

# Inclusive WASH Activities in the Global South

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Development Aid for People with Disabilities



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## ACRONYMS

HRBA	Human Rights-Based Approach
MDGs	Millennium Development Goals
NGOs	Non-governmental organizations
SDGs	Sustainable Development Goals
UNCRPD	United Nations Convention on the Rights of Persons with Disabilities
WASH	Water, Sanitation and Hygiene



# 1. Introduction

**Disability** is an evolving concept that results from the interaction between persons with impairments and attitudinal and environmental barriers that hinder their full and effective participation in society on an equal basis with others (Convention on the Rights of Persons with Disabilities<sup>2</sup>).

This guidebook is meant for water, sanitation and hygiene (WASH) sector actors and other organisations that implement development cooperation projects or programmes and want to include the most marginalised people in communities. The guidebook utilises evidence collected by two Finnish-based researchers, H. Katsui and N. Guzmán, who conducted their fieldwork in Nepal and Tanzania respectively in 2014. The focus of this guidebook is on persons with disabilities, but the barriers described and solutions provided can be applied to other marginalised groups. Making water and sanitation facilities more accessible *benefits everyone in the community*, including children, pregnant women and older people – those who may find it difficult to walk long distances, to grip and/or to squat.

## Who benefits from inclusive WASH activities?

Persons with disabilities

Older or frail people

Pregnant women

Children

Sick or injured persons

Family members of all the above mentioned groups

The guidebook has been written to raise awareness among water and sanitation sector actors about the rights and needs of persons with disabilities and other marginalised community members. It provides practical information about how these rights and needs could be addressed within mainstream water and sanitation programmes and activities. This guidebook is meant to provide basic information and links to more detailed sources of information on the topic. The main focus is on access to sanitation and water supply at household and community levels, while some of the ideas can also be applied in institutional settings such as schools. Besides technical solutions, social aspects of inclusion have also been found<sup>1</sup> to be important in a survey conducted for Finnish WASH stakeholders and therefore both are highlighted in this guidebook.

## 2. Why Inclusive WASH Activities?

### **WASH facts**

In 2015, 2.4 billion people still lack improved sanitation facilities, and 663 million people still use unimproved drinking water sources.

Diarrhoeal diseases are the third leading cause of death among children under five. It is estimated that currently more than 340,000 children under five die annually from diarrhoeal diseases due to poor sanitation, poor hygiene, or unsafe drinking water.

443 million school days are lost each year due to water-related diseases.

Providing water, sanitation and hygiene together reduces the number of deaths caused by waterborne diseases by an average of 65%.

In the Global South as a whole, around 90% of sewage water is discharged untreated into rivers, polluting them and affecting plant and aquatic life<sup>3</sup>.

Worldwide, there is a great shortfall of sanitation facilities in general, and in particular of facilities that are accessible to all. This is affecting lives of billions of people.

Finland has been active in the WASH sector in its development cooperation activities for a long time. The Constitution of Finland identifies protection of human rights as one of the objectives of the country's participation in international cooperation. The Human Rights-Based Approach (HRBA) entails a systematic integration of human rights as a means and objective in development co-operation. This is operationalised through a commitment to strengthen inclusive, participatory and non-discriminatory development. Consequently, the key objective of the HRBA is to reduce inequalities between individuals, groups and societies by ensuring that human rights are enjoyed by all, including the most vulnerable and marginalised groups<sup>4</sup>. Furthermore, the 2016 policy paper on Finnish Development Cooperation<sup>5</sup> identifies WASH as an important priority area and highlights that disability should be taken into account in all activities and at all levels.

### **Why consider disability issues? Inclusive WASH helps you to...**

Achieve SDG targets

Design your project in line with the HRBA, Finnish Development Co-operation Policy and the UNCRPD which calls on states to ensure equal access of persons with disabilities to clean water

Meet your obligations in line with the requirements for right to water and sanitation

Reduce the workload of women and girls

Reduce costs, as there will be no additional cost in adjusting facilities/structures later on.

WASH activities are traditionally designed for 'average' persons in communities. Consequently, a large number of people are excluded from many WASH activities and facilities. However, every community is made up of a variety of individuals with a wide range of needs. For example, approximately 15 per cent of the world's population, 1 billion people, live with disabilities. The majority, about 80 per cent, live in the Global South. Many of them are

among the poorest, most marginalised and excluded groups in their communities. Access to safe and clean water and sanitation facilities is a basic right of all people, including children, persons with disabilities and older people.

### **Improved self-dignity and quality of life**

Improved access to WASH activities in community settings has a great impact on the health, hygiene, cleanliness, dignity and quality of life of persons with disabilities and other marginalised groups. Better access to such activities increases independence of marginalised persons while reducing the workload of family members in care-giving tasks. Accessible facilities are easier and safer to reach and use, resulting in a reduction of injuries. An inclusive approach can benefit diverse user groups and can offer a user-friendly and safer option for many community members.

