



Rural Village Water Resources Management Project Phase III



Gender Equality and Social Inclusion Impact Study

(Research and Study Report)

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Abbreviations

BCC	Behaviour Change Communication
CAO	Chief Administrative Officer
CCA	Climate Change Adaptation
CGD	Child, Gender and Disable friendly
DMM	Dignified Menstruation Management
DoLi	Department of Local Infrastructure
DRM	Disaster Risk Management
DWS	Department of Water Supply
DWSSM	Department of Water Supply and Sewerage Management
EU	European Union
GESI	Gender Equality and Social Inclusion
GoF	Government of Finland
GoN	Government of Nepal
GWRO	Gaopalika Water Resource Officer
IEC	Information Education and Communication
LO	Livelihood Officer
MHM	Menstrual Hygiene Management
MIS	Management Information System
MoF	Ministry of Finance
MoFAGA	Ministry of Federal Affairs and General Administration
MUS	Multiple Use Water System
NGO	Non-Governmental Organisation
O&M	Operation and Management
PSU	Project Management Unit
RM	Rural Municipality
RME	Rural Municipality Executive
RMPMC	Rural Municipality Project Management Committee
SBS	Step-by-Step Project Planning and Implementation Process Guideline
SHP	School Management Committee
TF	Technical Facilitator
UC	Users' Committee
WASH	Water, Sanitation and Hygiene
WQ	Water Quality
WRA	Water Resource Advisor (Project Technical Assistance)
WRE	Water Resource Engineer
WUMP	Water Use Master Plan
WUSC	Water User Sanitation Committee

Executive Summary

This study assessed local trajectories and transformative change related to Gender Equality and Social Inclusion (GESI) in the Rural Village Water Resources Management Project (RVWRMP) working area in Sudurpaschim and Karnali Provinces between 2009 and 2021. The idea of the study stems from 2009, when RVWRMP commissioned a “Gender and Social Discrimination Study” to investigate the GESI status of the provinces. The new study is based on the following key question: What has the transformation been in the selected indicators, and how has the transformation happened?

In total, 112 people were interviewed in three Rural Municipalities (RM), selected based on their participation in a 2009 Gender and Social Discrimination Study, commissioned by RVWRMP. The interview questionnaire was formulated based on the 2009 study, to be able to clearly compare results and assess progress. Three different groups were interviewed in each RM: a mixed group, women only and Dalits only, to identify changes in all community groups regardless of gender or ethnicity. The interview findings were then summarised and compared with the 2009 study.

The results from the study show that the overall GESI situation in the communities has improved, while some challenges remain. The economic situation of households and number of women and minorities in community and RM level decision-making has greatly improved. Workload distribution is like what it was 12 years ago, but improved water access has provided time for women to partake in income generation activities and community representation. Menstruation-related taboos have decreased dramatically, and the maternal health situation has improved thanks to nearby birthing centres and government incentives. Caste discrimination has decreased. Key challenges include the further need for economic empowerment, continuation of work to eradicate remaining gender- and caste-based discrimination and the need to institutionalise women’s and minority representation in decision-making.

The study found that RVWRMP’s impact has been substantial in empowering women and minorities to gain community representation, and reducing the workload of women, thanks to improved water access providing more time for other opportunities. RVWRMP trainings and capacity building were widely praised in all interviews.

The 2009 study was very comprehensive and studied practices and themes beyond the scope of RVWRMP. It was ground-breaking at the time. Not all the questions and themes in the study were replicated in 2021, as the study focused on topics that RVWRMP could have influenced. However, while conducting the 2021 study, it was noted that most of the specific discriminatory practices mentioned in the 2009 report have been completely eradicated from the project area.

1. Introduction

In 2009, the Rural Village Water Resources Management Project (RVWRMP) commissioned a “Gender and Social Discrimination Study” in its working areas of Sudurpaschim and Karnali Provinces of Nepal. In 2021, as the project was ending, it was decided that a reference study in the same topic could provide insight on the progress towards gender equality and social inclusion (GESI) in the project area, as well as study the impact of RVWRMP on these themes.

Since its inception in 2006, RVWRMP has supported GESI related themes, both directly and indirectly. The project is primarily a water and livelihoods project, but having water as a core aspect of work, provides the possibility to influence social structures and behaviours as well. Water belongs to everyone and there should be no discrimination regarding access to it. This, however, has not been the case in the project working area.

The 2009 study found deeply rooted discriminatory taboos and practices around topics such as menstruation (called *chhaupadi*) and water use. In addition, it identified general issues such as unfair workload, lack of representation and equal rights of women and marginalised groups, and inadequate access to health services. The report recommended actions, such as behaviour change interventions through good role models, community capacity building, development of institutional mechanisms and gender responsive and inclusive livelihood improvement initiatives as solutions to the gender- and caste-based discrimination.

RVWRMP has applied a cross-cutting approach to gender equality and social inclusion, as well as implementing targeted activities. It focused on ensuring proportional representation for gender, caste and ethnicity in all activities. In addition, the project has facilitated several targeted GESI activities throughout the project area, such as Dignified Menstruation Management (DMM) workshops, Sasu-Buhari workshops (mother-in-law and daughter-in-law workshops), reusable sanitary pad-making trainings and Gender Responsive Planning workshops. During the final year of project implementation, RVWRMP organised a DMM Musical Campaign, with a local celebrity as the figurehead to promote DMM messages and raise awareness.

The objective of this report is to track local trajectories and transformative changes in GESI and Dignified Menstruation Management (DMM) over a long period of time (12 years). This is done by focusing on two key research questions when analysing the results from the two studies:

*What has the transformation been in the selected indicators,
and how has the transformation happened?*

The research study was carried out by conducting community interviews in three Rural Municipalities (RM), which were also a part of the 2009 study (then Village Development Committees or VDCs). The interviews were conducted in three different groups (mixed, women and Dalits) to get an overview of the current situation and changes from different perspectives. The results were then summarised and analysed to ascertain the influence of RVWRMP in the transformation.

2. Methods

2.1. Study design

The study compares a GESI study conducted in 2009 by an external consultant on behalf of the project, to the current situation in the same areas. The 2009 study was conducted in six Village Development Committees (VDCs). Three were studied in a narrative anthropological manner to identify socio-cultural, political, economic and spatial practises related to gender and caste discrimination. The other three were studied through a detailed survey focusing on the current situation of gender and caste-based discrimination in social activities, dispute resolution, religious ceremonies and worship places, employment and economic activities, education and health services, use of natural resources and community institutions.

