

Her Future at Risk

The Cost of Humanitarian Crises on Women and Girls.

Focus. Gender-Transformative WASH Programming in Wartime Ukraine

With people, from the margins to the centre

Table of Contents



Table of Contents

Her Future at Risk.

The Cost of Humanitarian Crises on Women and Girls

Focus. Gender-Transformative WASH Programming in Wartime Ukraine

Written by

Martina Albini, Piero Meda

WeWorld Steering Committee

Anna Crescenti (WASH Global Expert) Ariele Di Mario (Eurasia Communications Focal Point) Camille Ameslon (Head of Regional Unit – EURASIA) Denys Shilko (MEAL Officer Ukraine) Kseniia Kulynynch (Project Supervisor Ukraine) Martina Albini (Research Centre Coordinator) Piero Meda (Country Representative Ukraine) Rachele Ponzellini (Communications Coordinator for Awareness & International Programmes) Stefania Piccinelli (Head of International Programmes)

Graphics and layout Marco Binelli

Cover photograph Hugo Weber/WeWorld

The publication is available to download from www.weworld.it/en/what-we-do/publications

Created by WeWorld www.weworld.it/en

Headquarter in Ukraine Kyiv, Saksahanskoho St. 120, Floor 2, Office 30 04071

Free distribution. The texts in this publication may only be reproduced by acknowledging the source. The publication was completed in July 2025.

We would like to sincerely thank the entire WeWorld team in Ukraine for their enthusiastic support in data collection, analysis, and conducting interviews. Our gratitude extends to our partners – Peaceful Haven of Kharkiv, Angel of Salvation, FemTech Ukraine and One Work Foundation – as well as to cluster leads and NGOs representatives who contributed to the survey. Above all, we are deeply grateful to the women and girls who responded with honesty and courage to the menstrual health questionnaire. We also thank the staff of Vodokanals and health facilities who not only welcomed us but also shared their experiences and ideas on how our interventions can better respond to their needs.

CO-FUNDED BY



Foreword

Preface

Executive Summary

Introduction. The Gendered Impact of Humanita

Why Is Women's Future at Risk?

WASH is a Gender Issue

Study Overview

Methodological Approach

Desk Review: Mapping Structural Patterns

Complementing the Desk Review: Primary

Chapter 1. Gender Integration in Ukraine's Huma A Multi-Stakeholder Analysis

Key Findings WeWorld's Staff Analysis

Chapter 2. Menstrual Health in Crisis: An Overlo

Key Findings

Chapter 3. Post-Monitoring of Hygiene Kit Distri

Key Findings

Conclusions. Towards Gender-Transformative W

What Do We Mean by Gender-Transformative WA

Recommendations

For Humanitarian Actors: Immediate Respo For Donors: Strategic and Financial Suppor For Ukrainian Authorities: Policy and Syste Cross-Cutting Gaps to Address

Bibliography

	2
	4
	5
arian Crises	7
	8
	10
	12
	12
	13
Data Collection	15
anitarian Response:	
	16
	18
	22
ooked Humanitarian Priority	24
	25
ibution by WeWorld	29
	30
VASH	32
SH?	34
	36
onse	36
t	37
m Reform	37
	38

40

1

Foreword

The ongoing, mass-scale invasion of Ukraine has triggered one of the most complex and rapidly evolving humanitarian crises in recent history. In this volatile and high-stakes context, working in the humanitarian sector demands more than the provision of basic services; it calls for a principled, people-centred approach grounded in the dignity, rights, and diverse needs of those affected. At WeWorld, this ethos guides every aspect of our response. Our commitment goes beyond logistics; it means listening closely to the people whose lives have been upended by war, recognizing their specific experiences, and upholding their humanity, even in the harshest of circumstances.

As with many humanitarian emergencies, this crisis has had a disproportionate impact on women, girls, and other marginalized groups. The widespread destruction of critical water, sanitation, and hygiene (WASH) infrastructure has deepened daily hardships for many. However, the burden falls most heavily on women and girls, whose caregiving roles and physiological needs render them especially vulnerable in the absence of safe, accessible, and adequate WASH services. Displaced women are frequently confronted with severe shortages of clean water, menstrual hygiene supplies, and healthcare; conditions that heighten health risks, including those related to maternal and child well-being.

These urgent needs are compounded by a troubling rise in gender-based violence. Many women and girls face heightened threats at checkpoints, shelters, and service delivery points, often in the absence of safe, confidential, and trauma-informed support services. The breakdown of protective systems has laid bare the vulnerabilities already present in society and exacerbated by war.

