



Australian Consulate-General
Bali, Indonesia



Baseline - Endline Report Water for Life in Kedisan Project

July 2024

Bali Women Crisis Centre (BWCC)

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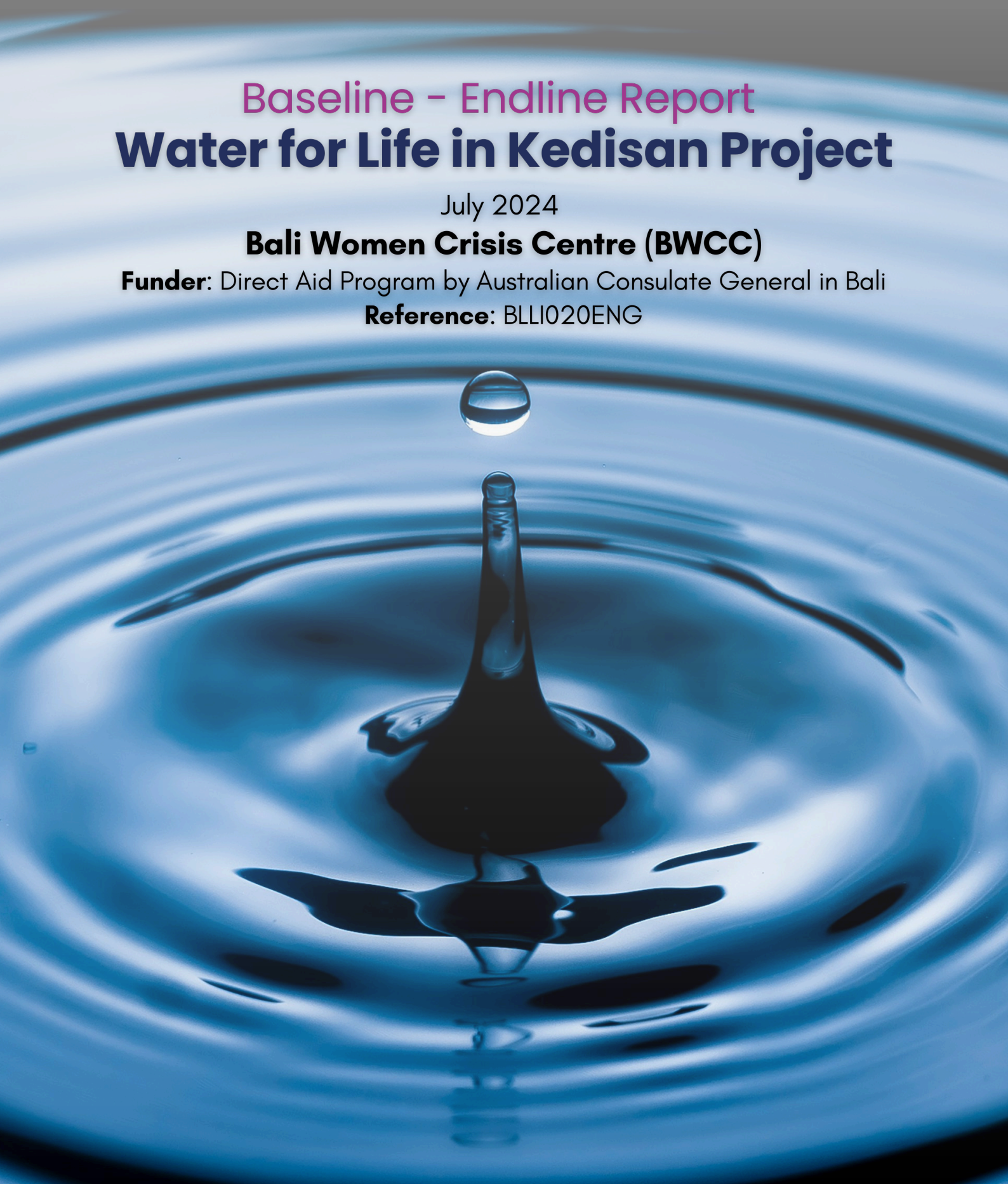


