In Their Words

WASH Experiences of Women Living with Disabilities in Cambodia

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INTRODUCTION

Though access to basic water, sanitation and hygiene (WASH) has increased in Cambodia over the last decade, it remains low compared to other countries in Southeast Asia. Approximately 51 percent of the population lacks access to basic sanitation, 41 percent do not use any form of sanitation facilities, and nearly a quarter of the population lacks access to safe water supply.\(^1\) For many Cambodians – particularly for 840,000 Cambodians (6.3 percent) living with a disability, of which 53 percent are female\(^2,3\) – economic, attitudinal and environmental barriers hamper their ability to access WASH facilities year-round.

Access to basic WASH is particularly challenging for women and girls, especially those living with disabilities. Women and girls face increased vulnerability due to lack of private sanitation facilities. Those with disabilities can face additional challenges with regards to accessibility and affordability. Women and girls also carry the burden of household WASH responsibilities, often having to carry water over long distances to collect water for essential daily activities like bathing and cleaning.

These challenges are compounded by the discrimination and neglect that many people living with disabilities face on a daily basis.

Women with disabilities often lack access to accurate information and affordable sanitary products. They face the taboos associated with talking about menstruation. While this is similar to other women in the community, women with disabilities face even greater challenges. For example, facilities and products may be unaffordable, or education and information might be in formats which they cannot use due to difficulties seeing and hearing.

KEY MESSAGES

- WASH challenges are amplified for women, particularly for those living with disabilities. They face unique limitations with regards to accessibility, affordability, safety, information and discrimination.
- To ensure women with disabilities are heard and their rights are incorporated into WASH efforts, government agencies and development partners can encourage their participation in forums and adopt inclusive, human-centered design approaches for WASH facilities.

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1 WHO/UNICEF Joint Monitoring Program for Water Supply, Sanitation and Hygiene (JMP), 2015
2 Household members older than five years of age who experience at least one type of disability including but not limited to physical, visual, auditory and intellectual.
3 Cambodia Demographic and Health Survey (CDHS), 2009
There is limited documented information about the WASH experiences of women with disabilities in Cambodia. It is critical to listen to their voices in order to better shape programs and policies, and begin challenging discriminatory attitudes. Greater participation is the first step to ensuring that women with disabilities can access the facilities, services, and products to manage their WASH needs effectively, safely, and with dignity. This brief captures key highlights from the stories of 25 women interviewed across three provinces in Cambodia in 2017. It aims to contribute to a greater knowledge base of understanding around the experiences that Cambodian women and girls with disabilities have accessing WASH.

IN THEIR WORDS

Accessibility

Long distances from water sources and latrines, uneven terrain, stairs, and slippery surfaces are significant concerns particularly for women with difficulty seeing or walking.

“[It is] hard to carry water for washing clothes and bathing because I might trip.”
– Woman who has difficulty seeing, age 32

“It is painful for me to carry water for a bath.”
– Woman who has difficulty walking, age 40

When women and girls are menstruating, they have an increased need for adequate WASH facilities to change sanitary materials hygienically and with privacy, and for access to bathing facilities more regularly.

“When I have my period, I need warm water for a bath. But I don’t have warm water so I access the pond, which is not really clean.”
– Woman who has difficulty walking, age 29

Photo Credit: Sarah Gelbard / Emory University
Safety

Not having access to adequate sanitation facilities can expose women to unsafe conditions. Finding an area to urinate or defecate can be particularly dangerous, with additional concerns around safety and privacy. When a toilet is available, it may not be designed to address the specific needs of people with disabilities.