### **Inclusion contributes to sustainable development**

An inclusive approach to facilities and activities is also more cost-effective in a long run. If inclusion is planned from the onset of a project, the additional cost is minimal or non-existent. Even where inclusion has not been planned from the beginning, and existing facilities need to be adapted to make them more inclusive, this does not need to be a highly technical or expensive process. The economic cost of excluding persons with disabilities far outweighs the costs of including them. Improving access and inclusion can also make a positive contribution to poverty alleviation and economic development.<sup>6</sup>

### **Access to water and sanitation as a human right**

Access to clean water and basic sanitation is a right stipulated in international law, including the United Nations Convention on the Rights of Persons with Disabilities (Article 28). Everyone should have access to basic water and sanitation, irrespective of gender, age, disability, caste, ethnicity or religion. In 2000, the General Assembly of the United Nations set Millennium Development Goals (MDG) and a decision was made to achieve these goals by the year 2015. One of the MDG goals was to halve the number of the people who do not have access to improved water and sanitation systems. With regard to these goals, by 2015 significant progress had been achieved including:

- 147 countries have met the MDG drinking water target
- 95 countries have met the MDG sanitation target
- 77 countries have met both the drinking water and the sanitation target.

However, data also show that a great number of people still live without access to safe drinking water. Even more people do not enjoy their right to sanitation. As a result, the new Sustainable Development Goals (SDGs) include goals for ensuring availability and sustainable management of water and sanitation for all, to be achieved by 2030. These include:

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

This guidebook gives information and guidelines on how to provide better facilities, thus ensuring that those who have been excluded so far can enjoy the right to water and sanitation. A good way to do this is to start by understanding the barriers people face in accessing these basic needs.

### 3. Barriers to Inclusion

There are several barriers that cause the exclusion of persons with disabilities and other marginalised persons from WASH-related initiatives. Most problems are caused by external factors, such as social, environmental and institutional barriers.

#### **Lack of knowledge/awareness**

In many countries in the Global South, data collection has been a big challenge because many children and adults with disabilities are hidden within their homes. In addition, the definition of disability varies from one country to another, or even within one country. Children and adults with disabilities are often not included and/or identified in official national statistics, which contributes to their invisibility. Consequently, many persons with disabilities are left out of national and international development efforts.

For example, studies in Nepal and Tanzania show that children and adults with disabilities have largely been excluded from WASH projects throughout the project cycle, from planning, implementation, monitoring and evaluation. In the best case, some children and persons with disabilities are included as final beneficiaries of the project, while in many other cases they are simply invisible<sup>7</sup>. A survey of nine Finnish consulting companies and NGOs implementing WASH projects in the Global South also confirmed their challenges in including children and adults with disabilities. For example, in many informal settlements in Tanzania and villages in Nepal, persons with disabilities tend to be at home because of attitudinal and physical barriers<sup>8</sup>.

#### **Social and attitudinal barriers**

In many societies, living with a disability is associated with shame, fear and/or pity, easily leading to isolation or overprotection. In order to avoid discrimination, the family may keep the person with a disability hidden at home. Persons with disabilities and older people may be prevented from sharing family or community facilities for fear that they will contaminate the water or soil the facility for other users<sup>9</sup>. Programme staff rarely have adequate information on the needs of marginalised community members.





**Picture 1:** Often meetings are organised in places that are not easily accessible to all community members.

When interviewed, a Finnish NGO member of staff working in Nepal stated that he had not encountered a single person with a disability in the village in the course of his four-month stay, and had not therefore included disability accessibility in the NGO's WASH project. In another Nepalese village, where a bilateral WASH project is on-going, no persons with disabilities were identified by the village chief and leaders and no persons with disabilities attended when a WASH meeting was held in the field. Yet, with the urging of a disability researcher, persons with disabilities began to appear when she was accompanied by a Nepalese blind woman as her interpreter. The highly-educated blind interpreter encouraged villagers to reveal information on persons with disabilities in their village, which is otherwise very difficult due to deeply rooted stigma. Having witnessed the positive example of the interpreter, two men brought one young man with multiple disabilities to the village meeting for the first time. When it was asked why the young man had not come to earlier village gatherings, his father said that the son had not left his home recently<sup>10</sup>.

Social barriers are compounded when persons with disabilities are unable to attend community meetings where WASH-related issues are discussed and decisions are made, due to physical inaccessibility, lack of assistive devices or support person, and/or lack of accessible transportation and information.

## **Environmental barriers**

Environmental barriers include natural or infrastructure-related barriers. Natural barriers can include uneven, rough or steep paths on muddy and/or slippery ground. It often happens that pathways are completely inaccessible. For many, water sources are too far away and sanitation facilities non-existent, leading to open defecation. Sanitation facilities can be in remote areas where girls and women are put at risk of molestation and even sexual violence.

In Nepal, toilets are usually outside the home because constructing toilets inside the home is considered dirty. In a focus group discussion to discuss WASH and disability, in which leaders of ten Nepalese organisations of persons with disabilities participated, one of them reported coming across a woman with a disability who had to crawl from home to the toilet, getting dirty when it rained. The dirt stuck to her clothes and was impossible to wash away, but nobody helped her. The water tap was so high that she always had to ask for someone to help her, but few helped her. Because she was dirty not even her own family members wanted to sit near her. They kept her on the ground floor separately from other families<sup>11</sup>.

Environmental barriers relating to infrastructure include high steps and concrete platforms, narrow entrances, lack of or too heavy doors, slippery or dirty floors, narrow cubicles, lack of light and handrails. Many children with disabilities in the Global South are excluded from schooling due to non-existent or inaccessible water and sanitation facilities. For example, children with disabilities residing in a boarding school in Tanzania identified several barriers regarding sanitary facilities, including lack of toilets in general, uneven paths leading to toilets, absence of supporting aids, and limited space. Improving and maintaining user-friendly toilets in schools can contribute to improving the learning environment for all children.