Table of Content

Table of Content	1
Introduction	2
Methodology	3
Instrument Development	3
Data Collection Methods	3
Sample Size	3
Data Analysis Methods	4
Baseline Findings	5
Demographic Information	5
Socio-Economic Information	5
Water Problem	6
Gender Aspect	6
Endline Findings	7
Socio-Economic Change	7
Water Access Improvement	8
Gender Aspect:	9
Impact Analysis and SROI	10
Socio-Economic Change	10
Water Access Improvement	11
Gender Aspect	12
SROI Analysis	13
Project Value	13
Direct Impact	13
Indirect Impact	13
Total Financial Value of All Benefits	14
Conclusion	15
Annex 1 - List of Respondents	16
Annex 2 - List of Questions	18

Introduction

The Bali Women Crisis Centre (BWCC) is dedicated to providing both litigation and non-litigation support to women, particularly survivors of violence in Bali. One of BWCC's non-litigation pillars is women empowerment, which encompasses various activities, including the provision of essential services. A significant initiative under this pillar is the establishment of a clean water facility in Kedisan Village, located in the Kintamani Sub-district, Bangli District, Bali Province.

This project called Water for Life in Kedisan, was made possible through financial support from the Direct Aid Program (DAP) by the Consulate General of the Australian Government in Bali, which provided AUD 17,700 to BWCC. The primary objective was to improve access to clean water for the local community in Kedisan Village. The project started in March 2024 and ended in July 2024.



Map of project location Water for Life in Kedisan

This report presents the findings from the baseline and endline assessments conducted by the BWCC team. The purpose of these assessments is to evaluate the impact of DAP's funding on the local communities in Kedisan Village. The analysis focuses on key indicators such as household income, water expenditure, and the overall well-being of the beneficiaries.

Methodology

Instrument Development

The BWCC team developed the baseline and endline instruments at the beginning of the project implementation. These instruments consisted of a set of structured questions designed to gather comprehensive data from respondents during both the baseline and endline data collection phases. Set of questions for baseline and endline processes can be found in the annex.

Data Collection Methods

The primary method for data collection was structured interviews with each respondent using the developed instruments. These interviews were conducted to ensure consistency and reliability in the data gathered, allowing for a detailed understanding of the project's impact. Collected data (raw) can be accessed upon request.

Sample Size

The sample size comprised family members from all beneficiary households. In total, there were 20 respondents representing 20 households that benefited from the project. This sample provided a broad view of the project's impact on the community.



Methodology

Data Analysis Methods

The data analysis focused on assessing changes between the baseline and endline data, particularly in the following areas:

- Utilization of the clean water facility
- Savings opportunities from reduced water expenditure
- Utilization of the saved money

Additionally, a Social Return on Investment (SROI) analysis was conducted to evaluate the broader social, economic, and environmental impact of the project. This comprehensive analysis provided insights into the effectiveness and benefits of the clean water facility for the community in Kedisan Village.

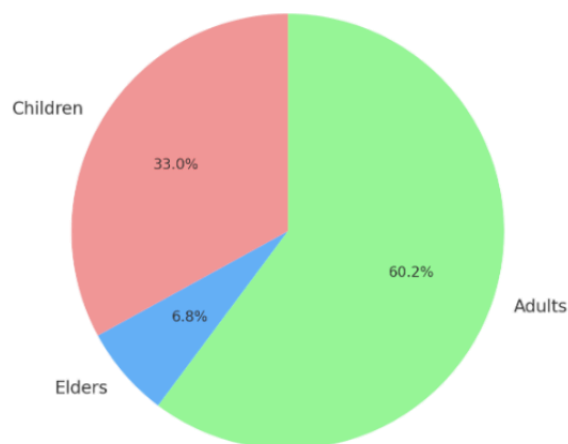


This section provides a summary of the baseline study conducted by BWCC. The study aimed to gather initial data on the demographics, socio-economic conditions, water-related challenges, and gender-specific aspects within the community of Kedisan Village before the implementation of the clean water facility project.

Demographic Information

The baseline data was collected from 20 households, encompassing a total of 88 individuals. Among these individuals, 6 are elders, and 29 are children. Women constitute at least 50% of the total population. The household sizes vary, with the smallest household comprising 2 members and the largest household having 8 members.

