ infection from faeces



Features of hygienic toilet

- Faeces/excreta will be covered, and not visible from the outside.
- Toilets should be protected from the entry of flies or insects.
- The odorous gas generated in the toilet should be vented out through a properly installed pipe.
- Toilets should have doors, walls, and roofs.
- There will be special arrangements for menstruating or pregnant women.
- Additional space should be provided where clothing used during menstruation can be safely changed and washed.
- For physically challenged people, proper handles should be there for lifting and sitting and also should have a ram.

Safe water

Water that is free of dirt, garbage, waste, and sterile, tasteless, odorless, and colorless, and contains controlled levels of other chemicals (arsenic) and minerals is called safe water.

Source of safe water

Currently, Bangladesh's most common sources of safe water are groundwater, surface and rainwater.

Ground water

- Tubewells (Deep and Shallow Tubewell, Dipset Pumps etc.)
- Supply Water (piped water supply)
- Protected Ring Well (Safe Water)

Surface water

- River and pond water
- Protected fountains
- Rain water

Water Safety Plan (WSP)

Keep the water source clean & safe	Collect in clean container	Transport in covered container	Preserrve in covered container	Serve/drink without touching

Personal Hygiene

Personal hygiene is how we take care of our bodies. Keeping ourselves clean makes us feel good about ourselves and keeps all of us healthy.

Personal hygienic practices

- Brushing our teeth
- Washing our hands
- Wearing clean clothes
- Showering or bathing regularly
- Keeping body fresh and clean

Hand washing

Washing hands with soap and clean, running water is one of the best ways to prevent spreading many diseases and conditions.

Wash both hands with soap and soap at 6 important times

1. Before taking the meal
2. Before feeding the baby
3. Before preparing and serving food
4. After defecating yourself
5. After toileting the child
6. After cleaning the garbage

Steps for hand washing

- Rinse your hands with water
- Apply enough soap to cover all hand surfaces
- Rub your hands together palm to palm
- Use your right palm to rub the back of your left hand, and vice versa
- Rub your palms together with your fingers interlaced
- Rub the backs of your fingers against the palms of your opposite hands with your fingers interlocked
- Rotate your left thumb in your right palm, and vice versa
- Rotate your hands back and forth with your clasped fingers in your opposite palm, and vice versa
- Rinse your hands with water
- Use a single-use towel to dry your hands thoroughly

Menstrual healthcare

- The normal process of bleeding from the body of women and girls every month is called menstruation. Menstruation is a normal physical process in girls & women.
- This menstrual bleeding is considered a special time for women.
- Menstruation in women and adolescents usually begins at age 10 and can continue until age 55. Some may start before the age of 10 and may stop before the age of 55
- The menstrual cycle revolves around 28 days. Bleeding usually lasts for 3 to 7 days. This onset of menstruation means that the adolescent girl can achieve motherhood.

Some myths/superstitions around menstruation

- Menstruation is a very shameful and secret matter!
- Girls & Women are considered unholy/impure during menstruation!
- During menstruation, girls & women should not go near to the elder people!
- During menstruation, girls & women shouldn't have to take a bath every day and should drink less water!
- During menstruation, girls & women shouldn't eat fish, milk, etc.!
- During menstruation, girls & women shouldn't touch any delicate food (like cakes, pickles, sweets, etc.), as it may spoil the quality of the food!
- During menstruation, girls & women shouldn't eat together with everyone else in the house!
- Should not participate in any religious rituals!
- Women and girls should not cut nails and hair during menstruation!
- During menstruation, girls & women are prohibited from entering into the house of the newborn, and not allowed to hold the new baby!