It should be noted that the 2009 report was comprehensive in its study of discriminatory practices. Due to time limitations and more focused thematic interests, it was decided to conduct the 2021 study by focusing on seven key themes, most relevant to RVWRMP objectives: workload, ownership and employment, education, representation, health and nutrition, water use, sanitation and hygiene, and transformative change. A questionnaire (Annex 1) was created based on these themes.

In the 2009 study, the working VDCs in RVWRMP were compared and an approximate division was made between discrimination scenarios - worst, medium and best. Sharmali (in the worst group), Dhungachalna (medium) and Rugin (best group) were chosen for a narrative anthropological and social study. Then three more VDCs - Rilu (worst group), Sipti (medium) and Kushapani (best group) were selected for a detailed survey and PRA.

Three current Rural Municipalities, which included former VDCs from the 2009 report, were identified for the new study: Kushapani VDC (now part of Bhairabi RM, Dailekh - earlier in the best group), Sipti VDC (Naugad RM, Darchula - in the medium group in 2009) and Sharmali VDC (Shivnath RM, Baitadi - earlier in the worst group). The analysis was conducted by 1) interviewing, summarising and analysing the current GESI related situation in the three communities, and 2) comparing the current situation with findings from 2009. To enable comparison between the results from the two studies, findings from the 2009 report were grouped under the same themes as in the 2021. The themes are workload, ownership and employment, education, representation, health and nutrition, water use, and sanitation and hygiene.

Annex 1 provides the interview questions of the 2021 study; Annex 2 summarises the main findings from 2009 study relevant to the 2021 study context; and Annex 3 summarises the main findings from the 2021 interviews.

2.2. Interview sample details

The total number of people interviewed for the study was 112 of which 69 were women (61%), 48 were Dalits (43%) and 3 Janjatis (2,7%). The interviews were conducted between November and December of 2021 and results were summarised and analysed during Spring 2022.

In Sipti, the three groups interviewed consisted of a total of 35 people, with 14 in the mixed group, 11 in the women's group and 14 in the Dalit group. The mixed group consisted of 8 men and 6 women. The Dalit group consisted only of men. The age variance in all the groups was 23 - 71 with the average being 47. The average household size was 7,7.

In Sharmali, the three groups interviewed consisted of a total of 35 people, with 14 in the mixed group, 13 in the women's group and 8 in the Dalit group. The mixed group consisted of eight men and six women. The Dalit group consisted of four men and four women. The age variance in all the groups was 20 - 76 with the average being 39. The average household size was 8,7.

In Kushapani, the three groups interviewed consisted of a total of 42 people, with 15 in the mixed group, 10 in the women's group and 17 in the Dalit group. The mixed group consisted of eight men and seven women. The Dalit group consisted of five men and 12 women. The age variance in all the groups was 20 - 70 with the average being 39. The average household size was 5,9.

2.2. Limitations and disclaimers

The findings of this study compare the observed GESI status in the three selected villages in 2009 and 2021, but comparison between the villages was not perfect.

The 2009 study comprised of two different surveys, each conducted in three villages without overlap. Kushapani and Sipti were part of the detailed survey in 2009, whereas Sharmali was part of the narrative anthropological survey. The different surveys conducted in the villages in 2009 made their comparison problematic. However, it was decided that it would be better to repeat the survey in areas where we still had RVWRMP Phase III activities. Hence, while it would have been methodologically easier to take Rilu as the third location, it was considered more relevant to compare the three areas with continuing activities. For that reason, Sharmali (the other VDC originally in the 'worst category') was selected. Unfortunately, the 2009 study annexes also lacked detailed findings from Sharmali VDC (while all the other villages were incorporated), making use of the detailed data from that village impossible. To overcome this drawback, the study utilised generalised findings in the 2009 report from all three villages surveyed under the narrative anthropological survey.

Lastly, the 2021 study used different categorisation of findings that the 2009 study did, as it was considered important to make the results relevant to RVWRMP's work. For instance, RVWRMP does not have activities related to religious practices, therefore it was considered irrelevant to look at those issues. As a result, there was a need to match the findings from 2009 under the new categorisation used in 2021. The 2021 study involved themes from both 2009 surveys. This meant that some 2021 questions and findings were compared with the 2009 detailed survey (using comparison with 2009 data from Kushapani and Sipti), whereas others were compared with the 2009 anthropological survey (using generalised data from three villages involving Sharmali).

However, as there were only minor differences in the responses of the three villages in 2021, these issues were not serious limitations in practice.



3. Findings

To compare the results from the two studies, findings from the 2009 report were grouped under the same themes as in the 2021 interviews. The themes are 1) workload; 2) ownership and employment; 3) education; 4) representation; 5) health and nutrition; and 6) water use, sanitation and hygiene

3.1. Sharing of workload

In 2009, women oversaw household activities and in general had to wake up earlier and go to sleep later than men due to the workload. The traditional role and tasks of women confined them to their home, and they had limited time for other activities, as most of the time was spent with collection of natural resources, most importantly water. Men rarely share this workload, but support in hard labour, such as ploughing. In all communities, men travelled to India for seasonal work.

In 2021, the situation has not changed much, and there is still a quite traditional division of labour. Women are still primarily in charge of the household and natural resource collection and work longer hours than men. Men support with hard labour but many of them still must go to India for seasonal work, increasing the workload of women. While household work is not usually shared, it is discussed between men and women. Men have more leisure time. The major change is that RVWRMP-supported water supply systems have reduced the workload of women and girls, as they don't have to spend so much time collecting water.

3.2. Ownership and employment

In 2009, women had no ownership of household assets or power to decide on sale or purchase of land, house or agricultural supplies. Key decisions for households and economic activities were made by men, and women were rarely consulted. Men worked in the village and most travelled to India for seasonal work for at least six months per year. In particular, Dalit men needed to work in India for many months per year as they were mainly landless. Women very rarely were allowed to work outside the home. As

men were engaged in income generating activities, they typically had much higher status in the community.

In 2021, household decisions over home gardens, agricultural equipment and the sale of agricultural products are made together by men and women, following discussion at home. RVWRMP has provided training to women and men in agriculture and supported home garden group formation. Women can now participate in income generation activities, such as vegetable and dairy production, or small businesses such as weaving. Men are generally still in charge of purchases of tools and agricultural inputs, and sales of products, as they are considered to have a better understanding of prices and stronger bargaining power. In most cases, women can make small sales themselves now. Most women are shareholders in the cooperatives, participate in savings and credit groups supported by RVWRMP, and have bank accounts. This gives them economic security.

3.3. Education

In 2009, an increase of girl enrolment in primary school was observed. Also, an increasing number of girls could attend school during menstruation. However, female attendance after the primary level was low. This was due to heavy household workload, reluctance to send girls further away to school and concerns regarding menstruation, such as unavailability of proper toilet facilities for Dignified Menstruation Management (fear of being harassed). Generally, families preferred to send boys to secondary studies and beyond, while the girls stayed with the family and prepared for marriage. In particular, Dalit girls were typically married young.

