

GENDER ACTION PLAN

A. Background

Gender assessment as part of poverty and social assessment was carried out during project preparation to: (i) assess the potential gender-differentiated impact of the project and option to maximize benefits and minimize adverse impacts; (ii) assess men's and women's capacity to participate in the project and factors affecting that capacity; (iii) identify and assess government agencies and community-based organizations, and women's groups that can be used during project preparation and project implementation; and (iv) incorporate gender findings in the project design. The summary GAP has been prepared to show the Project will benefit both men and women, and how the Project will address gender disparities in the WSS.

B. Project Components and Design

The Project consists of two parts: (i) physical infrastructure; and (ii) institutional development, which includes a capacity building program, a hygiene and sanitation (HSE) program, and consulting service for project management support. Of the total 2.2 million rural populations in the project oblasts, about 11% or 250,000 people will be covered by the 12 subprojects.

Component A includes about 12 subprojects, covering 170 villages with populations ranging from 300 to 10,000. The subprojects will include the development and/or rehabilitation and upgrading of piped water supply systems, school and private latrines and wastewater drainage facilities. The development and expansion of the water supply systems will include construction and/or rehabilitation water source intakes, pumping stations, treatment facilities, storage reservoirs, transmission and distribution pipelines, and individual yard or house connection.

The capacity building program as part of component B will provide the following types of training (i) on-the job training in O&M for the operators of the new systems with emphasis to improved water quality testing and environmental issues; (ii) training of Uzbekistan Communal Service Agency (USCA), PMU, PIUs and Drinking Water Consumers Union (DWCU) management in project planning, financial management and accounting and government health education program. About 600 central and local government staff will be trained under the program. The USCA will also use NGOs to assist capacity building of DWCUs. The DWCUs will compose representatives of local citizen's rural communities from respective subproject area and representative from selected NGOs. Through the DWCUs, the local communities will be responsible to secure: (i) regular monitoring of water supply, (ii) access to water by the poor households, (iii) regular payment of tariffs, (iv) quality of water, (v) prevention of wastage of water; and (vi) decide locations of public standpipes and level of services, and (vii) monitor and supervise civil works.

The HSE program will help the beneficiaries to improve their understanding of the relationship between hygiene, water, sanitation, and health. The HSE program will include: (i) selection of HSE media materials for hygiene, sanitation, and water-related issues, and production of campaign and training materials to complement existing virology school subject materials; (ii) HSE workshops, orientation and training of rayon and village health staff, village leaders, and school with materials and software required for training; and (iv) development and implementation of the HSE program in schools.

Consulting service will help implement the project and provide project management support. The service will also (i) help in project management and monitoring; (ii) assist in construction

supervision of subproject, and (iii) support the planning and implementation of the capacity building and the HSE program. The UCSA will involve at least two NGOs to be associated with the project consulting services for community consultation and development in subproject planning and for monitoring subprojects.

C. Implementation of Gender Action Plan

7. To address gender impacts and promote women's active involvement in the project and direct access to project benefits such as number of women to be trained, involvement of women in HSE program, women's membership in DWCU, a gender action plan has been prepared. A summary of proposed gender action plan for component A and B is presented in Table 1.

Table 1: Proposed Gender Action Plan (GAP)

Project Components	Actions Proposed
Part A: Physical Infrastructure:	
Development and/or rehabilitation and upgrading of piped water supply systems, schools and private latrines and wastewater drainage facilities	<ul style="list-style-type: none"> • Identification of villages based on agreed pre-selection subproject criteria • Disaggregate incidence of water-related diseases by gender. • Consultations with potential water users (men and women) on their participation in the planning process, implementation and monitoring. • Qualified females will have equal access to training and employment opportunities in the project. • Specific considerations that affect females (e.g., separate school and public latrine facilities in different locations and sufficient space within bathrooms) should be reviewed. • Female headed households (FHH) will receive equal compensation as per land acquisition and resettlement framework. • Specific consideration that affect women i.e., access to water points should be reviewed prior to rehabilitation/new construction of water points.
Part B: Institutional Development:	
a. Capacity building program	<ul style="list-style-type: none"> • Gender training for Uzbekistan Communal Service Agency (UCSA), PMO, PIUs, and DWCU • 50% of the community representatives from the settlement and management position of the DWCU will be female. • FHHs, irrespective of ethnicity and income levels, will have equal access to becoming member of the DWCU • 50% of 600 central and government staff on capacity building program will be female. • At least 40% of representatives from NGOs in the DWCU will be female • Training women's organizations, including those representing poor women in the decision-making process, including planning of WSS facilities.
b. Hygiene and Sanitation Education Program	<ul style="list-style-type: none"> • Training materials should be sensitive to the needs of both men and women. • Increase awareness of links between water and diseases among men and women. • At least 30% of all hygiene and sanitation education program participants are men. • 50% of HSE workshops, orientation and training of rayon and village health staff, village leaders, and school teachers will be female.
c. Project Implementation Arrangements	1. GAP consulting service include: (i) a national gender specialist (12 person-months); (ii) national community participation specialists (2 persons for 18 person months); and a national resettlement specialist (6

Project Components	Actions Proposed
	person-months) 2. One NGO (women committee) will be selected for implementation of community consultation and development in subproject planning and monitoring. 3. Project benefits and impacts will be monitored through gender-disaggregated data. Survey respondents will include both men and women. Records of participation and awareness training will also be gender-disaggregated. 4. Progress reports submitted to ADB and the Government will include gender updates 5. The independent M&E specialist will also monitor implementation of GAP.

8. Implementation arrangements and estimated costs of GAP have been integrated into the overall arrangements and total budget of the Project. The PMO and UCSA will be responsible for implementing and monitoring GAP. The national gender, participation, resettlement specialists and women's committee will help to conduct gender awareness trainings for component B (capacity building and HSE program).

D. Monitoring and Evaluation

9. Survey to develop baseline data which include gender-disaggregated will be conducted during the Project inception and regular monitoring will be undertaken and reported upon during the project implementation and completion. Gender specialist will also (i) conduct gender assessment on the additional subprojects in accordance with GAP; and (ii) undertake regular assessments of project benefit in all project components and sub-components to track gender impacts and identify and remedy gender gaps as appropriate. In addition, the independent M&E specialist will monitor implementation of GAP.