Current status of menstrual hygiene management in Bangladesh

- Menstrual hygiene is a topic that most women are afraid to discuss in public
- Bangladeshi girls and women face major problems in this regard which they suffer in silence
- It restricts the mobility, safety, and employment of girls and women
- According to the 2018 National Hygiene Follow-up Survey
  - Only 53% school girls are informed about menstruation
  - 30% of female students are absent from school during their periods
  - 34% of girls use old clothes for their menstrual management

Guiding Principles to improve the situation around menstruation

- Management of menstrual hygiene is a fundamental right of women and girls
- Establishing monthly proactive partnerships with the private sector
- Involvement of men
- Formulate/adopt gender-friendly policies
- Ensuring that no girl or woman are left behind

Strategies to improve the situation around menstruation

1. Removal of barriers through education
2. Making affordable and accessible quality materials for menstrual hygiene management
3. Upgrading water, sanitation and hygiene facilities as menstrual friendly
4. Safe disposal of materials
5. Develop sectoral coordination and cooperation
6. Leverage the private sector capacities & initiatives
7. Guiding/instructing the participants to access & best use of the relevant services

Healthy Food

The food is called healthy food that, is prepared and stored in such a way that the quality and nutritional value of the food are maintained, is completely safe for human consumption, and there is no fear of life threat.

Unhealthy Food

- If the food decomposes naturally
- When food is with un-natural/bad stale or smells
- If the food is not covered
- If you don't use safe water while washing and preparing the food
- If using extra spices
- If the validity date is expired
- If you use unclean utensils while serving food
- If mixed with rotten/contaminated food/water
- If dust/debries gets into the food
- If food is cooked more or less than it should be, it becomes unhealthy

- If we cut raw fish, meat and cut fruits and vegetables without washing the knife/bowl, the salad will definitely become unhealthy.
- If the person serving the food does not serve it in a clean and hygienic manner.

Environmental Sanitation

Garbage disposal: Garbage pollutes the environment in many ways and harms public health. The public should be aware of this.

Prevention of air pollution: Smoke emitted from mills and brick furnaces, and smoke emitted from defective vehicles like carbon dioxide, sulfur dioxide, carbon monoxide, etc. are creating huge air pollution. For these public health is now facing a serious threat. Mass awareness and social resistance movements should be developed in this regard.

Different types of waste

Waste is generally of two types, solid waste and liquid waste.

Solid waste

- Can be biodegradable or non-biodegradable.
- Most non-biodegradable wastes are recyclable, but some are not easily recyclable or not recyclable at all.

Liquid waste

- Is also of two types, one is domestic liquid waste which can be reused through treatment and the other is toilet water or black water which can be easily reused through treatment.

Waste can be further classified as municipal waste, electrical and electronics waste, industrial waste, medical waste, toxic waste, chemical waste, commercial waste etc.

Components of solid waste

- Food, plant or vegetable waste
- Waste of paper or articles made of paper
- Single-use plastic products and other plastic waste
- Metal waste
- Glass and ceramic waste
- Textile waste
- Wood and other construction materials waste
- Cadaver or skin waste

Dhaka city waste

- 70% of the total waste produced in Dhaka city is biodegradable waste.
- The solid wastes of this city come from houses, markets, hotels and restaurants, various infrastructure construction activities and industrial establishments.
- On average, 6000 tons of solid waste is generated in this city daily, of which 2500 tons are generated in the area covered by the Dhaka North City Corporation and 3500 tons are produced in the area covered by the Dhaka South City Corporation.
- About 1,600 tons of daily generated waste in the city, remains uncollected, and these wastes are vigoriously damaging the city environment in many ways.

Collective initiatives by the stakeholders for waste management

- Individuals and communities: Self, family and community awareness, behavior change, regular monitoring, proactive measures, etc.
- Local Government Departments (City Corporation, WASA): Adequate budget allocation, provision of water, toilet, sewage facilities, provision of civic services including waste disposal, monitoring, surveying, etc.
- Public representatives: Budget allocation, promotion, and influence to provide civic services
- Ministry of Environment, Education and Health: Providing awareness messages, highlighting health risks and benefits, regular monitoring, research
- Non-Governmental Organisations: Ensuring availability of products, quality products at low cost
- Media: Promoting health risks and promoting healthy habits to increase public awareness.
- Development Cooperation Agency: Financial and technical cooperation, capacity building, research, and innovation in materials and technologies.