In 2021, all children in all the studied communities (including Dalits) go to school, and parents allow children enough time for homework and studies. There are fewer household tasks, giving them more free time. The Government requires girls and boys to be enrolled in school. It was reported that girls can attend school during menstruation in all communities and (mostly RVWRMP supported) toilet facilities in schools were DMM friendly. However, there was one mass hysteria event reported in Sipti some months prior to the study. The local religious leader had expressed his opposition to menstruating girls attending the school near his temple, and this led to cases of fainting of the girls, and others staying away. This has now been resolved. Schools provide sanitary pads to girls free of charge in these three communities, thanks to a government scheme. Parents did raise concern over children's increased mobile use.

3.4. Representation

In 2009, women had no decision-making power and were compelled to stay at home to take care of household, livestock and agricultural activities. Women did not have leisure time to participate in community activities, as they were occupied with household work. Women only rarely visited the VDC or district headquarters to get services, as the offices were often far, and even Dalits often didn't go to government offices. The number of women or Dalits in community institutions such as school management committees, health facilities and other user's groups was low, and ceremonial only. Participation was not active, nor meaningful.

In 2021, while women's workload was still heavy and they take care of the households, their situation has improved significantly. Women are currently well represented in community organisations (including in leadership positions) thanks to quotas set by RVWRMP and government, and the encouragement they have been given. A range of trainings held by RVWRMP have encouraged women and marginalised groups to apply for community representation posts. Many women reported that they were reluctant or

frightened to take leadership roles earlier, but with experience their confidence has grown. Women can manage time to participate due to decreased time spent fetching water, and increased family support.

3.5. Health and nutrition

In 2009, menstruating women were generally considered impure and restricted in their access to tap stands and temples. There were strict rules restricting access to some food types, as well as touching wet or cooked food. They had to spend nights in separate houses or cow sheds, or in the best cases, in a separate bed. Men and boys usually had priority for food. Women were not aware of nutritional requirements during pregnancy, and they were forced to start heavy household work such as fetching firewood only some days after delivery. Physical access to birthing centres was very poor and elder family members insisted on traditional delivery methods. Many women suffered uterine prolapse.

In 2021, menstruating women were restricted from entering temples and cooking food. In one community only half of the households allowed menstruating women to use household toilets (with the rest allowing women to use it with the aid of separate water pots, or sprinkling cows urine to purify the toilet after use). In two of the communities, consuming milk and curd was still prohibited for menstruating women, while in the third community they can eat anything. In all communities, menstruating women were allowed to use water taps and stay inside the same house (though separate beds or rooms). All communities have birthing centres close by and they are used by all women as the government provides a financial incentive for births in the centre. There is growing understanding of the importance of rest after delivery. The time for women to start light work after delivery ranged from nine days to three weeks, and hard work varied from four to six months.

3.6. Water use, sanitation and hygiene

In 2009, no caste-based discrimination was observed with the water taps (or only rarely), but menstruating women had restricted access. Community members practised open defecation, due to an almost total absence of toilets or sanitation knowledge. Women were usually responsible for water collection, even needing to go at night sometimes. Water collection times (one way) could be up to three hours (sometimes with a long wait) and often several trips were required per day, depending on the number of livestock and family members. Decision-making regarding water resources management was usually done by men, and women's voices were rarely heard. Earlier menstruating women had to bathe in a stream or spring.

In 2021, all communities had easy access to water thanks to RVWRMP constructed water supply systems, though some of the structures were damaged by road works. In all communities, menstruating women could use taps and wash clothes normally. Thanks to RVWRMP, toilets have been constructed for all households and community members capacitated for good sanitation and hygiene behaviours. All communities have been declared Open Defecation Free (ODF) following joint work with RVWRMP. Water collection times have greatly decreased with the maximum trip being 20 minutes and most being able to get water in a few minutes, from nearby their house.

4. Discussion and conclusions

4.1. Transformative change

The comparative study conveys that there have been major transformative changes in the communities in the sense that many customary habits and ways of doing have been changed in the past 12 years. Regarding economic empowerment, most households have improved their situation, and especially women have experienced a big change as they can now get involved in income generation activities. Still, men need to go for seasonal work in India due to low work availability in the communities. Income generation related RVWRMP trainings and facilitation were praised in all communities. Women particularly noted the economic security achieved with savings and credit group and cooperative participation.

Women's and Dalits' participation has increased in community and RM level decision-making thanks to RVWRMP modalities and government quotas. Men seem to be accepting of women as leaders and women and ethnic minorities and Dalits have been encouraged to apply for leadership positions. Women can manage time for community meetings thanks to family and neighbour support.

As for workload, the traditional way of life is still prevalent with women in charge of household chores while men are working abroad for part of the year or in the market areas. The major change has been improved water access, which has reduced women's workload and provided opportunities for income generation activities and community representation as well as reduced the number of water-borne diseases.

Menstruation-related taboos have decreased dramatically, with chhau huts being eradicated and women being able to sleep in houses, and mostly use taps and toilets normally. Girls can go to school during menstruation thanks to transformative behaviour change supported by trainings and awareness raising, RVWRMP supported DMM friendly toilet facilities and government support for sanitary pads. RVWRMP support for sanitation and toilets has led to all households having toilets and all communities being declared ODF. The maternal health situation has improved due to access to nearby birthing centres and people's willingness to use them, thanks to financial government incentives.

Caste discrimination has decreased in all communities. Untouchability in public places has been almost eradicated.

4.2. Challenges and recommendations

Despite the significantly improved situation of women and disadvantaged groups, and all the activities and efforts put on the areas over 12 years, the status of women is not yet in any means equal to that of men. Workload, employment possibilities, economic independence, possibilities for representation and higher education, and still sometimes access to safe water and healthy living, are secondary to men's opportunities. Furthermore, despite the general improvements, there are households that still maintain harmful practices and behaviours that repress women and the disadvantaged. At the same time, men are usually forced to leave their homes for work elsewhere for some months per year, with negative impacts on them and their families. Considerable work is still to be done to address these challenges. Activities like the ones RVWRMP has conducted trigger transformations and support development toward more equal and equitable community life, and these activities should be continued. The remaining

menstruation-related taboos need to be combatted with targeted awareness-raising activities. Women and Dalit participation in community decision-making could be better institutionalised to enable real opportunity for all to apply for leadership positions.

Annexes

Annex 1: 2021 GESI Study Questionnaire

Workload Analysis

Daily work division for men, women, boys and girls at household level.