“I have no privacy when I take a bath because other people can see me when I bathe or defecate. I am afraid of being seen, even at nighttime.”
– Woman who has difficulty walking, age 47

“It is convenient to have a sitting toilet. Using a squatting toilet is difficult because of my disability.”
– Woman who has difficulty walking, age 47

Photo Credit: Sarah Gelbard / Emory University
Discrimination

People with disabilities may experience discrimination in their communities, homes and workplaces. Some common misconceptions include: women with disabilities cannot make money, cannot contribute to their family or community, cannot take care of themselves or others, and cannot work as well as those without disabilities. Such negative stereotyping can come from different community members, leaders, employers, and household members. This can lead to neglect and exclusion of women with disabilities from community activities and employment opportunities. It fosters isolation, increases poverty, and financial insecurity. It can leave women with disabilities potentially more vulnerable to abuse, or even violence. For those without a supportive family network, access to safe WASH and health resources becomes precarious.

“Most people in the community look down on me and say I don’t walk correctly and call me ‘paralyzed woman’. I feel sad. I do not want them to call me that. I want them to treat me as normal.”
– Woman who has difficulty walking, age 20

“I seldom participate [in community meetings] because I am not invited. This makes women with disabilities not understand water and sanitation hygiene in terms of health and menstrual hygiene management.”
– Woman who has difficulty walking, age 52

“[It is] difficult to live when my family does not care. They don’t love me. No member of my family wants to live with me.”
– Woman who has difficulty walking, age 45

“The factory does not accept [workers with disabilities].”
– Woman who has difficulty walking, age 29

Photo Credit: Sarah Gelbard / Emory University
### Affordability

Many people with disabilities in Cambodia are poor. When water sources are unavailable, a common solution for many households is to purchase water from vendors. However, many women with disabilities who have little to no income cannot afford to buy the clean water they need.

**“The water is far from home... The pond dries up during the dry season and I sometimes buy water from the truck. It costs 5,000 riel (US$ 1.25) per jar. I don’t have enough water to use because I have no money. During the rainy season, I can use rain water. I have no job and I receive [little] pay when I work.”**

– Woman who has difficulty walking, age 40

**“I have no soap and I smell bad. I have no cash to buy soap. I can’t work because [of] my disability”**

– Woman who has difficulty walking, age 29

Sanitary products can be costly and unaffordable for many women. Many use multiple layers of cloth instead. The added labor of washing and cleaning is particularly challenging for those who have difficulty seeing or those with difficulty walking.

**“I wear a sarong and pants during menstruation because I have no money to buy pads.”**

– Woman who has difficulty walking, age 47

**“It is difficult to wash clothes, I can’t see if my clothes are clean or bloodstained.”**

– Woman who has difficulty seeing, age 35

### Information

There is widespread lack of information and awareness surrounding menstrual hygiene management. This means many adolescent girls are largely unprepared for the onset of menarche. For girls with disabilities, access to knowledge and support can be particularly challenging if they experience difficulty hearing or seeing, or are reliant on others for information and education.

**“I began menstruating when I was 20 years old... During the first time, I felt shy and did not want to see people, afraid people would see. My parents did not tell me about menstruation. I don’t want to talk even to my mother.”**

– Woman who has difficulty walking, age 45

In addition, the information and advice provided by health workers on the management of menstruation may be incorrect.

**“The doctor told me not to use pads because he thought it was bad blood and that the pad would prevent it from coming out. So I wear sarongs.”**

– Woman with chronic illness, age 31
WHAT CAN WASH SECTOR ACTORS DO?

Efforts to reach and include women and girls with disabilities can make a significant difference, and do not need to be complex or costly. Here are a few ways for development partners and government agencies to improve WASH for women and girls (and men and boys) with disabilities:

- **Proactively include women (and men) with disabilities in WASH and community development programs and meetings.** Awareness raising and practical training to practitioners on gender and disability inclusion and engagement methods. Recommendations on how to improve inclusive practices in WASH can be found in the discussion paper: *Gender Equality and Disability Inclusion within water, sanitation and hygiene*, available at [www.susana.org](http://www.susana.org).