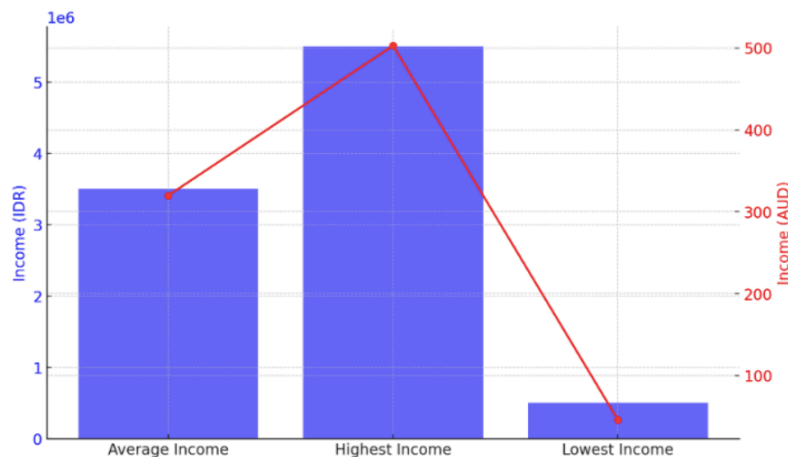
Demographic Distribution of Baseline Data



Socio-Economic Information

The average monthly income per household of beneficiaries is IDR 3,500,000 (AUD 320). The highest reported monthly income per household is IDR 5,500,000 (AUD 503), while the lowest is IDR 500,000 (AUD 46).

Household Monthly Income in IDR and AUD



Water Problem

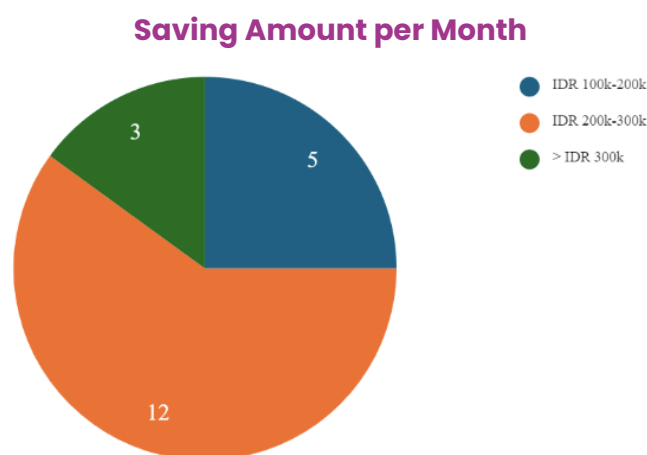
Households faced significant challenges related to water access and quality. During the dry season, each household had to spend an average of IDR 500,000 (AUD 46) per month on water. In the rainy season, households typically harvested rainwater. However, there was no filtration process; they only boiled the water before drinking it. For other purposes, such as laundry and showering, the water was used directly without any filtration, posing health risks. Additionally, families had to fetch water from a nearby source, which involved a 30-minute walk each way. Installing a connection to the local water utility (PDAM) was prohibitively expensive, costing about a month's income per household for installation, plus a high monthly fee.

Gender Aspect

Women were primarily responsible for fetching water. They typically carried water containers from their homes to the water source, making 2-3 trips per day. The journey took about 30 minutes each way and was hazardous due to the slippery, uneven path through wooded areas. The route was not only physically challenging but also posed safety concerns. Although there had been no reported incidents, the women felt unsafe due to the potential risk of sexual violence, exacerbated by the dark, isolated conditions of the path.