Session 12: Communicable Diseases and Epidemiology

- Facilitator: Dr. Kallol Chowdhury, Training Expert, DSK.
- Method: Interactive plenary with ppt.
- Time: 3:00-4:00 PM (including tea break)
- Expected Session Output: Participants became aware of the epidemiological relevance of WASH & Health; and were informed about the disease cycles including the agent, host, environment, and route of transmission of different WASH-related communicable diseases, including COVID-19, Dengue, etc.

Relevant information of session 12:

WASH and Communicable Diseases

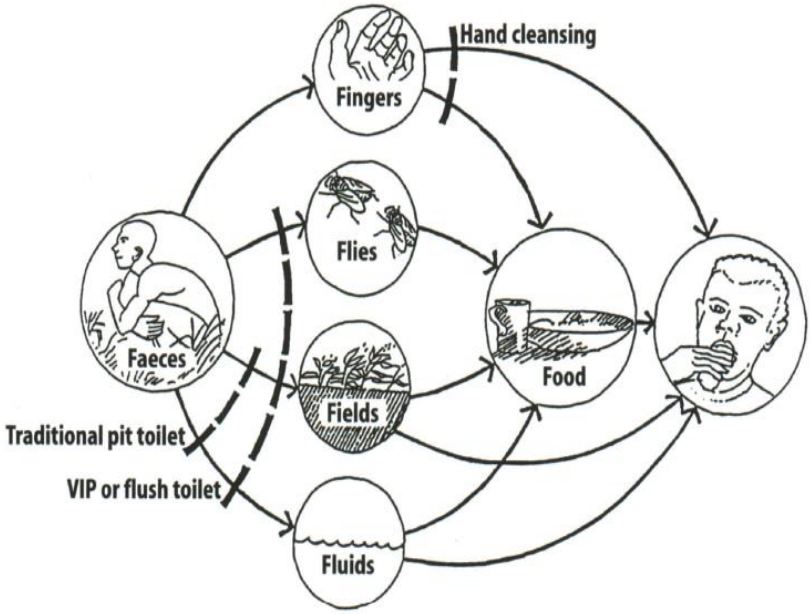
Definition of WASH: Water, Sanitation, and Hygiene

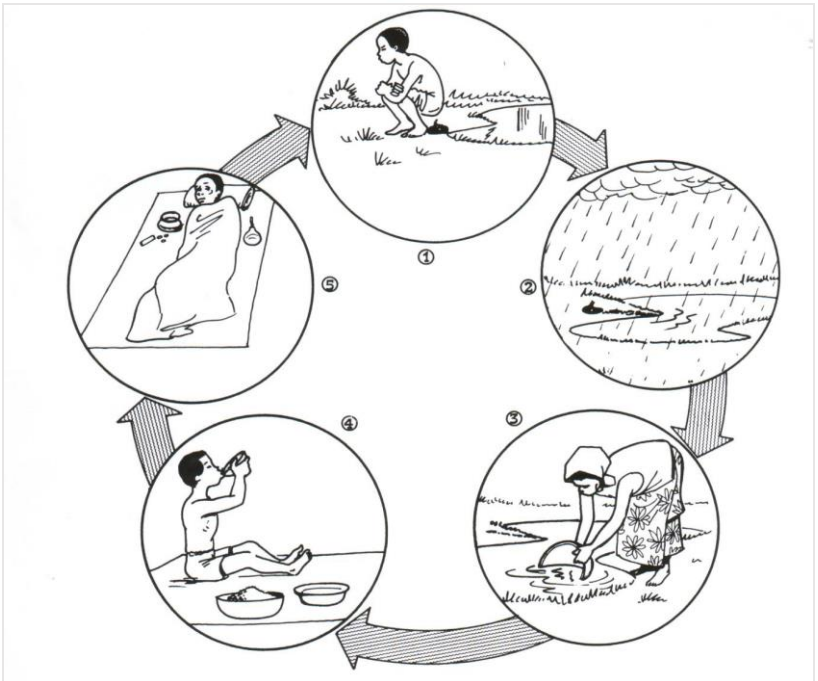
- WASH represents a comprehensive approach to improving public health by addressing access to clean water, proper sanitation facilities, and promoting hygienic practices.
- Water: Access to safe drinking water for consumption, cooking, and personal hygiene.
- Sanitation: Adequate disposal of human waste to prevent environmental contamination and disease transmission.
- Hygiene: Promotion of behaviors such as hand washing, food hygiene, and sanitation practices to reduce the spread of infections.