- **Use the ‘National Guidelines on WASH for Persons with Disabilities and Older People’**. The guidelines provide detailed guidance and tools for government agencies and development organizations on how to design and implement WASH programs that benefit everyone in the community. For a copy of the Guidelines in Khmer and English and to find more Inclusive WASH resources go to [www.inclusivewash.org.au](http://www.inclusivewash.org.au).

- **Implement inclusive, human-centered design approaches to ensure that all people can access WASH facilities.** Simple, low-cost modifications can improve accessibility, privacy and security of women (and men) with disabilities. Examples can be found in the *Compendium of Accessible WASH Technologies*, which can be found at [www.washmatters.wateraid.org](http://www.washmatters.wateraid.org).

- **Address menstrual hygiene management within WASH interventions and health programs.** This will take practical training for practitioners on how to start and continue a conversation about menstrual hygiene management with women and men in the community, and with children approaching puberty. Resources to help facilitate the conversation include *Growth and Changes – Menstrual Hygiene Education Book* (English and Khmer) available at [www.susana.org](http://www.susana.org), and Frontiers of CLTS No. 6 - *Breaking the Next Taboo – Menstrual Hygiene within CLTS*, (English and Khmer) available on [www.communityledtotalsanitation.org](http://www.communityledtotalsanitation.org).

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**A Toilet Fit for Her**

*How CRSHIP’s Inclusive Programming helped Ms. Ek Bot*

By Sok Ek Udom (Sovann Phoum) and Malis Chheang (Plan International)

Ms. Ek Bot is in her late 50s and lives with her two sisters in a rural community in Prey Veng province. Despite combining their resources, they live below Cambodia’s poverty line. Ek Bot and her sisters were born into a difficult life, but things got worse for Ek Bot when she lost both her legs in a land mine explosion during the time of the Pol Pot regime. Until recently, she did not have access to a toilet of any kind – let alone one built to accommodate her special needs. At least once a day she would push her wheelchair to the wooded area behind her house to defecate. For Ek Bot, open defecation was both physically demanding and dangerous. She would worry about being bitten by snakes and insects, or encountering other people; but that was her only option and nobody else in the village seemed to mind or care about her problems.

The situation changed for the better when Sovann Phoum, a CRSHIP Implementing Partner, began working in Ek Bot’s community to improve sanitation and hygiene conditions and practices of everyone in the community. CRSHIP implementing partners are trained to help communities identify and address inclusive WASH issues. Special attention is paid to ensure disadvantaged groups who are often left out of interventions, are actively engaged; and that their voices and different needs are recognized by the community. As a result of CRSHIP’s inclusive approach, community leaders became aware and empathetic to Ek Bot’s sanitation and hygiene situation and decided to take action. With Sovann Phoum encouragement, the village chief mobilized resources from the community and VETERVANS International to construct an accessible toilet. Today, Ek Bot and her sisters enjoy the safety and cleanliness of an accessible toilet, and have joined the rest of their community in becoming open defecation free.
ABOUT THIS DOCUMENT

This issue brief reflects stories collected by Sarah Gelbard (Graduate researcher at the Rollins School of Public Health at Emory University) and Kirany Leap (WaterAid Cambodia Research Consultant). Ms. Gelbard and Ms. Leap conducted in depth interviews, focus group discussions, and photographic narrative with 25 women (ages 18-60) in Kratie, Kampong Thom, and Kampot Provinces.*

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*Note: The women interviewed are not representative of all women with disabilities. Participants included women with mobility, vision and hearing disabilities and did not include interviews with women with intellectual disabilities.

ADDITIONAL RESOURCES

- Frontiers of CLTS No. 3 – Disability – Making CLTS fully inclusive, available at www.communityledtotalsanitation.org/
- Frontiers of CLTS No. 10 – Equity and Non Discrimination in Sanitation Program at Scale, available at www.communityledtotalsanitation.org/
- Scoping and Diagnosis of the Global Sanitation Fund’s Approach to EQND, available at https://www.wsscc.org/

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