## **Institutional barriers**

Legislation and policies related to marginalised groups can lack strategies or guidelines for implementation. Therefore they tend to remain just words on paper. More than 160 countries have now ratified the UN Convention on the Rights of Persons with Disabilities and many have disability legislation. However, the relevant ministries responsible for water and sanitation are rarely aware of these. Consequently, persons with disabilities and other marginalised community members are still frequently left out of WASH practices.

A daughter of a 72-year-old woman with a disability in Dar es Salaam, Tanzania, told that local leaders usually pass by to educate household members on WASH matters, but it is mostly non-disabled members in the household who get the information. The mother with the disability is always inside the house and therefore excluded from the training events that take place in the settlement<sup>12</sup>.

Moreover, many policy makers are not familiar with disabilities and are not aware of inclusive solutions. They tend not to have enough training opportunities on inclusion. Excluded groups are hardly ever consulted for relevant information on their own lives.





**Picture 2:** It is important to invite representatives from marginalised groups to community meetings. Meetings should be organised in accessible places.

## 4. Inclusive Solutions for WASH

The following guidelines provide ideas on how to make sure that marginalised community members are also included. Although most of the examples given focus on persons with disabilities, they are applicable to other marginalised groups, such as older or frail people, as well.

1. **Knowledge and awareness:** Consult organisations of persons with disabilities within the country, most probably in the capital city. Disseminate information and create awareness about persons with disabilities and other marginalised groups in collaboration with the organisations. For example, provide training and make sure all stakeholders involved in WASH activities have a basic understanding of inequalities. In addition, share this guidebook on inclusive WASH activities. Ensure that persons with disabilities and other marginalised groups are represented in publications and campaign materials and in the campaigns themselves.

2. **Identification of the most marginalised groups:** Involve the village and other community members in the identification of the most marginalised groups in the community. Prepare positive incentives for families to share the information. Reach out to the families who have no access to community meetings.
3. **Role models and peer support:** Seek role models. For example, invite leading disability advocates of the country to meet the community members with and without disabilities. In capital cities, there are usually strong organisations of persons with disabilities with highly empowered leaders. They could be invited to the community to talk about disability. Offer opportunities for peer-support among persons with disabilities and their families. The community members with disabilities could be encouraged to form a self-help group or groups to mutually support each other. Similar arrangement could be made for other marginalised groups.
4. **Partnerships with marginalised groups:** Build partnerships with other sectors representing marginalised groups, such as groups representing women's associations, both locally and internationally.
5. **Ensure meaningful participation:** Ensure meaningful participation of all groups in planning, procurement, implementation, monitoring, evaluation and reporting. Make sure that persons with disabilities and other marginalised community members are included from the outset of the project and that they understand their needs and rights as well as duties. Encourage the participants to express their views. Make sure that these groups are included in the decision-making bodies and user committees of the WASH project.
6. **Accessibility:** Conduct an accessibility audit and make surroundings as accessible as possible. Disseminate information on accessible formats. An accessibility budget has to be included into the project from the beginning.
7. **Reasonable accommodation:** Provide individually-tailored measures to enable the community members with disabilities to participate in community-based activities on an equal basis with others. It could mean designing a system for greater autonomy, including a provision of assistive devices such as crutches or additional assistance. Not only the family members but also community members, caregivers and personal attendants could give support to the family.



8. **Positive incentives:** Since disclosing family members with disabilities might lead to harmful consequences for the family, due to the negative image of disability in many societies, it is vital to provide them with a positive incentive or even reward. In every case, such rewards should also help in changing the family's attitude towards having a member with a disability. For example, households with family members with disabilities could pay smaller water-user fees or even be exempt from fees. Such an incentive would encourage families to share their private, family issue of disability with the community members in a positive manner, and finally it would help in changing negative perceptions and attitudes towards disability.
9. **Monitoring, evaluation and reporting:** Pay specific attention to persons with disabilities so that results and impacts show how all community members benefit from the project. For example, disability-specific indicators or alternatively disaggregated data are useful.
10. **Policy dialogue and development:** Document and disseminate evidence of good practice of inclusive WASH activities, establish a good relationship with the local government, and when necessary, lobby to influence policy development. Draw lessons from good practice to provide strategy guidance for policy-makers. Bring relevant government officials, WASH project personnel and representatives of marginalised groups together to establish constructive and on-going dialogue<sup>13</sup>.

## Technical guidelines for inclusive solutions in WASH Projects

### 1. Getting there:

The first step is to install facilities closer to the user. For example, sanitation facilities should be as near to the house as possible, preferably inside the house if possible. This would help to ensure privacy and to avoid injuries caused by uneven, dark paths especially during night time. If the toilet is far away, there is always a risk of violence and sexual assault, among other things. This way, snakes, insects and other harmful and dangerous animals can also be avoided.

The objective is to design pathways and roads that allow the user to move around safely and independently. Paths to toilets should be smooth, clear and preferably with a non-slippery surface such as concrete. This benefits all users. The path should be marked, for example, with white stones or ropes. The ideal path is 120–180 cm wide. Drains and ditches should be covered and/or marked and the sides should be marked and/or protected.