Questionnaire for Focus Group Discussion

1. Ownership / Employment

- 1.1. Who works/makes decisions in your Home Garden?
- 1.2. Have you participated in training on Home Gardens / Agricultural production and processing?
- 1.3. Who makes decisions on purchasing agricultural supplies in the household?
- 1.4. Who makes decisions on selling agricultural produce in the household? Is there a difference between the type of product - e.g., vegetables, grains, ghee, meat, etc.?

2. Education

- 2.1. Do all the children go to school?
- 2.2. Do girls attend school during menstruation?
- 2.3. Are there proper toilet facilities and privacy for dignified menstruation management in the school?
- 2.4. Is there enough time for girls and boys to do homework and studies (supported by workload analysis)?

3. Representation

- 3.1. Are you able to apply for community organisations / leadership positions?
- 3.2. What has encouraged you to apply to a leadership position?
- 3.3. Do you have time to attend community organisation meetings?
- 3.4. Thinking back to the time when the civil war ended, has there been any change in the involvement of women/Dalits in UCs or municipalities?
 - a. Why has it changed?
 - b. Is it a positive change?
 - c. What are the challenges?

4. Health and Nutrition

- 4.1. When do women start household/outside work after pregnancy?
- 4.2. Where is the nearest birthing centre? (Did you use it? Do you plan to use it? Do women need to stay in chhau goths during and after birth?)
- 4.3. When menstruating are there any restrictions (food, water taps, toilets, attending meetings, touching others)?
- 4.4. What do women/girls eat and drink during their menstruation period?
- 4.5. Where do women/girls sleep during their menstruation period?

5. Workload (refer daily routine table)

- 5.1. Who takes care of household/livestock/agricultural activities?
- 5.2. Is household work shared between the men and the women?
- 5.3. Who collects natural resources (water, firewood, fodder, etc.) for household use?

- 5.4. Do you have other income generation activities? (If yes, explore that what are those?)
- 5.5. Do you have leisure time? Where and how do you spend it?
- 5.6. Are there active male and female (including Dalits) VMWs or agrovets or other paid roles?

6. Water use, sanitation and hygiene

- 6.1. Are there public or private water taps in the community?
- 6.2. Are all community members using public/private water taps? (if not, who and why?)
- 6.3. Do menstruating women wash in naulas, khola or other water sources or do they wash at home?
- 6.4. Did any household build toilets before the project began?
- 6.5. Who encouraged households to build toilets to start with?
- 6.6. Are women allowed to use the toilet during menstruation?

Name	Time (minutes) from home to and from water collection place (incl. queueing)		Number of trips per day	Is there any variation between dry/wet season?
	Before project intervention	After project intervention		

7. What has been the greatest change for women/Dalits in your community since the end of the war/arrival of the project?

Guiding themes: economic empowerment, decision-making, workload and social change.

Annex 2: Findings from 2009 Study

The research questions for the 2009 study were:

What are the prevailing social, cultural, psychological, legal, political, economic and spatial practices that are deep rooted in the social systems related to gender and caste discrimination faced by the subordinate groups in terms of power and wealth?

What are the privileges and dominance of powerful people and the resistances & tolerances of the powerless caused by the negative discrimination practices, which result from various values and norms prevalent in the society?

What is the potential to increase the voice, choices and participation of excluded groups in the social/development mainstream?

What could be the latent means and ways to ensure the meaningful and sustained participation of excluded groups (by gender or caste) in project work or community development processes?

3.1. Summary of general 2009 study findings

The relevant findings from the 2009 study were grouped under the following headings: Limited power, access and control for women, increased school enrolment of girls but minimal attendance, restricted mobility, participation and representation, poor reproductive health, heavy workload and discriminatory wages, untouchability as a reason for discriminatory resources allocation, restricted mobility in public places and ceremonies, towards changed attitude and behaviour as well as physical inclusion but restriction from power.

Limited power, access and control for women

Women have no ownership of household assets and no power to decide on sale or purchase of land, house, or agricultural supplies. Key decisions in career development, marriage and economic activities are made by men. Women collect or carry natural resources (forestry, water) but do not have control over decisions on them.

Increased school enrolment of girls but minimal attendance

In recent years the enrolment of girls in primary classes has increased. Also, an increased number of girls are attending school during menstruation. However, female attendance after completing primary level or even less is very low. This is due to the mounting workload of girls in the household level, parent's reluctance to send their daughters to school at a longer distance and unavailability of proper toilet facilities and psychological fear of being harassed during menstruation.

Restricted mobility, participation and representation

Women do not have power in making decisions on their own mobility and are compelled to remain at the household level to take care of the home, livestock, and agricultural activities. Most men make their own decisions and go to India for work.

Menstruating women are generally considered impure and restricted in their access of water tap stands, worship places, religious ceremonies, rituals, and food intake. Women usually don't have leisure time and if they do, they are forced to remain at home.

Number of women in school management committees, health facilities and other user's groups is very low. The representation in local institutions is ceremonial and meaningful participation is not ensured. The current workload restricts women from meaningful participation.

Poor reproductive health

Women are not aware of their nutritional requirements during pregnancy. Often families don't have sufficient resources to provide nutritious food to pregnant and delivering women.

Pregnant women (being daughters in law) are forced to abide by the traditional system of eating whatever is left after the rest of the family has eaten. Eldest family members insist on traditional systems during pregnancy and delivery care.

Women are forced to start household work, such as fetching firewood and fodder after three or four days of the delivery. Physical access to birthing centres is very poor and attitude of elderly female family members is negative in relation to delivery care services.

Heavy workload and discriminatory wages

Women are forced to work three hours more than men in a day. The traditional role of women reinforces them to remain at home. Men rarely share women's workload. Males and females perform different types of work with males getting higher wages (100-150 NPR vs. 60-80 NPR) depending on village.

Untouchability as a reason for discriminatory resources allocation

No discrimination observed in water tap stands. Caste based discrimination is visible in traditional Naulas and other water resources. Some discrimination in water use inside the Dalit caste has been observed.

Restricted mobility in public places and ceremonies

Dalit participation in religious activities has improved but they are still excluded from some ceremonies or rituals.

Fate, faith and fear

Caste and gender-based discrimination is trapped in an equilibrium of faith, fate and fear backed by myth and superstition. Main factors promoting gender-based discrimination is a myth that daughters are born for another home while sons take care of the family house.

Many Dalits have a myth that it was their fate to be born as Dalit and if they don't tolerate discrimination they will go to hell and be born again as Dalits. People are reluctant to accept change because of deeply socialised practises amongst all castes due to ideas of "ritual impurity", fear of bad luck and retribution from gods.