Crucial aims of water and sanitation programs

- To supply sufficient safe water
- To supply the means for adequate excreta disposal and other types of waste
- To implement hygiene measures
- To train people regarding hygiene and the proper use of water

Common routes for the transmission Diarrhoea germs





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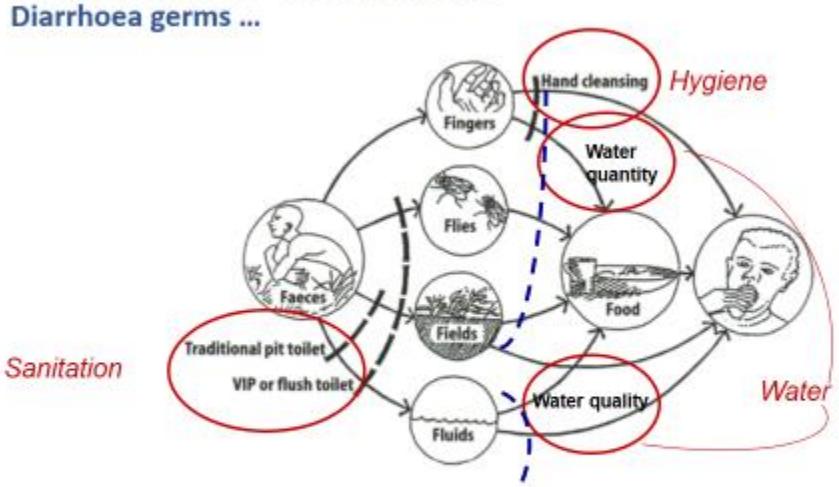
Common routes for the transmission Diarrhoea germs ...