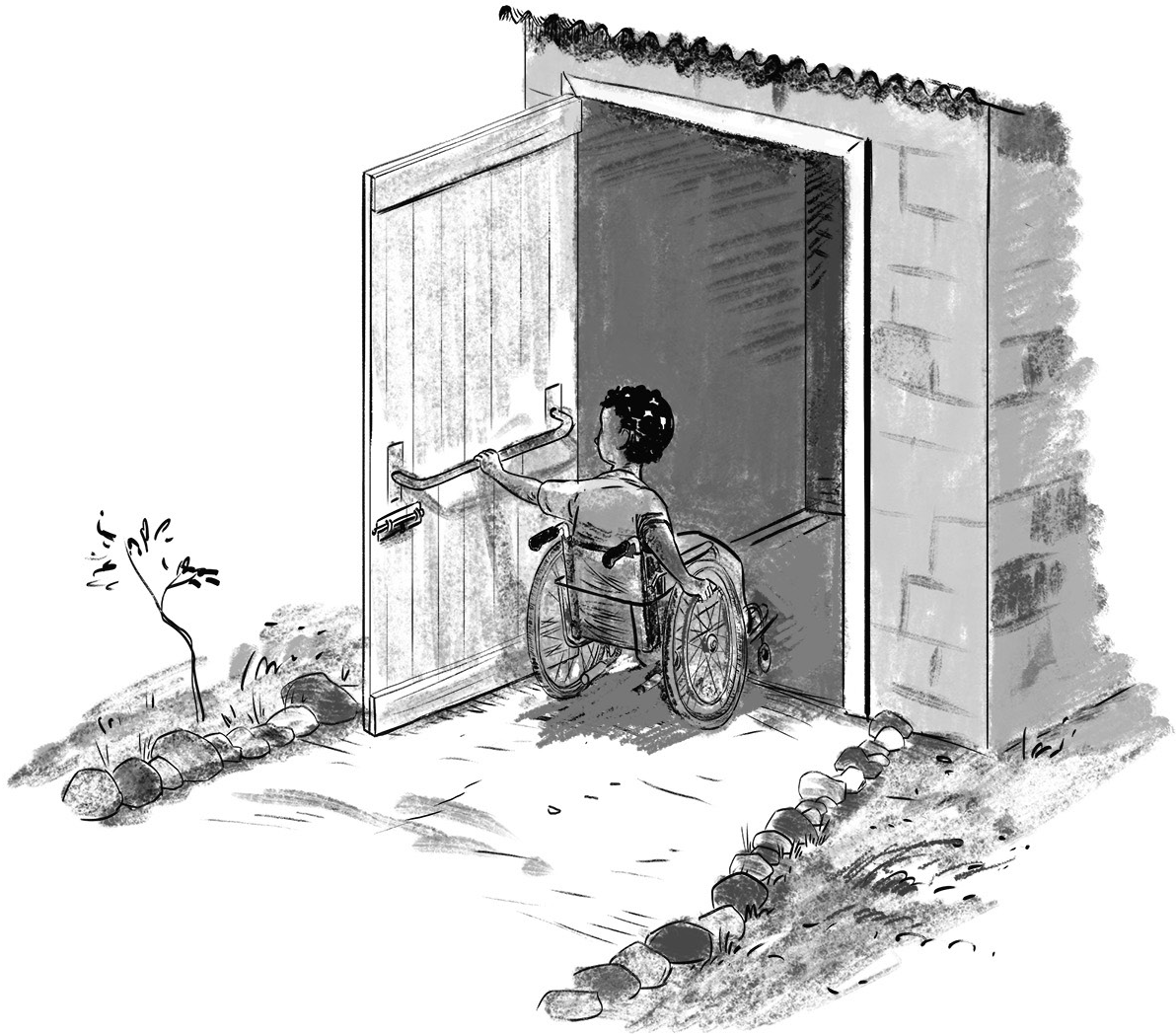
**Picture 3:** The path should be smooth with a non-slippery surface and clearly marked. The ideal path is 120–180 cm wide.

There should be landmarks on the way, such as gate posts, trees or large rocks, or ropes leading from the house to the toilet, so that the blind and people with visual disabilities can find their way to the toilet. Support rails along the path are recommended.

It is good to have visual signs and/or symbols on the wall, beside the door with contrasting colours highlighting the door and thus making it easier to find. A change of floor texture should mark the location of the door for persons with visual disabilities.

## **2. Getting in**

The transition from outside to inside should be as even as possible, so that the difference in height between apron and surrounding area is minimised. The entrance should be wide enough for wheelchair users. A door with a width of at least 90 cm is recommended.



**Picture 4:** It is recommended that the transition from outside to inside be as smooth as possible and entrance wide enough.

It should be possible to open and close the door easily. If the door opens inwards, it might be impossible to open it in the case of an emergency, such as if the user has fallen to the floor in front of the door. It is recommended the door have handlebars both outside and inside to allow easy opening and closing for persons with limited strength.