Towards changed attitude and behaviour

Discrimination faced by menstruating women, girls with their first period and Dalits in public places like schools, tea shops, temples and water taps have been almost abolished. Still, other caste members are reluctant to provide decision-making power to Dalits and women.

Physical inclusion but restriction from power

Inclusion of excluded groups such as women and Dalits in local level political and social institutions and community-based groups is making progress. Still, dignified, and meaningful participation and sharing of power in decision-making is yet to be ensured.

3.2. Summary of findings on discriminatory practices in the VDCs

Major findings from the 2009 table on discriminatory practices, relevant to the 2021 study, are summarised here.

Chhaupadi

In Sipti and Kushapani, menstruating women sleep in separate beds, but in the same house. In Sharmali they have to sleep in separate cow sheds. In Sharmali, they are not allowed to touch water taps or wet and cooked food. In Kushapani women are allowed to use common taps and touch food normally.

Workload of women

Generally, women take care of household work. They wake up earlier and work longer than men. Men are involved in hard labour such as ploughing.

Discrimination at the water tap

Ethnicity-based discrimination was not observed at the water taps.

Representation of Dalit and women in community institutions

In Sipti and Sharmali, very few women or Dalit representatives are found in community institutions and their participation is not active or meaningful. In Kushapani, there are Dalit representatives, but women representation is poor. Dalits have been elected and nominated in decision-making positions.

Discrimination practices

The following data on discrimination practises was collected only for Sipti and Kushapani as part of the detailed survey.

Drinking water

All community members are allowed to access water taps equally. However, women take care of all household water related activities: fetching, washing clothes and bathing children. Women spend a lot of time daily to collect drinking water from the sources, that might be far away. Women have no time or opportunity for economic activities. Still men make the decisions about construction, management and maintenance of the water supply.

Economic activities, employment and migration

In Sipti, all economic decisions are made by men and women are often not even consulted. In Kushapani women can make decision on livestock selling and purchasing without permission. In both communities,

women work in the households, while men go to seasonal work in India. Dalits in Sipti are forced to work in India for long periods as they are landless and must pay rent for the landowners. Men are seen as the bread earners in the communities and their status is much more respected than women's.

In Kushapani women can make decisions over minor household purchases or sales as well as how to use the land for agricultural purposes. However, men are in complete control of the sale or purchase of land.

Education

In Sipti, the number of girls in schools is rising, but it is still low. Especially Dalit girls have little access to education because of the workload, economic reasons, traditional practices and risk of humiliation. Girls have to help in the household work, so they don't have time to study.

In Kushapani both boys and girls are sent to school, but girls often have to quit early due to marriage. After primary school, parents prefer to send boys to school over girls.

Financial institutions

There are credit and savings groups in both Kushapani and Sipti. Women and Dalits have become members of the groups. For women, they still need to rely on men for record and book-keeping due to low literacy.

Health

Most women in Sipti, suffer from uterine prolapse as they are forced to start hard labour almost immediately after delivery. The men are in India so they cannot support.

In Kushapani there is a sub-health post nearby, but if they want to go, they need permission from their husbands or families.

Annex 3: Findings from 2021 study

4.1 Findings from Sipti

Workload

In all interviews it was clear that women wake up earlier than men and take care of household activities, such as sanitation, food preparation, cleaning and feeding children, collecting fodder and firewood. Women are also the last to go to bed after finishing all household chores.

It was mentioned in the mixed group discussion, that men do hard labour but also spend more free time and spend money on drinking or gambling. Sometimes men also help women with household activities. However, when men go abroad for seasonal work, women take care of everything. No domestic violence was noted.

Ownership and Employment

1.1. Planning is done together, but women take care of the Home Gardens. Men support during harvesting season and with hard labour such as digging or ploughing.

1.2. Many participants have participated in Home Garden Training. RVWRMP is the only organisation to provide local training on Home Gardening. Most can consume vegetables regularly now and some are involved in small vegetable production.

1.3. The decision is made together with women telling what is needed. The actual purchase is done by men, as they are not tied to the household. Other reasons for men being in charge include women not knowing the prices and men being tougher negotiators.

1.4. Women and men both decide mutually, but usually it is the men who do the actual sale as they are more knowledgeable to negotiate the prices.

Education

2.1. All children go to school. Before there were issues with Dalit households not having money to send all children due to big households, but now resolved.

2.2. Menstruating girls are allowed to go to school. However, there was an event in 2020, where around 20 girls fainted, and the school was shut for some days. The local healer (dhami) blamed this on menstruation (as there is a temple on the way to school), which led to some girls stopping school during their period. Gradually the situation has improved (2022 monitoring info).

2.3. Yes, and the school is giving sanitary pads to girls.

2.4. Yes, but they still support with household work like collecting fodder, helping with cattle, collecting water, etc. However, with new mills and gas cylinders available, the time needed for household work is lessened. The girls enjoy school as at home there is more work. There is a worry, that kids spend too much time on their phones.

Representation

3.1. Thanks to government quotas (33% positions for women), women have more opportunities to represent at community level. There are also women chairpersons in some UCs and groups. However, often men still dominate discussions.

3.2. Shyness and a lack of education have hindered process, but different trainings have been crucial in encouraging women to participate. Family members (including men) are nowadays more supportive and encourage women to represent. The government quotas provide opportunities.

3.3. Yes, women can manage their time to attend meetings and take care of household activities. Husbands and neighbours' support.

3.4. A major change is the decrease of caste discrimination, such as untouchability (verified by the Dalit group). In public areas it is not present anymore. Dalit men say that they can participate in all meetings and activities now.

Another major change (observed by the women's group) is the opportunities and capacity of women to take part in community decision-making. Before there was no confidence or possibilities, but now there cannot be meetings without women present.

Thanks to RVWRMP, water availability has decreased workload especially for women and improved overall health especially for children. Sanitation knowledge and behaviour has improved as well. ODF has

been achieved. Women's health has increased dramatically with the availability of menstrual hygiene materials, eradication of chhau culture, easy access to improved health facilities and birthing centres and availability of uterus prolapse treatment.

Accessibility has improved with road access to the community and banks being close by.

In general, there is less division between different groups in the community, mainly thanks to unifying nature of RVWRMP workshops and way of working.

One major challenge is that Dalit women don't feel so empowered to apply for key positions. Unemployment is still an issue, compelling many men to go to India for work.

Another challenge is the damage to the water supply system caused by the new road access coupled with increasing population. O&M funds should be collected regularly to counterweight the problem.

Waste management is also an issue, and it hinders the Total Sanitation development. Landslides and flooding are problematic.