Adapted from Winblad U & Dudley E, 1997. Source: WHO PHAST

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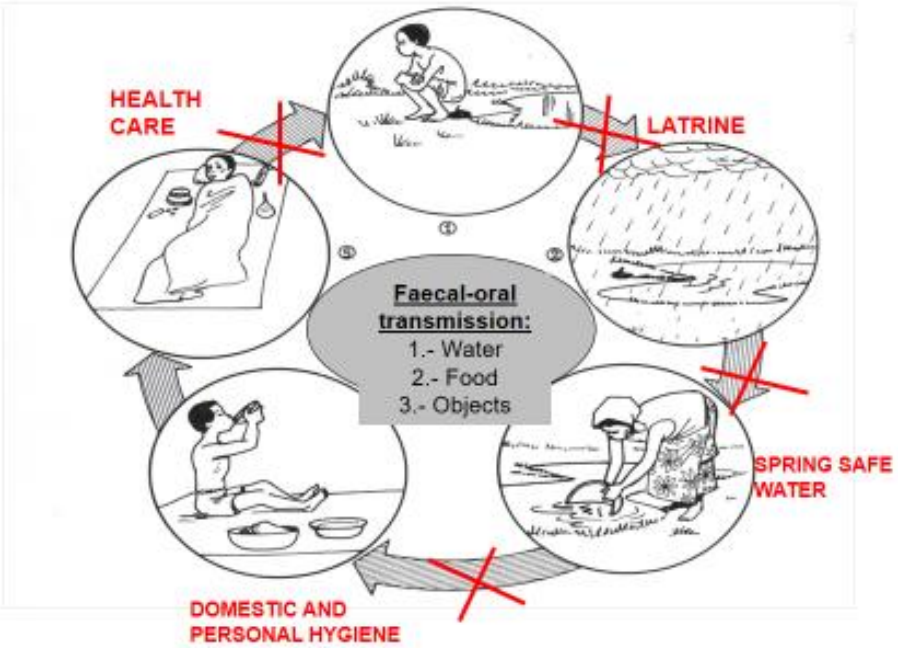
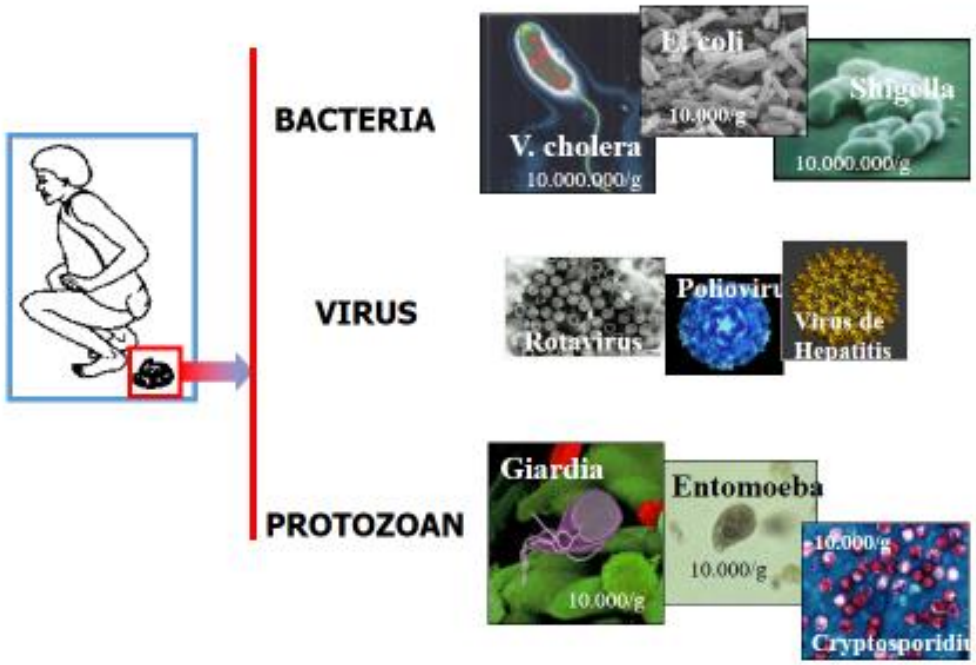




WATER-BORNE OR WATER-WASHED DISEASES

Cholera, shigellosis, diarrhoea, salmonellosis.
Typhoid, paratyphoid, etc.
Amoebic dysentery, giardiasis
Hepatitis A, poliomyelitis, rotavirus diarrhoea

Transmission mechanisms

FAECAL-ORAL

- Water contamination
- Poor sanitation
- Poor personal hygiene
- Crop contamination

DIARRHOEA DISEASES

- Acute watery diarrhoea and Cholera

Watery stools without visible blood, vomit and fever. Dehydration

- Bacillary Dysentery (shigellosis)

  Acute bloody diarrhoea with fever, abdominal cramps and rectal pain. Complications include sepsis, rectal prolapse, haemolytic uraemic syndrome and seizures.
- Giardiasis

Watery stools, flatulence, greasy stools, stomach cramps, nausea, weight loss and dehydration.

- Amebiasis or Amebic Dysentery

  Bloody stools or loose stools, stomach pain, stomach cramping and fever.