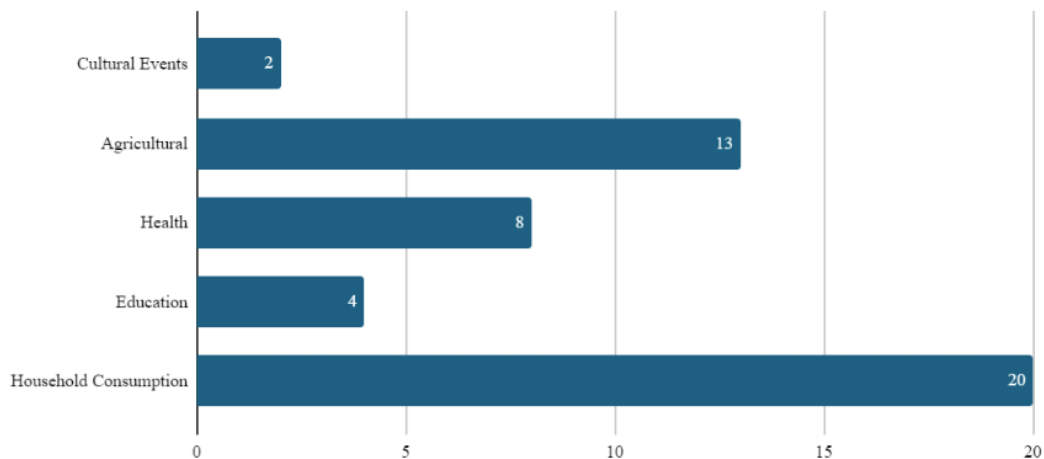
Socio-Economic Change

The implementation of the clean water facility has had a significant socioeconomic impact on beneficiary households. By eliminating the need to spend on water previously obtained through rainwater harvesting, long walks to fetch water, or costly purchases, households have experienced notable financial relief. On average, 25% of households now save between IDR 100,000 to 200,000 monthly, 60% save between IDR 200,000 to 300,000, and 15% save more than IDR 300,000.



These savings have not only alleviated immediate financial burdens but have also empowered families to redirect these resources towards enhancing their standard of living. This includes investing in better quality food, sanitation (MCK), household improvements, healthcare, education for children, and cultural activities that enrich community life. The newfound financial stability has contributed to a more resilient and economically vibrant community overall.

Use of Savings from Clean Water Facility Provision

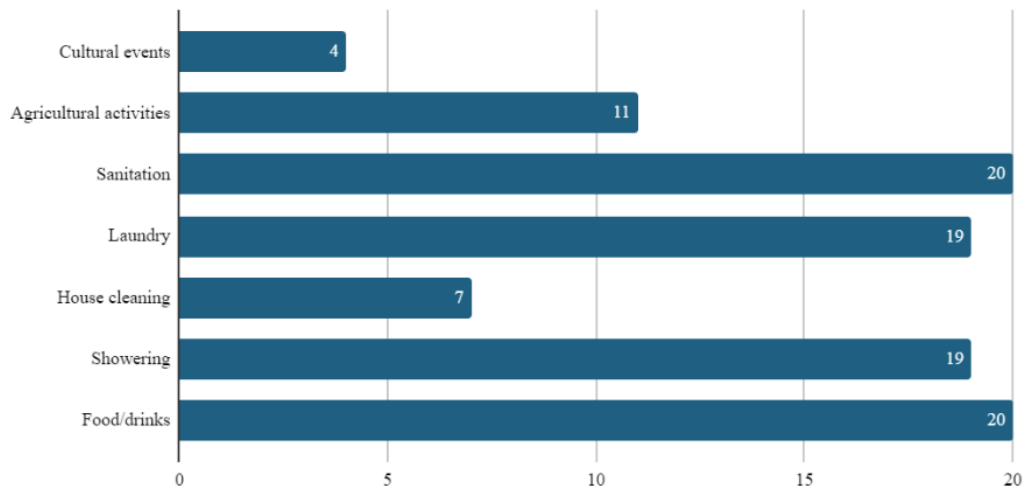


Water Access Improvement

Prior to the installation of the clean water facility sponsored by DAP through BWCC, households faced daunting challenges in accessing safe and reliable water sources. Many relied on rainwater harvesting, endured long walks of up to 30 minutes to fetch water, or incurred expenses purchasing water of uncertain quality. However, since the introduction of the facility, which has been verified through rigorous laboratory testing confirming its high quality in early 2024, these challenges have been effectively mitigated.

Households now benefit from convenient access to clean water that meets their daily needs for drinking, cooking, bathing, and sanitation. This accessibility has not only improved health outcomes by reducing waterborne diseases but has also enhanced agricultural productivity through reliable irrigation and livestock care. The clean water facility stands as a testament to sustainable development, ensuring that basic human needs are met while promoting environmental stewardship and community resilience.