Health and nutrition

4.1. The answers were varied. In general, it was agreed that women don't do outside work during the first month after pregnancy. They start doing minor work after 3 weeks and hard work after 6 months. Still there are issues with uterus prolapse due to starting work too early. Medical issues are often hidden.

4.2. No chhau hut practise. All women go to birthing centres in Sipti or Marma. They receive government incentive if they go there. The only tradition followed is the exclusion of women until naming of baby (9 days).

4.3. Menstruating women are not allowed to worship or enter temple. Women also don't cook during menstruation. Otherwise, no restrictions, they are allowed to consume milk and curd and can use toilets and taps normally. In some cases, taps are washed after being used by menstruating women.

4.4. Earlier there were strict rules, but now no restrictions. Women are allowed to eat anything.

4.5. They sleep inside the house in a separate bed. Before the Maoist uprising, the chhau tradition was followed, but afterwards not anymore.

Workload

5.1. Generally, women take care of all household work, including looking after livestock and agricultural work. Men sometimes support with hard labour outside.

5.2. Household work is not shared.

5.3. Generally, women, but some work done by men also.

5.4. Mixed and women's group mentioned several: polyhouses, goats, ghee productions, beekeeping, seasonal work in India and yarza collecting. Dalit group only mentioned seasonal yarza and mushroom collection.

5.5. Local festivals, weddings, cultural programmes, radio and social media.

5.6. One VMW is female, 2 teachers and one cooperative manager is female. Some political leaders get allowance.

Water use, sanitation and hygiene

6.1. There is a gravity drinking water supply system, but it is not working properly due to recent road construction. The system operates only about 4 hours a day and is then closed.

6.2. People use the public taps, even though they are damaged.

6.3. Women use the same taps, but sometimes during menstruation they wash clothes privately - during unbusy times. Sometimes they go to the stream source for washing clothes.

6.4. No, most people had not seen toilets before.

6.5. RVWRMP.

6.6. Yes, no restrictions on toilet use for menstruating women.

Water collection time

Before: 1 - 3 hours with stream source (one way).

After: Now 1-15 minutes. Even though the scheme is damaged it is close by.

Number of trips per day: 3-6

Transformative change

Economic empowerment: Especially women have experienced a big change in economic empowerment as most are now shareholders in cooperatives, they have savings and bank accounts, and are active in income generating groups, e.g., weaving, home gardens, etc. This provides economic security. The project has contributed via trainings and through saved time that can be used for earning instead of water collection.

Decision-making: Women participation is increasing, and they have key positions in different development activities. Men seem to accept women as leaders. Dalit representatives are also in key positions. Women are happy about the change.

Workload: The division of workload is still quite traditional, though there is impact through saved time from water collection.

Social changes: Menstruation related behaviour has changed drastically. Also, women are now allowed to attend meetings and are encouraged to take part in community representation.

The ODF declaration, supported by RVWRMP has led to significant improvements in sanitation.

4.2 Findings from Sharmali

Workload

As a summary of the communities, most households have men going to work in India and thus they spend only 2 months in the village.

This means that women are in charge of most community matters as well as the households.

In the Dalit community, two divorcees participated in the meetings, whose husbands had been banished due to dual marriage and they had to do all the work.

In the households, women wake up first and take care of household activities, cooking, and collecting natural resources. If husbands are present, they can share responsibilities. Men also support in hard work, such as ploughing, but in these communities women do most work (even hard work) as men are away.

In the Dalit households, men generally also support in household activities, but they are only home for a short while due to seasonal work.

Ownership and Employment

2.1. Decisions are made mutually, but women take care of the Home Garden itself. Men buy seeds and equipment.

2.2. All interviewees took part in RVWRMP provided HG management training. Additionally, the RM has provided veterinary and agriculture training.

2.3. Generally, both make the decisions and men buy the supplies and equipment as women are unsure of the price.

2.4. Women and men both decide mutually. Especially for higher price items, men take care of purchasing and selling, as women are unsure of the price. Women can sell their home products, like ghee, vegetables, milk, etc.

Education

3.1. All children go to school.

3.2. Yes. There are no restrictions on attending school during menstruation. Schools have appointed focal teachers to help girls and distribute sanitary pads.

3.3. Yes. Schools are giving out sanitary pads to girls.

3.4. Parents ensure that both girls and boys have enough time for homework, but they are worried that children spend too much time on their mobiles.

Representation

4.1. There are women leading community organisations, but men are more interested or capable. Generally, men hold power positions and make final decisions.

4.2. Different trainings from RVWRMP and RM have encouraged women and Dalits to apply for leadership positions. The mixed and women's group agreed that women are getting family support now as well.

4.3. Women are able to manage time for meetings and arrange someone to help at that time.

4.4. Major changes in the community include the increase of women involvement and the decrease of menstruation discrimination. Women are aware of community ongoing issues and can participate in discussion.

Water is now available in the village, which has saved a lot of time. Water-borne diseases have decreased. Electricity is also available and food security has increased.

Discrimination has decreased and Dalits are able to apply for leading positions. Communities have become more unified and there is no more untouchability behaviour.

A) Increasing awareness, possibility to participate and modern technology. Support from RVWRMP and government.

B) Mostly positive changes, with reduced workload, equality and access to basic needs and infrastructure. Negative changes include destruction of farmland due to roads and children spending too much time on their phones.

C) How to improve economic situation so that so many don't have to go to India? There are limited opportunities to work locally for both men and women. Climate change is causing problems to farmland.

All participants have taken loan during covid and might have issues paying back.

Dalit women are still not empowered to apply and work in lead positions. Literacy is an issue.

Health and nutrition

5.1. Usually, women work until the baby is born. After birth they stay home for nine days until the baby is named. After, they start light work and after six months they can again do hard work. Many have had uterus prolapse problems in the past, but nowadays it is not prevalent.

5.2. There is a birthing centre in the village of Kushapani, which is used by all community members. They receive government allowance for using it. Chhau hut practise is not seen in Kushapani.

5.3. Menstruating women don't cook or go into temples. They cannot eat milk or curd. In the house they stay in separate beds, but they are allowed to use the toilet and tap.

5.4. Only milk and curd are prohibited, but even they are allowed if not from own house.

5.5. All stay at home and sleep in separate beds.

Workload

1.1. Generally, women take care of household work and farming activities. Difficult work, such as ploughing is supported by men. Women take care of livestock as well as collecting firewood, fodder and water.

In the Dalit community, two Dalit women have to take care of ploughing the field themselves because their husbands have been banned from the community due to dual marriages.

1.2. No, but they have mutual understanding of how they share work.

1.3. Generally, women collect natural resources.

1.4. Goat keeping, dairy and ghee production, weaving and knitting. Men generally go to India for seasonal work.

Dalits partake in iron works, goat and poultry keeping, sewing, VMW and local labour.