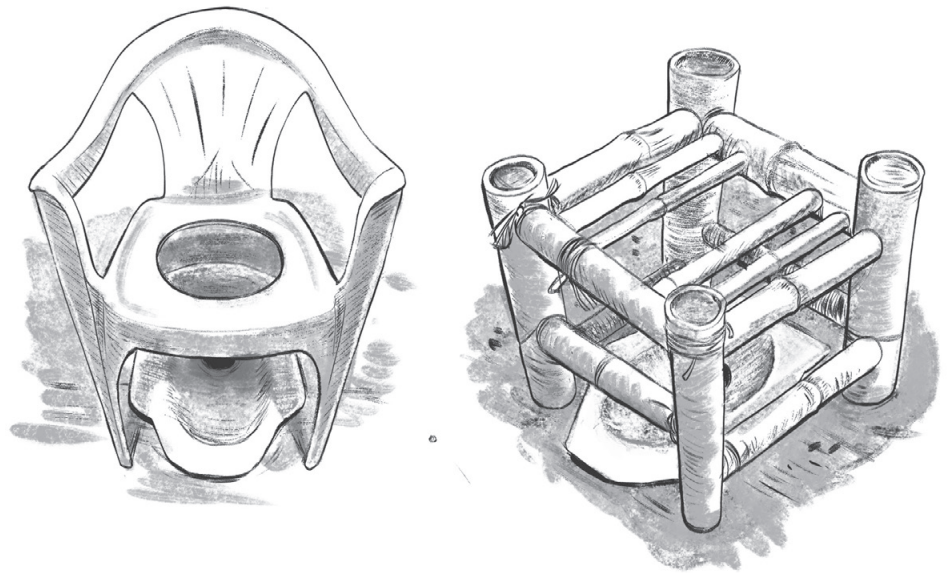
Toilet floors should be smooth, easy to clean, but not slippery. For wheelchair users, there should be enough space for a wheelchair to turn (150 cm circle) and at least 80 cm beside and 120 cm in front of the toilet to allow positioning.

A squat toilet can be very challenging for many users so different types of seating options – fixed or movable – are recommended. The material should be easy to clean.

Provide adequate support such as handrails attached to the floor or wall at a height of 70–90 cm to assist persons moving from a wheelchair or persons with limited strength. However, make sure that they do not prevent people from moving from their wheelchairs by attaching bars at both sides of the toilet seat. Alternatively, chairs with hinged side-rails that can be raised out of the way, can be used.

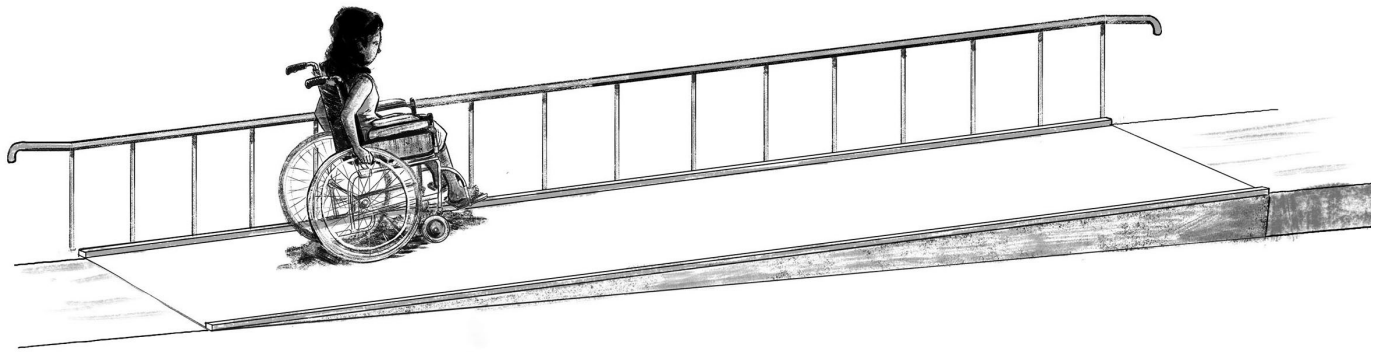


**Picture 5:** In a squat toilet different kinds of seating options made of locally available materials could be easily added. On the left hand side, there is a plastic chair with a hole made in the middle and, a bamboo frame on the right.



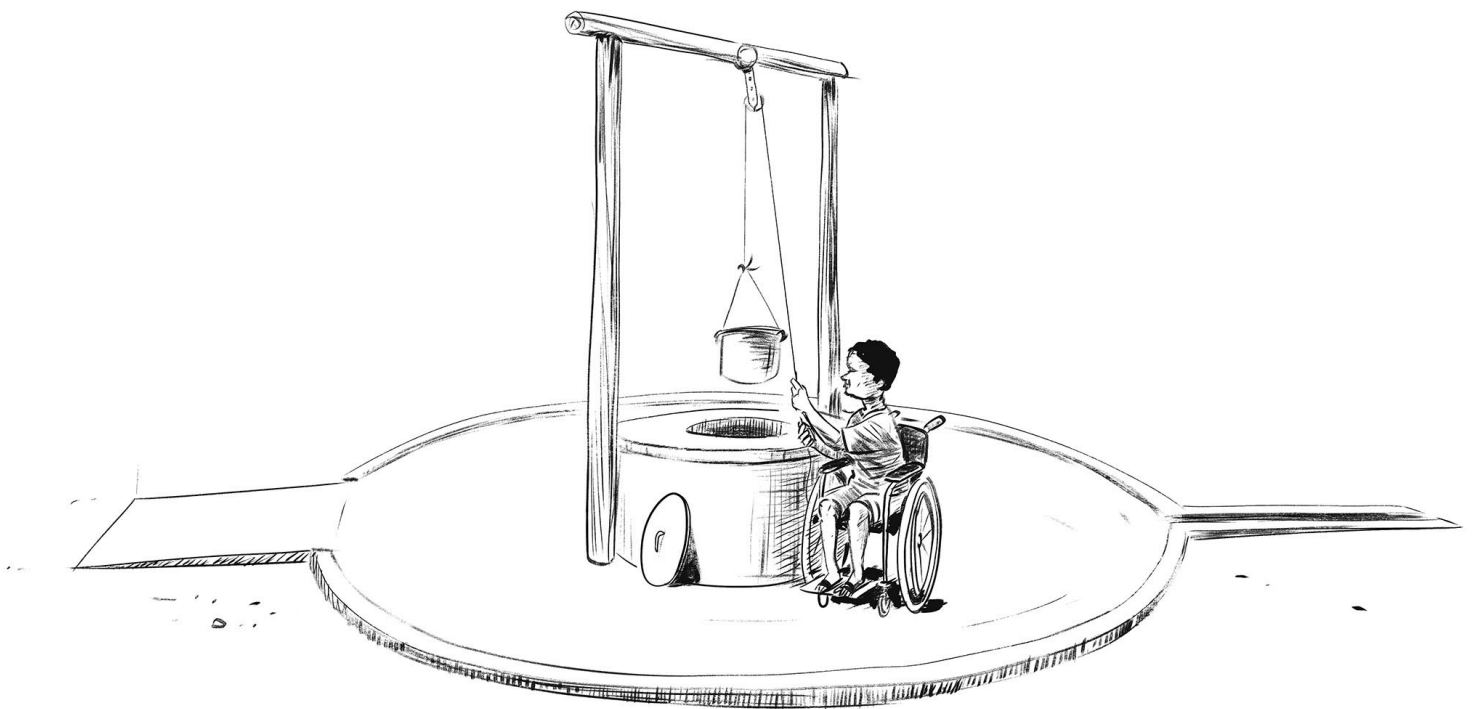
**Picture 6:** Provide adequate support, for example for older people and wheelchair users, inside the toilet. A rope on the top of a squat toilet indicates the right location for persons with low vision.