Cholera

- Caused by the Vibrio Cholerae (bacteria)
- Endemic or with epidemic potential (Africa, South America, Asia etc.)
- Watery diarrhoea classically rice-water stools, with or without vomiting, dehydration, shock
- FAECAL-ORAL route transmission
- PREVENTION
  - Faecal material and vomit must be properly disinfected and disposed of
  - Adequate water supply
  - Clean water whenever food is being handled
  - Hand washing promotion
- May cause outbreaks with fatalities

Typhoid fever

- Caused by Salmonella Typhi (bacteria)
- Low grade fever, malaise and dry cough, abdominal discomfort, diarrhoea or constipation, altered mental status and multiples complications.
- FAECAL-ORAL route transmission
  - Waste water with human and animal faeces
  - Faeces contaminated food
- PREVENTION
  - Health education
  - Safe food and water, proper food handling
  - Adequate excreta disposal
  - Personal hygiene
  - Safe water collection points

Key Factors Preventing Diarrhoea Diseases

- Safe drinking water (Extraction, transport and storage)
- Controlled excreta disposal
- Safe food and proper food handling
- Hand washing with soap
- Breastfeeding
- Education

Hepatitis

- Caused by Hepatitis Virus A and E. (sometimes co-exist B and C)

- *Clinical:* fever, tiredness, nauseas, digestive problems and later jaudince (yellow skin and mucous) with dark urine and whitish stools.
- Usually complete cure. No chronic, no carrier.
- Attention the A and E transmission FAECAL-ORAL route
- *Risk factors*
- Food and water contaminated
- Poor sanitation infrastructure
- Crowding
- Waste water with human and animal faeces

SKIN DISEASES

Scabies

- Caused by Sarcoptes scabiei hominis (parasite)
- Larvae dig tunnels in the external skin layers.
    - Rash, scab skin.
    - Wrinkles, between fingers, elbows, wrists, penis, and nipples.

Impetigo

- Caused by Streptococcus and staphylococcus (bacteria)
- Contagious superficial skin infection.
    - Blisters with pus-scab
    - Face, nasal cavity, mouth, neck, groin.

EYE DISEASES

Conjunctivitis

Acute inflammation of the conjunctiva due to bacterial or viral infection.

- Eye irritation, teardrop, and secretion.
- Contagious: Through infected conjunctivitic secretions, contaminated hands, clothes, etc.

Trachoma

Keratoconjunctivitis due to Chlamydia trachomatis infection (bacteria)

- Progressive conjunctivitis and most common cause of blindness in endemic areas.
- Contagious: Through infected conjunctivitic secretions, contaminated hands, clothes, etc.

Key Factors Preventing Water-Washed and Water-Scarce Diseases

- Use non-contaminated water for hygiene
- Hand washing with soap
- Laundry with soap
- Fly vector control
- Louse vector control
- No crowding

HELMINTH INFECTIONS

Ascaridiasis

Nematodiasis due to Ascaris lumbricoides (Parasite)

Clinical

- Phase of larva migration: pulmonary and allergic signs (non productive cough, mild fever)
- Established infection: non specifics digestive signs nausea, vomits, diarrhoea, intestinal irritation etc.

Transmission: Faecal – Oral route

Key Factors Preventing Helminths

- Controlled excreta disposal
- Hand washing with soap
- Non-contaminated food

VECTOR BORNE DISESSES

Vectors related to diseases

- Mosquitoes
- Flies
- Louse (Typhus, Relapsing Fever)
- Fleas (Plague)
- Ticks etc.

Malaria, dengue, sleeping sickness, filariasis, yellow fever etc.

Transmited through bites by mosquitoes, flies, cockroaches etc. while

- Bite near water
- Breed in water
- Dirty environment

Malaria

- Pathogen: Plasmodium falciparum, vivax and ovale (Parasite)
- Vector: Mosquito (Anopheles female)
- Clinical: Painful muscles and joints, high fever with chills, headache, possibly diarrhoea and vomiting
- Stagnant waters are the breeding place.

Dengue

- Pathogen: Dengue Virus
- Vector: Mosquito (Aedes aegypti)
- Clinical: High fever, headaches, pain in muscles and joints, red spots on skin.
- Types: Classic dengue, hemorrhagic dengue.
- Larva growth in water containers (tyres, vases, barrels) or other natural places (lagoons, pools etc.).