1.5. Almost all households have people (1-5) going to India or other foreign countries for seasonal work.

1.6. Local festivals, weddings, cultural programmes, listening to FM radio, social media.

1.7. There are some unpaid volunteers in the mixed community and 2 paid VMWs in the Dalit community.

Water use, sanitation and hygiene

6.1. There is a public tap scheme in the community that reaches all and provides 24/7 service. It was built 13 years ago.

6.2. Yes, all are using the public tap system.

6.3. Menstruating women can use the same tap for washing. Usually, they are alone as they wash during unbusy time or people are avoiding the tap when they are there. Sometimes if there is a queue women might wash clothes in the stream.

6.4. No, most had not seen toilets before.

6.5. RVWRMP encouraged toilet building as well as Rural Reconstruction Nepal. Thanks to project support, all HH have a toilet and ODF was reached.

6.6. Yes, menstruating women can use toilet without any hesitation.

Water collection time

Before: 30 min to 1 hour (from stream source)

After: 5-15 minutes

Number of trips per day: 2-5

Variation between dry/wet season: Yes, during the dry season, the discharge decreases.

Transformative change

Economic empowerment: Most households have improved their economic situation, but men still need to go to India for seasonal work. Women are selling dairy products, vegetables and meat and are shareholders in cooperatives. Women also have bank accounts and are active in income generation groups. RVWRMP trainings have been useful.

The Dalit situation has improved, as nowadays people have no trouble buying goods from them. Now they can easily sell vegetables, meat and even milk (not possible a few years ago).

Decision-making: Women's participation is increasing in community and RM level. They have key positions in community groups and are easily accepted.

Workload: If men are in the community, they are also supporting women with household work. However, this is rarely seen due to seasonal migration. The improved water supply system has reduced the workload and provided time for community representation.

Social changes: Women participation has increased. Untouchability and menstruation taboos have decreased. Pregnant women can easily do checks in local health posts and deliver in birthing centres. Girls are getting higher education.

Dalits and non-Dalits can celebrate local festivals together and invite each other to social events such as weddings.

Sanitation behaviour has improved, and all households have toilets now.

Women are leading their own businesses and even domestic violence has decreased as women are more aware of their rights and not afraid to speak.

4.3 Findings from Kushapani

Workload

Women wake up earlier to take care of all household activities: cleaning the yard, collecting water, feeding the cattle, home gardening, etc. Women take care of cooking and children and are the last to go to bed.

Men wake up later and focus on daily wage-based work in the community. They also support women with dinner and some household activities.

Ownership and Employment

1.1. HG irrigation is done together when both are present. New generation makes decisions together.

1.2. Most of the respondents received HG management training.

1.3. Households discuss together which supplies and seeds they buy, but men are responsible for purchasing.

1.4. Generally, men take care of selling, but they discuss with women beforehand. Women are not believed to be as good negotiators.

Education

2.1. All children go to school, which is a big improvement.

2.2. Girls attend school regularly and there are no restrictions related to menstruations.

2.3. The school provides sanitary pads through RM based on demand. Secondary schools have DMM friendly toilets with incinerators.

2.4. All children have time for homework and parents don't assign household work unless homework is finished. During peak agricultural season elder students are expected to support their families in a manner that they still finish homework.

Representation

Note: one story available for 3.4.

3.1. All genders and ethnic minorities should be represented which has encouraged women and Dalits to apply for groups, committees and leadership posts. Several such positions are held by Dalits and women.

3.2. Meetings, trainings and workshops as well as awareness raising and capacity building activities organised by projects, such as PDDP, SUAHARA and RVWRMP have encouraged community members. RVWRMP has been chief instigator for the equal participation of women and proportionate participation of minorities.

3.3. Women have time to take part in meetings and during them household work is shared by husbands.

3.4. Positive changes:

Focus on caste discrimination being eradicated, time saved through mills and water supply systems. Road access and communications have improved along with health and education.

The improved water supply has increased income generation activities.

Women's access to decision-making has increased.

Negative changes: Road construction has caused landslides and damage. Deforestation is an issue. Water sources are drying.

A) The change has come chiefly through RVWRMP and local governments.

B) As said before, mostly positive changes.

C) Key challenges include Total Sanitation, due to unsystematic dust, farm animal and cattle shed management, climate and population growth impacts (source drying, deforestation, etc.) and misuse of social media by adolescents.

Health and nutrition

4.1. Women are being instructed by local health post not to work hard during first three months after pregnancy, but most do minor work after one month of delivery.

They are separated until baby is named (9-11 days after delivery).

After 15-16 days they start housework. After 4 months they start hard work.

Nutritious food is consumed after baby is born but milk and curd are prohibited until naming.

4.2. All women go to birthing centres (2 nearby) thanks to governments incentive. There are 4 regular health check-ups during pregnancy.

There are no chhau huts, but women stay in separate rooms until the baby is named.

4.3. Menstruating women don't cook, and in most families, they can't eat milk and curd.

In about half of the households they can use toilet after menstruation and childbirth, while the rest use water pots. Cow urine is sprinkled on the toilets after use. They can't use taps, but the taps can be connected with a pipe for them to use for washing clothes and bathing.

Women can't enter temples or kitchens and they can't touch others during their period. Cow urine is sprinkled if they touch someone.

They can meet in social events and go to school.

4.4. Only restriction is milk and curd, but in some households even that is allowed.

4.5. There are no chhau huts, but they are separated in a clean good room for four days. Young generation does not mind.

Workload

5.1. Generally, women are responsible for household work and men take care of outside work. Men are responsible for firewood, while women take care of cattle and collect water and fodder. Men also support.

Men do harder agriculture work, such as ploughing the field and enlarging cultivation area. Men irrigate home gardens and fields.

Women take care of cooking, but men sometimes support.

5.2. Families divide work between themselves. See 5.1.

5.3. Generally, women collect water and fodder while men take care of firewood collection.

5.4. Vegetable farming, goat keeping, buffalo keeping, poultry farming, ghee production and seasonal work in India.

Dalits also employed in iron works and bamboo production.

5.5. Local festivals, weddings and cultural programmes. FM radio, mobile phones, music, social media, television, etc.

5.6. 3 male VMWs and one female. 1 dalit teacher, 3 females.

Water use, sanitation and hygiene

6.1. There is a public tap system that was damaged but currently being fixed. Some households far without taps.

There is also a private tap scheme functioning well.

6.2. All community members use tap.

6.3. Menstruating women use taps indirectly through pipes. They might wash clothes and bathe farther away in secret.

6.4. There were 10 toilets supported by DCC before RVWRMP started.

6.5. Apart from the 10, all toilets were constructed with support from RVWRMP.

6.6. In about half of the households, women are allowed to use the toilet during menstruation. In the rest they use pots. Cow urine is sprinkled after toilet use.