**Picture 7:** The ramp should have a maximum 5% slope, have handrails and a raised support edge.

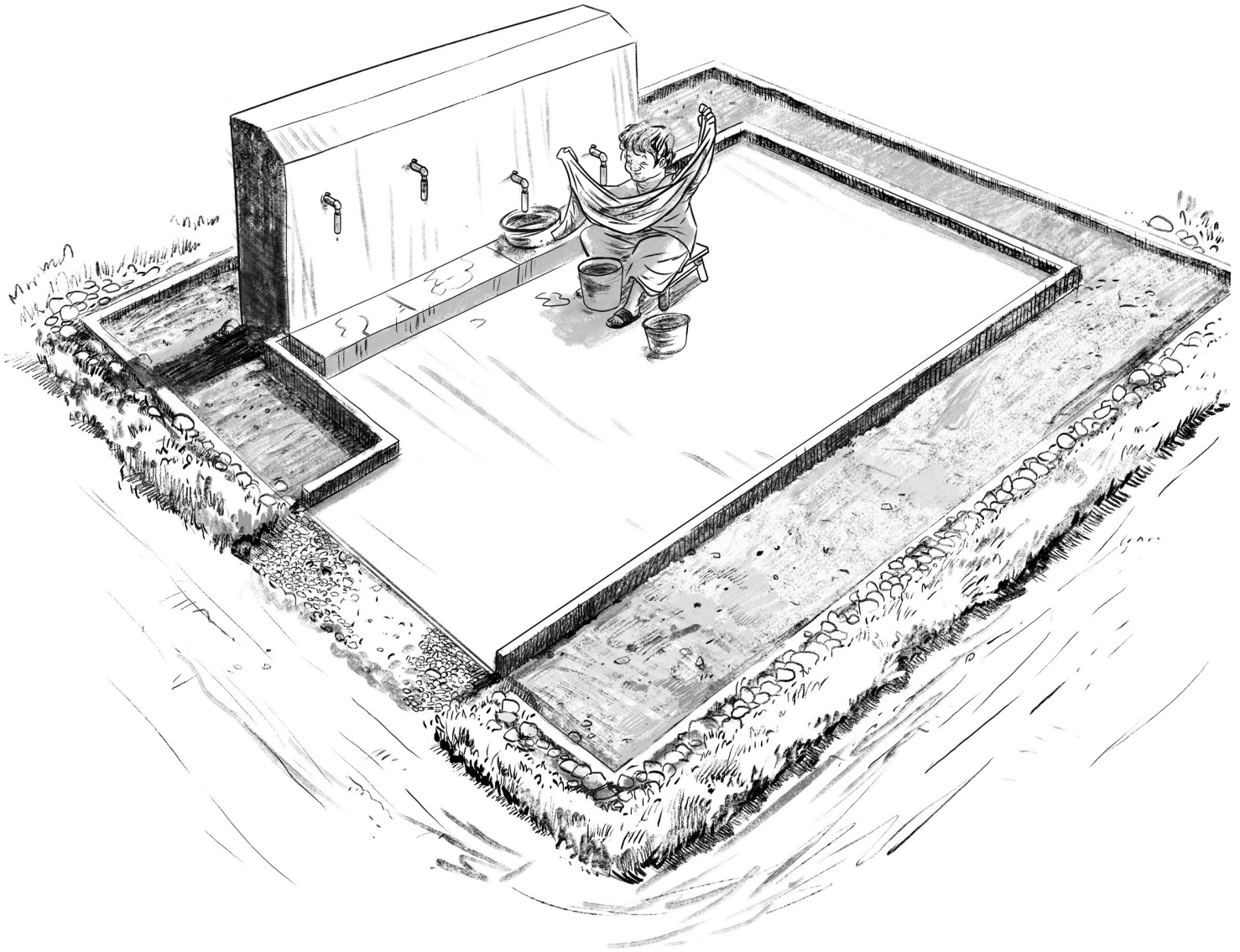
If the toilet building is above the ground, a ramp is recommended. The ramp should have a maximum 5% slope and have handrails and a raised support edge. A flat landing must be secured at the top and bottom of all ramps.