Use of Clean Water by DAP



Gender Aspect

One of the most profound impacts of the clean water facility has been its effect on gender dynamics within the community, particularly for women. Historically burdened with the responsibility of fetching water, often at great personal risk and time expense, women now report feeling significantly safer and more empowered. With the facility providing reliable access to clean water directly within their communities, women no longer need to undertake arduous journeys to distant water sources.

This newfound security and time savings have allowed women to redirect their efforts towards personal development and community engagement. They now have more time to focus on self-care, pursue income-generating activities, and actively participate in decision-making processes within their households and communities. This empowerment not only enhances gender equality but also fosters a more inclusive and resilient community where women's contributions are recognized and valued.



Socio-Economic Change

Baseline Findings: Before the implementation of the clean water facility, households in Kedisan Village faced significant economic challenges related to water access. On average, households spent approximately IDR 500,000 per month during the dry season on water expenses, which often exceeded 10–15% of their monthly income. This financial burden constrained their ability to invest in other essential areas such as health, education, and improved living conditions.

Endline Findings: Following the introduction of the clean water facility, there has been a substantial improvement in socio-economic conditions within the community. The facility eliminated the need for expensive water purchases and time-consuming water collection efforts. As a result, 25% of households now save between IDR 100,000 to 200,000 monthly, 60% save between IDR 200,000 to 300,000, and 15% save more than IDR 300,000. These savings have allowed families to redirect their financial resources towards enhancing their standard of living. Investments have been made in better food quality, healthcare, education, and cultural activities, contributing to improved well-being and economic resilience. The average household income of IDR 3,500,000 (AUD 320) is now more effectively utilized, supporting broader community development initiatives.

Water Access Improvement

Baseline Findings: Access to safe and reliable water was a persistent challenge for households in Kedisan Village. Many relied on rainwater harvesting during the wet season and had to fetch water from distant sources during the dry season, involving substantial time and physical effort. Water quality concerns, including the lack of filtration methods, posed health risks to community members, especially during periods of water scarcity.

Endline Findings: With the implementation of the clean water facility, sponsored by DAP through BWCC, households now have consistent access to high-quality water that meets their daily needs for drinking, cooking, and sanitation. Laboratory tests conducted in early 2024 confirmed the water's safety and quality, addressing previous health concerns and significantly reducing waterborne diseases. This improved access to clean water has not only enhanced health outcomes but also boosted agricultural productivity through reliable irrigation systems. Livestock care has also benefited, contributing to increased food security and sustainable agricultural practices in the community.



Gender Aspect

Baseline Findings: Women in Kedisan Village bore the primary responsibility for water collection, a physically demanding and potentially unsafe task due to the isolated and hazardous paths to water sources. This burden limited women's opportunities for personal development and participation in community activities, while safety concerns persisted due to the risk of accidents and potential violence.

Endline Findings: The introduction of the clean water facility has brought about significant improvements in gender dynamics within the community. Women no longer face the physical risks and time constraints associated with water collection, which has enhanced their safety and well-being. The facility's convenient access to clean water has allowed women to redirect their time towards personal development, income-generating activities, and active participation in decision-making processes within their households and the broader community. This empowerment of women not only promotes gender equality but also strengthens community resilience and cohesion, recognizing women's crucial role in community development.



SROI Analysis

Based on the calculation, every IDR 1 invested in this project yields approximately IDR 2.41 in social value, indicating that the investment provides significant social returns through various direct and indirect benefits. The project not only reduces water expenses but also enhances education, economic productivity, and overall well-being of the community. This social investment is highly valuable and sustainable.

The calculation formula is shown below:

Project Value

AUD 17,700 or IDR 184,187,970.

Direct Impact

1. Savings on Water Expenses:

- Each family saves IDR 500,000 per month.
- Total savings per month for 20 families: $\text{IDR } 500,000 * 20 = \text{IDR } 10,000,000$.
- Total savings per year: $\text{IDR } 10,000,000 * 12 = \text{IDR } 120,000,000$.

Indirect Impact

1. Improved Child Education:

- Each family can allocate an additional IDR 200,000 per month for education.
- Total yearly education allocation:
 - 20 families * $\text{IDR } 200,000 * 12 = \text{IDR } 48,000,000$.