Key Factors Preventing Vector Borne Disesses Diseases

- Adequate drainage of stagnant water
- Disposal of waste water
- Excreta controlled disposal
- Safe storage of drinking water
- Vector control

CRONA/Covid-19 Disease

Corona is a large family of viruses that can cause diseases ranging from common colds to deadly diseases, such as Middle East Respiratory Syndrome (MERS-CoV), Severe Acute Respiratory Syndrome (SARS-CoV), COVID-19, etc. Such viruses usually cause infections in the nose, sinuses, or upper throat. Among the many species of coronavirus, 7 species cause diseases in the human body, among which SARS-CoV-2 is one of them. Scientists call coronaviruses as zoonotic viruses.

How it spreads

- Spreads primarily through the air particles (or air droplets) released as a result of cold, phlegm, spit, sneeze and cough of the affected person.
- Spreads through touching an infected person or something that has the virus (such as a table, chair, door handle, etc.) without washing hands and touching the mouth, nose, or eyes.
- The virus also spreads through contact with infected animals, etc.

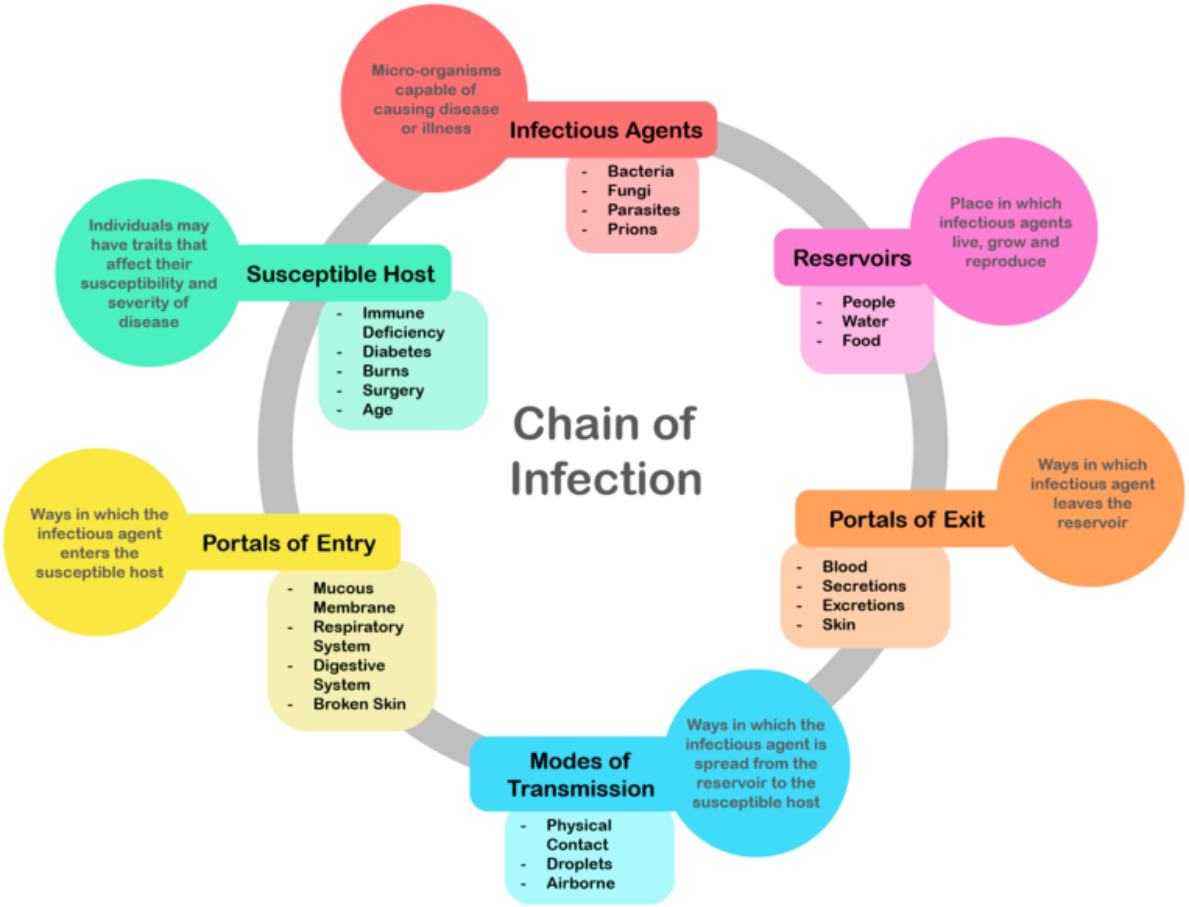
Symptoms of Covid-19 infection

- It usually takes about 2-14 days for symptoms of infection to appear after the Corona virus enters the body.
- In most cases, the first symptom is fever (over 100 degrees Fahrenheit or 38 degrees Celsius).
- May also cause dry cough/sore throat.
- May experience fatigue.
- May cause respiratory distress/pneumonia.
- Other associated diseases (comorbidities) like Diabetes, High blood pressure, Respiratory problems, Heart diseases, Kidney problems, Cancers etc. can make the disease situation worse and may lead to organ failure.

Prevention of infection

- Everybody to know details about Corona virus, and to make others aware about this disease.
- Taking necessary measures to prevent infection at home and at work.
- Identifying patients with coronavirus based on symptoms and taking appropriate actions.
- Ensuring adequate stock of essential medicines and other protective eqippments.

- Explain others on the importance of preventive measures including frequent hand washing, social distancing etc.
- Continue the routine health services including for Covid-19, and take appropriate measures & precautions for the health service providers.
- Continue raising awareness at the community level to prevent large-scale transmission.



Session 13: Training Feedback

- Facilitator: Dr. Kallol Chowdhury, Training Expert, DSK.
- Method: VIPP method
  Steps:
  - VIPP card distribution (1 card/participant) to collect participants' feedback on Good practices and the scope of improvements.