**Picture 8:** Well with an access ramp, apron and a lifting mechanism

Inclusive design principles are important when designing water facilities. The facilities should be safe as well as easy to access and use. Wells should have an apron with access ramp. Lifting devices benefit all users, but can be especially useful for those with weak arms or grip.





**Picture 9:** Easy access to water and washing area should be ensured. The surface should be smooth and non-slippery. For hand washing there should be taps or hand washing facilities provided at different heights. A chair/stool can be provided for those with less muscle strength.

For hand washing and hygiene, there should be taps or hand washing facilities provided at different heights. Shower/washing areas should ensure privacy and they should also be easily accessible.

Easy-to-clean and low-maintenance facilities ensure efficient and hygienic use of the facilities and decrease dependency on other people. This has a great benefit for a person's self-reliance, dignity and privacy. Good basic personal hygiene and hand washing with soap are critical to help prevent the spread of diseases. Clean, safe and accessible water is essential for proper hygiene for all.



**Picture 10:** Good basic personal hygiene and hand washing with soap are critical to help prevent the spread of illness and disease. Clean, safe and accessible water is essential for proper hygiene.

## 5. Conclusion

An inclusive design approach to facilities and activities benefits the widest range of users, and the additional cost can be minimal or zero, if planned from the onset. Improved access and inclusion in WASH activities brings a range of benefits to marginalised individuals and their families, including improved health and nutrition, improved well-being, access to education and economic development. It is important to identify the excluded and marginalised, to analyse the reasons for their exclusion from WASH activities and to design WASH activities in such a way as to eliminate the multiple barriers the excluded groups face. Development targets will never be met unless the needs of persons with disabilities are included.

## 6. Check Lists

### A. Check list to ensure members of marginalised groups are Socially included

CATEGORY	QUESTION	YES	NO
<b>Knowledge and awareness</b>	In our WASH training, have we included sensitisation and awareness raising of the situation of excluded community members, such as persons with disabilities?		
<b>Identification</b>	Have we checked whether there is information at national and/or community levels available on the number of person with disabilities and other marginalised groups?		
	If not, have we assessed the number of persons with disabilities and other marginalised persons living in our village?		
	Have we created a <i>positive incentive</i> for families to feel more confident about sharing information with the community?		
<b>Role models and peer-support</b>	Have we invited organisations of persons with disabilities to our strategic meetings, such as a planning meeting?		
	Have we invited representatives from diverse groups, including other marginalised communities to our meetings?		
	Have marginalised people formed self-help groups to mutually support each other and to work on their own initiatives?		
<b>Partnerships with marginalised groups</b>	Have we established partnerships with representative organisations of marginalised groups in the community?		

<b>Ensure meaningful participation</b>	Have we included representatives of marginalised groups and their families in the planning, implementation, monitoring, and evaluation of our project?		
<b>Accessibility</b>	Have we conducted an accessibility audit?		
	Are meetings held in physically accessible places?		
	Are WASH-related information and educative materials accessible to all people (pictorial, Braille, audio, plain language, sign language)?		
	Have we offered design assistance or advice to help household owners in making their water and toilet facilities accessible for all of their members?		
	Have we made provision in our budget for securing accessibility?		
<b>Reasonable accommodation</b>	Have we collected information on the special needs of marginalised groups?		
	Have we made provision in our budget for securing reasonable accommodation in our plan?		
	Have we provided reasonable accommodation (such as assistive devices and other individual equipment)?		
<b>Positive incentives</b>	Have we provided incentives/rewards to include marginalised groups in strategic decision-making?		
<b>Monitoring, evaluating and reporting</b>	Have we set disability-specific indicators or collected disaggregated data on the results and impacts?		
	Have the marginalised groups benefited from the project activities on an equal basis with others?		

<b>Policy dialogue and development</b>	Have we provided information on the marginalised groups and their needs in our community to policy-makers?		
	Have we shared good practice and lessons learned on inclusive approaches with policy-makers and/or local authorities?		
	Have we brought relevant government officials, WASH personnel and representatives of marginalised groups together for constructive dialogue and further policy development?		

**B. Check list to ensure that marginalised community members are Technically included**

<b>CATEGORY</b>	<b>QUESTION</b>	<b>YES</b>	<b>NO</b>
<b>Getting there</b>	Is the toilet/water point close to home/users?		
	Is the path leading to toilet/water point wide/firm/smooth?		
	Is the path clearly marked (stones/ropes)?		
	Is there enough light on the way for safety?		
	Has the toilet/water point been marked with signs?		
<b>Getting in</b>	Is access easy and safe for diverse users (no high steps, hand rails in place, ropes to mark the place of a squat toilet/a pit latrine with a hole)?		
	Is there a ramp and support rails?		
	Is there a wide entrance allowing wheelchair access, if needed (min. width at least 90 cm)?		
	Is the door easy to open? Are there handles/grip bars inside and outside the door?		