2. Allocation for Daily Work (Farming and Livestock Tools):

- Each family can allocate (estimated) an additional IDR 150,000 monthly for farming and livestock tools.
- Total allocation per year: $20 \text{ families} * \text{IDR } 150,000 * 12 = \text{IDR } 36,000,000$.

3. Savings on Religious Ceremonies:

- Each family saves (estimated) IDR 100,000 per month.
- Total savings per year: $20 \text{ families} * \text{IDR } 100,000 * 12 = \text{IDR } 24,000,000$.

4. Increased Productive Time:

- Each head of the family saves 1.5 hours per day.
- The value of this time: 1.5 hours * IDR 20,000 = IDR 30,000 per day.
- Total productive time savings per month: IDR 30,000 * 30 days = IDR 900,000 per month per family.
- Total savings per year: 20 families * IDR 900,000 * 12 = IDR 216,000,000.

Total Financial Value of All Benefits

Total Financial Value = Direct Benefit + Indirect Benefit

Total Financial Value = IDR 120,000,000 + (IDR 48,000,000 + IDR 36,000,000 + IDR 24,000,000 + IDR 216,000,000)

Total Financial Value = IDR 444,000,000

In order to calculate SROI, formula below was utilized:

$$\text{SROI} = \frac{\text{Total Benefits}}{\text{Project Value}}$$

Where:

- Project Value: Rp 184,187,970.00 (AUD 17,700)
- Total Benefits: Rp 444,000,000

$$\text{SROI} = \frac{\text{Rp } 444,000,000}{\text{Rp } 184,187,970.00} \approx 2.41$$



Conclusion

The project generates a social return of IDR 2.41 for every IDR 1 invested, highlighting its significant impact through reduced water expenses and improved education, economic productivity, and community well-being. This investment proves highly valuable and sustainable. The impact analysis underscores the transformative effect of the clean water facility project in Kedisan Village.

It has not only alleviated economic burdens and improved water access but has also empowered women and enhanced community resilience. Moving forward, sustaining these positive outcomes will require continued investment in infrastructure maintenance, community engagement, and capacity-building initiatives. By doing so, the project can continue to support sustainable development goals and foster lasting improvements in the quality of life for residents of Kedisan Village.



Annexes

Annex 1 - List of Respondents

No.	Beneficiaries Full Name	Number of HHs Member
1	Ni Kadek Swantari	Adult: 2 Children: 1 Elders: -
	I Wayan Riadi	
2	Ni Ketut Warni	Adult: 4 Children: 2 Elders: 1
	I Nyoman Raka	
3	Ni Luh Sriasih	Adult: 2 Children: - Elders: -
	I Wayan Karca	
4	Ni Nengah Parnyi	Adult: - Children: - Elders: 2
	I Wayan Repun	
5	Ni Nengah Sirit	Adult: 3 Children: 1 Elders: -
	I Nyoman Salin	
6	Ni Nyoman Nuradi	Adult: 3 Children: 1 Elders: -
	I Made Mawa	
7	Ni Nyoman Yartini	Adult: 1 Children: 1 Elders: -
	-	
8	Ni Wayan Suarni	Adult: 4 Children: 2 Elders: -
	I Komang Karnya	

Annexes

No.	Beneficiaries Full Name	Number of HHs Member
9	Ni Wayan Kesniasih	Adult: 3 Children: 1 Elders: -
	I Putu Arka	Elders: -
10	Ni Wayan Rasmini	Adult: 3 Children: 2 Elders: -
	I Nengah Yasa	Elders: -
11	Ni Wayan Renya	Adult: 1 Children: - Elders: -
	-	Elders: -
12	Ni Kadek Astiti	Adult: 2 Children: 2 Elders: -
	I Wayan Suka	Elders: -
13	Ni Kupit	Adult: - Children: - Elders: 2
	I Sutar	Elders: 2
14	Ni Wayan Keni	Adult: 3 Children: 2 Elders: -
	I Komang Arta	Elders: -
15	Ni Kadek Nita Apriani	Adult: 2 Children: 2 Elders: -
	I Wayan Arsana	Elders: -
16	Ni Nyoman Magi	Adult: 5 Children: 3 Elders: -
	I Nengah Rajin	Elders: -
17	Ni Luh Nita Ayu	Adult: 5 Children: 3 Elders: -
	I Kadek Binantia	Elders: -