Water collection time

Before: 5 min to 2 hours

After: 1 minute to 20 minutes

Number of trips per day: 2 - 10

Variation between dry/wet season: Yes, there is more discharge in rainy season and less in dry season.

Transformative change

Economic empowerment: Most household members are shareholders in cooperatives. Women and Dalits are involved in different income generation activities. There are various employment opportunities.

Living standards have improved in the last 12 years. Girls and Dalits go to school and there are women and Dalit teachers.

Sanitation and hygiene behaviour has improved, and water-borne diseases are disappearing. Medicine costs for households have been reduced.

Purchasing capacity has increased and each household has at least two mobile phones. Food variety has improved.

Decision-making: Thanks to compulsory participation of women and marginalised groups as well as RVWRMP emphasis on the topic, the equality situation has improved. There are women as decision-makers and active mother's groups.

Women and Dalit are able to participate in events and raise their voice. RM consults with them about budgeting.

Workload: Women don't have to spend all day to travel to mills or fetch water. Workload in the household is shared, though traditionally. Men support women with cooking and collecting fodder and fetching water. Girls have time to study.

Social changes: Girl enrolment in school has increased and they go to school during menstruation. Sanitary pads are available.

About half of women are allowed to use toilets during menstruation.

Access to WASH services have increased. ODF has been achieved and the communities are moving towards TS.

Untouchability in public places is eliminated. Khalo system is almost abandoned.

4.4 Summary of 2021 findings

Here are summarised findings from all three communities.

Workload

In all communities, women woke up earlier than men, went to bed later than men, and were primarily in charge of the household. Activities include yard cleaning, preparing food, taking care of livestock,

attending to the home gardens and taking care of children. Men usually support in hard labour, such as ploughing. Sometimes men support in household chores as well.

In all communities, a lot of men left for seasonal work in India. This gives more agency for women to take care of community matters as well.

In all communities, women are responsible for household work, including home gardens and taking care of livestock. Men support with difficult work, such as ploughing.

In the Kushapani Dalit community, two women must take care of all the work as their husbands have been banned from the community due to illegal dual marriage.

Household work is not shared, but usually it is discussed together.

Women take care of natural resource collection. They are sometimes supported by men.

Other income generation activities include vegetable farming, goat keeping, dairy production, handicrafts. In all communities, men go for seasonal work in India. In some places yarsagumba collection was also mentioned. Dalit groups mentioned far less income generation activities as other groups, focusing on iron works.

Leisure activities in all communities include local festivals, weddings, cultural programmes, radio and social media.

In total, there were two female and two Dalit VMWs.

Ownership and employment

Decision regarding the Home Gardens are done together, but women oversee taking care of the garden. Men support in hard work, such as ploughing and purchasing equipment.

Almost all of the respondents have taken part in RVWRMP HG management training, which has been the sole source of such training.

Households discuss together on which agricultural supplies are needed. Men are responsible for purchasing, due to women being unsure of prices.

Decision on selling agricultural products is done together. However, men are usually in charge of the actual sales, as they know the prices. Women can usually sell their home-made products themselves.

Education

All children in all communities go to school.

Girls can attend school during menstruation. In Sipti, Darchula, there was a fainting incident of several girls in 2020, which was blamed on menstruation by the local dhimi. This has since been resolved.

Schools provide sanitary pads through a government scheme free for students.

All children are said to have enough time for their studies. Many communities raised concerns over the children's mobile use.

Representation

Women are currently represented in community organisations mostly thanks to government (and project) quotas. The new rules have encouraged women and marginalised groups to apply and work in committees and leadership posts. In most communities, consensus was still that men hold most power positions and dominate discussions.

Trainings from RVWRMP and RMs have encouraged women and marginalised groups to apply for leadership position. Family support for women has also increased.

Women are able to manage time for community meetings thanks to family and neighbour support.

Major changes in the communities include increase of women involvement and decrease of caste discrimination.

Increased and eased access to water through RVWRMP projects has lessened workload, provided income generation possibilities, and reduced water-borne diseases. Increase of health centres has contributed to improved maternal health.

Road access and communications have improved.

Things are changing due to increased awareness and support of projects such as RVWRMP.

Changes are mostly positive (as listed before). Some negative changes include destruction of farmland and water supply caused by road construction, deforestation, and children spending too much time on mobile phones.

Challenges include the need to improve economic situation so that men can stay in the community, Covid loans, and climate change impacts (sources drying, deforestation, etc.) and overt use of social media.

Dalit communities in Kushapani felt that they were not empowered enough to apply for lead positions in the community.

Health and nutrition

The answers to women working during pregnancy were varied between the communities. In Kushapani and Sipti it was agreed that women don't do hard work until six months after pregnancy, while in Sharmali, the period was four months. In Kushapani women started light work after the naming ceremony (9 days after pregnancy). In Sipti, they started minor work after three weeks and in Sharmali after two weeks.

There are birthing centres nearby all communities. Women receive government incentives when birthing in the centres, so they are used by all.

In all communities menstruating women could not enter temples or cook food. In Kushapani and Sharmali they were not allowed to eat milk or curd (in some cases it was allowed, but not from their own home), but in Sipti it was allowed. In all communities, women were allowed to use the taps, but in some cases other community members washed them afterwards.

In Sharmali women were not allowed to touch others while menstruating. Half of the households allowed toilet use, with the rest using water pots.

In all communities chhau huts have been eradicated and women can stay in the same house, but separate beds or rooms (Sharmali).

Water use, sanitation and hygiene

All communities had a public tap system, apart from one private tap system in Sharmali. In Kushapani the water supply system was in good condition despite it being 13 years since construction. In Sipti, the system was damaged due to road construction, but still operating four hours a day. In Sharmali the public tap system was damaged but being fixed.

All community members were able to get tap water, despite some systems being damaged.

In all communities, menstruating women could use taps, though in Sharmali indirectly with the aid of pipes. In all communities, they might wash clothes in streams due to queues or privacy needs.

In all communities there were no or only a few toilets before RVWRMP interventions. Now, all households have toilets, and the community is ODF.

In Kushapani and Sipti menstruating women can use toilets normally. In Sharmali, about half of the households allow normal toilet use, while the rest use pots. Cow urine is sprinkled after toilet use.

Water collection time

Before project interventions, water collection would take 5 min to 3 hours (one way).

Number of trips varied from 2 - 10 per day.

After project interventions, water collection times dropped to 1 - 20 minutes.

In all communities, variation between dry and wet season was observed, with there being more discharge during the monsoon.