<b>Usability</b>	Does the space ensure privacy?		
	Does the room size allow for wheelchair turning 150 cm?		
	Have you left at least 80 cm beside and 120 cm in front of the toilet to allow positioning?		
	Is there a seating option/squatting pan available?		
	Are support rail(s) in place?		
	Is the floor material non-slippery and easy to clean?		
	Are there light/dark contrasts to facilitate identification of the floor, walls, door frame etc.?		
	Is easily-accessible water available?		

## 7. Useful Resources for Inclusion in Wash Programmes

**De Albuquerque, C.** (2014) Realising the Human Rights to Water and Sanitation. A Handbook by the UN Special Rapporteur.  
<http://www.ohchr.org/EN/Issues/WaterAndSanitation/SRWWater/Pages/Handbook.aspx>

**Groce, N., Bailey, N., Lang, R., Trani, J.F., Kett, M.** (2011) Water and sanitation issues for persons with disabilities in low- and middle-income countries: a literature review and discussion of implications for global health and international development. *Journal of Water and Health* 9(4). P. 617–627. <http://www.ncbi.nlm.nih.gov/pubmed/22048421>

**Handicap International** (2008): How to build an accessible environment in developing countries. Manual #2 – Access to water and sanitation facilities.  
<http://www.asksource.info/resources/how-build-accessible-environment-developing-countries-manual-2-access-water-and-sanitation>

**Jones, H. & Reed, B.** (2005). Water and sanitation for disabled people and other vulnerable groups: designing services to improve accessibility. Leicestershire: Water, Engineering and Development Centre, Loughborough University.  
<https://wedc-knowledge.lboro.ac.uk/details.html?id=16357wsfdp>

**Jones, H. and Wilbur, J.** (2014) Compendium of Accessible WASH Technologies. WaterAid, UK.  
[www.wateraid.org/accessibleWASHtechnologies](http://www.wateraid.org/accessibleWASHtechnologies)

**Katsui, H., Ranta, E.M., Yeshanew, S.A., Musila, G.M., Mustaniemi-Laakso, M.M. and Sarelin, A.** (2014) Reducing Inequalities: A human rights-based approach in Finland's development cooperation with special focus on gender and disability. Institute for Human Rights.  
<http://www.abo.fi/fakultet/media/24259/reducinginequalitiesnetversion020414.pdf>

**Kynnys/The Threshold Association** (2014) Accessibility Guide.  
<http://kynnys.fi/kehitysyhteistyoyleista/ajankohtaista>

**Source** – International online resource centre on disability and inclusion has links to resources on inclusive WASH and disability: Key list. International resource centre on disability and inclusion  
<http://www.asksource.info/topics/cross-cutting-issues/inclusive-wash-and-disability>

**Wilbur, J. and Jones, H.** (2014) Disability: Making CLTS Fully Inclusive. *Frontiers of Issue* 3. Institute of Development Studies. Brighton.  
<http://www.communityledtotalsanitation.org/resources/frontiers/disability-making-clts-fully-inclusive>  
[http://www.shareresearch.org/LocalResources/Frontiers\\_\\_\\_making\\_CLTS\\_fully\\_inclusive.pdf](http://www.shareresearch.org/LocalResources/Frontiers___making_CLTS_fully_inclusive.pdf)

**WaterAid** (2012) Inclusive WASH: Building skills towards inclusive water, sanitation and hygiene <http://inclusivewash.org.au/>

**WaterAid** (2012) Towards Inclusive WASH: Sharing evidence and experience from the field. <http://www.inclusivewash.org.au/case-studies.htm>

**WEDC** (2015) Equity and Inclusion in Water, Sanitation and Hygiene Resources: <https://wedc-knowledge.lboro.ac.uk/collections/equity-inclusion/>

**WEDC and Water Aid** (2012) Facilitator notes: Accessibility audit of water and sanitation facilities. [http://wedc.lboro.ac.uk/resources/learning/EI\\_FN2\\_Accessibiity\\_Audit\\_final.pdf](http://wedc.lboro.ac.uk/resources/learning/EI_FN2_Accessibiity_Audit_final.pdf)

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<sup>1</sup> Katsui, H. and Guzmán, N. (forthcoming) Reducing Inequalities in Development Practice: a case study of water and sanitation sector

<sup>2</sup> United Nations. Convention on the Rights of Persons with Disabilities. Optional Protocol. <http://www.un.org/disabilities/documents/convention/convoptprot-e.pdf>

<sup>3</sup> WHO/UNICEF (2015) Progress on Drinking Water and Sanitation: 2015 Update and MDG Assessment, Joint Monitoring Programme (JMP). [www.wssinfo.org/fileadmin/user\\_upload/resources/JMP-Update-report-2015\\_English.pdf](http://www.wssinfo.org/fileadmin/user_upload/resources/JMP-Update-report-2015_English.pdf)

<sup>4</sup> Ministry for Foreign Affairs of Finland (2015) Human Rights Based Approach in Finland's Development Cooperation. Guidance Note, 2015.

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<sup>7</sup> Katsui, H. and Guzmán, N. (forthcoming) Reducing Inequalities in Development Practice: a case study of water and sanitation sector

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<sup>11</sup> Katsui, H. and Guzmán, N. (forthcoming) Reducing Inequalities in Development Practice: a case study of water and sanitation sector

<sup>12</sup> Katsui, H. and Guzmán, N. (forthcoming) Reducing Inequalities in Development Practice: a case study of water and sanitation sector

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