Annexes

No.	Beneficiaries Full Name	Number of HHs Member
18	Ni Wayan Sriopen	Adult: 3 Children: 1 Elders: -
	I Wayan Burat	Elders: -
19	Ni Nyoman Numi	Adult: 5 Children: 3 Elders: -
	I Ketut Pondra	Elders: -
20	Ni Nengah Lina Ratnasari	Adult: 2 Children: 2 Elders: -
	I Komang Wardana	Elders: -

Annex 2 - List of Questions

Baseline

Identification

- Name
- Address
- Age
- Birthday
- Education
- Occupancy
- Number of HH Member

General Questions

1. What type of water does your household use? (Tap water/well/others):
2. Do you have rainwater collection or water storage containers at home? (Yes, there are)
3. Do you have adequate WASH facilities at home? (Yes, fairly ideal)
4. Have you ever experienced problems with the water used at home? (Yes) If yes, proceed directly to the first key question. If no, move to questions about the surroundings. (Have you ever heard of residents or neighbors having difficulty accessing water, etc.)

Annexes

Key Questions

1. What personal experiences have women in Kintamani had due to lack of access to clean water?
2. What types of problems related to lack of access to clean water have you experienced? Could you describe them?
3. Why do you think these problems occur?
4. Have you ever experienced health impacts due to difficulty accessing clean water? If so, what were they? For example, have you ever contracted a specific disease?
5. Have external parties such as the government or NGOs initiated efforts to help access water in Kintamani? If yes, in what form? How were these activities carried out? Were you invited to participate in planning these activities? Were you involved in these activities? What benefits did you perceive from these activities?
6. Since when have women in Kintamani been experiencing life without access to clean water?
7. Since when have you experienced difficulty obtaining clean water? What form did the problem take (poor water quality/limited water supply/both)? According to you, what are the possible causes?
8. How have you been dealing with the problem of difficulty obtaining water or problems related to water?
9. Has the issue of water had an impact on your household? (family finances, causing disputes, disrupting family harmony?)
10. Are there specific times when water flows and it becomes difficult to obtain? For example, only certain months when water flows or is available?
11. What is the water quality like in your home (if water flows)?
12. Based on your experience, when did you feel the most severe impact of this water issue?
13. What barriers do you think prevent women from accessing safe and clean water and sanitation?
14. According to you, what could be obstacles/barriers to accessing clean water? Are there any physical constraints or specific village location factors that particularly affect residents, especially women's access to safe and clean water and sanitation in this area? Or other obstacles?
15. How do you view the position of women in the traditional village? How does this condition then affect access to clean water?

Annexes

16. Have you noticed any difference in access between men and women in obtaining clean water?
17. Where have you been getting your water from so far? and How do you manage the water shortage that has been happening?
18. Are there any government policies that hinder access to clean water? How do these policies obstruct access to clean water availability?
19. How can these be addressed through a feminist lens? (turning personal experiences experienced by women into a social problem)
20. Have you ever told this problem to your family, neighbors, or village forums/other village women?
21. If there are complaints related to clean water, where do you usually report them at the village level? And how does the village help your problem?
22. How do you see the involvement of women that you have seen in solving access to water issues?
23. To what extent have women been actors in meeting the need for clean water in this village or in Kintamani?
24. Are there differences in roles between women and men in meeting access to clean water in your area? How is the division of roles? How effective is it according to you?
25. What policies and programs are needed to promote the economic empowerment of women in the water and sanitation sector?
26. What are your hopes for addressing the issue of clean water access?
27. Have there been previous programs related to access to clean water from the local government? If yes, what were the programs and when? Could you mention them?
28. If 'Yes' (answer to question 'b'), according to you, did the program have long-term or short-term impact?
29. Have the policies or programs implemented considered the needs of mothers as women and also involved mothers in the planning and implementation process? What are some examples from what you have seen?
30. How do you feel about the awareness to involve women in policy making or programs that have been done so far?
31. How can these be designed and implemented in a gender-responsive way?