  - Session summarization & conclusion.
- Time: 4:00-4:15 PM
- Expected Session Output: Participants will evaluate and feedback about the quality of training contents and facilitation methodologies.

Session 14: Closing of the Training

- Closing by Md. Wahidul Islam Murad, SE, PD- PMU, DESWSP, Dhaka WASA.
- Method: Speech, interactive plenary, and audio-visual presentation
- Time: 4:15-4:30 PM
- Session Output: Participants will be facilitated to recall a summary of the training. Participants will receive more information & views into the project sites and plans of the DESWSP project of Dhaka WASA. They will gain more guidance on how the training learnings can be carried forward in their professional work. The Project Director will emphasize the importance of going through the handouts, and keeping them handouts standby at the professional desk to use as needed.

Conclusion

The training on 'Gender Inclusive Community Engagement in WASH' will be quite comprehensive and beneficial for the participants. They will gain insights into the importance of community engagement in Water, Sanitation, and Hygiene (WASH) programs, as well as the significance of considering gender inclusivity in these initiatives and practices.

The training will cover various aspects such as scopes, ways and values of community engagement, professional attitude, and behavioral management, community toilets and scope of work, the importance of gender inclusiveness, relevance of WASH & SDG, Social Behavior Change Strategy and hygiene domains, the relevance of WASH to health, epidemiological information regarding WASH-related communicable diseases including COVID-19, Dengue, etc. These practical sessions will provide participants with hands-on experiences and skills necessary for addressing issues in both personal and professional practices.

The training will help participants understand the specifics of the DESWSP project of Dhaka WASA and the ADF Grant, which will enhance their understanding of the larger context and ongoing initiatives in the field. It's expected that expert facilitators from Dhaka WASA, ADF, and DSK will ensure high-quality delivery of the respective sessions.

Recommendations are included herewith to continue learning through further reading and practical exercises on the job, towards ongoing improvement and application of the knowledge gained from the training. Overall, the training will be dedicated to providing valuable insights, skills, and knowledge to the participants, which they can apply in their respective roles to contribute effectively to WASH initiatives and practices.