Annexes

32. According to you, what needs to be improved regarding policies and programs to address the issue of clean water and sanitation in the village that suits the needs of mothers?
33. Have you ever been involved in policy formulation? If yes, at what level of discussion?
34. How can we address the root causes of gender-based violence (GBV) and discrimination in the context of SDG 6 and other related SDGs?
35. Have you or someone around you ever experienced or been a victim of domestic violence, sexual harassment, or received unfair treatment just because you are a woman? How was the handling of these cases? Has the case been resolved?
36. According to you, what are the main factors that cause GBV, sexual harassment, unfair treatment as a woman?
37. According to you, if access to clean and safe water and sanitation is ensured, can cases of GBV, sexual harassment against women be overcome or at least reduced? Are there any specific policies or programs that you have known (from the government or NGOs) or been involved in efforts to address gender-based violence and discrimination in the context of access to clean water and sanitation?
38. According to you, how can the problem of GBV and violence against women be solved according to the needs of women? To what extent has that solution been implemented?
39. Who plays the most significant role in handling cases of violence against women in your view?
40. How do you evaluate the policies that have been implemented in preventing violence against women?
41. In your opinion, what effective policies are there in handling violence against women?
42. To what extent do you feel there is access to ask for help regarding violence against women around you? Is access sufficient?
43. What kind of access is really needed for victims of violence against women?

How can we ensure that women have access to affordable and quality health care, including reproductive health services, in the context of SDG 6 and other related SDGs?

44. Have women in Kintamani had access to good health facilities and services, including reproductive health care?

Annexes

45. What is the ideal service and reproductive health care in the view of the mothers?
46. Have the existing policies been effective enough in developing health and reproductive facilities according to the needs of mothers as women?
47. Are there any socialization activities for the community about women's health or reproductive health from parties such as the government or NGOs? Is it done routinely?
48. Are there socialization activities for the community or specifically for women about the health impacts of poor water quality and sanitation from parties such as the government or NGOs?
49. How do you see the existing policies and programs related to sexual and reproductive health that have been appropriate or not with the needs of mothers? If not, how can it be changed to suit the needs of mothers?
50. Who in your opinion plays the most significant role or determines in developing ideal reproductive health facilities?

Endline

Identification

- Name
- Address
- Age
- Birthday
- Education
- Occupancy
- Number of HH Member

Specific Questions

1. Do you use tap water (PDAM)? If yes, besides the water supplied to your house through the clean water facility program, do you still use PDAM water currently?
2. How long have you been using water from the clean water facility program?
3. After receiving water through the clean water facility program at your home, what do you use the water for? (multiple choices possible)
4. In the water management structure, what position do you hold?
5. Are there other family members involved? If yes, other family members involved are: (multiple choices possible)

Annexes

6. With the formation of a community-based water management group involving you as a beneficiary of the program, what benefits do you think you have gained?
7. Do you regularly attend meetings organized by the group, and what topics are usually discussed?
8. Do you have any suggestions for this community-based water management group?

Water Expenditure Costs

1. How much is the monthly fee paid after receiving water at your home from the clean water facility program?
2. Do you face any challenges in paying this fee every month?
3. Compared to the water expenses before the clean water facility program, how much do you estimate your monthly savings now?
4. From these savings, what are they used or will be used for? (multiple choices possible)

Condition of Water Supplied to Homes

1. Do you use water every day from the clean water facility program?
2. How reliable is the water supplied to your home?
3. Color of the water supplied to your home?
4. Have you encountered any problems with the water supplied to your home?
5. Do you have any suggestions regarding the equipment or other aspects of this clean water facility? (e.g., providing water filters on taps, etc.)

Impacts on Broader Aspects of the Clean Water Facility Program

1. What are the health/sanitation impacts within your family since receiving water at your home? Have there been any changes, and if so, what changes have occurred?
2. Has there been a specific role for women and men in the family in managing the water supplied to your household? (e.g., women managing the volume/amount of water used for household purposes? men regularly checking pipes/meters or addressing damages? etc.)
3. What are the general impacts observed after the implementation of the clean water facility program in your community? (multiple choices possible)

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