Yet beneath these immediate and visible harms lie long-standing structural gender inequalities. In Ukraine, women–especially those with disabilities, elderly women, women-headed households and those living in rural or conflict-affected regions—continue to face systemic barriers to employment, mobility, leadership, and participation in decision-making. The war has further entrenched these inequities, underscoring how deeply gender disparities are embedded in both social norms and institutional frameworks.

Despite this reality, many humanitarian interventions, including WASH programmes, remain limited to gender-sensitive or gender-aware approaches. While these efforts recognize gender differences, they often fall short of challenging the root causes of inequality. This is where gender-transformative programming becomes essential. A gender-transformative WASH approach not only responds to the differentiated needs of women and men but actively seeks to shift harmful power dynamics, dismantle discriminatory norms, and promote gender justice. It means centering women's leadership, ensuring meaningful participation in all phases of emergency and recovery planning, and creating systems that foster equitable access to services.

In Ukraine, women have shown remarkable resilience and leadership, from grassroots defense networks to frontline humanitarian action. However, their contributions are too often undervalued or overlooked within formal response structures. Recognizing and building upon this leadership is not only a matter of equity; it is essential to the effectiveness and sustainability of WASH interventions.

This study was developed to critically examine these dynamics and offer concrete pathways for making humanitarian WASH programming in Ukraine more inclusive and gender transformative. Drawing on both a comprehensive review of existing data and new field research, it seeks to illuminate the current challenges and identify urgent gaps in the humanitarian response. It does so with a forward-looking perspective, recognizing that rebuilding WASH systems is not just a technical endeavour, but an opportunity to transform entrenched inequalities.

Recovery efforts must be more than restoring pre-war conditions. They must seek to create more inclusive, equitable, and resilient systems: ones that meet the diverse needs of all people, and that specifically empower women and marginalized groups. **Integrating a gender-transformative lens in WASH recovery not only enhances the quality of services delivered but contributes to broader social change by challenging the status quo and promoting agency and voice.**

It is also crucial that the international community maintains sustained attention to Ukraine amid competing global crises. The situation here reflects a larger pattern: when gender is not deliberately addressed, humanitarian emergencies tend to deepen existing inequalities. Conversely, when responses are intersectional, inclusive, and gender-transformative, they have the power to promote justice, resilience, and long-term recovery.

At WeWorld, we believe that providing essential services with respect for dignity and individual choice is a vital foundation but not the end goal. **True support for affected communities means actively working to change the social and power** **structures that perpetuate inequality.** This requires intentional strategies, ongoing reflection, and strong partnerships with local actors, especially women-led and feminist organizations.

This study represents a step in that direction. It offers evidence-based recommendations to support the design and implementation of WASH interventions in Ukraine that are not only responsive but transformative. By placing gender equity at the heart of humanitarian programming, we hope to strengthen both immediate response efforts and longer-term reconstruction. **Our goal is clear: to contribute to a future where recovery is not just about rebuilding systems, but about reimagining them to be just, inclusive, and truly resilient.**

Piero Meda Country Representative for WeWorld in Ukraine



When gender is not deliberately addressed, humanitarian emergencies tend to deepen existing inequalities. Conversely, when responses are intersectional, inclusive, and gender-transformative, they have the power to promote justice, resilience, and long-term recovery.

Preface

In humanitarian settings, essential services such as water, sanitation and hygiene (WASH) are not neutral. They reflect and reinforce the systems in which they are embedded, including the unequal power dynamics that shape access, use, and outcomes. For women and girls, the absence of safe, dignified, and inclusive WASH services in crisis settings can deepen pre-existing inequalities and multiply protection risks.

At the Italian Agency for Development Cooperation (AICS), we are committed to ensuring that humanitarian interventions do not reproduce these patterns, but challenge them. Our Guidelines on Gender Equality and Women Empowerment (2020-2024), including a specific focus on humanitarian aid and fragile contexts, emphasize the centrality of the women-voice approach, to implement gender-transformative programmes in all sectors - including WASH. We view WASH not only as a delivery of infrastructure, but as a strategic opportunity to promote dignity, participation, and protection.

This report by WeWorld, developed with the support of the Italian Cooperation and in close coordination with AICS, responds to a critical gap: the lack of gender-disaggregated evidence in WASH programming in Ukraine. It offers grounded, data-driven insights from a volatile context, showing how inclusive design and cross-sectoral coordination can reduce risk and support resilience. Whether through GBV-sensitive infrastructure, referrals that link hygiene to protection services, or locally-informed kit design, the analysis presented here stresses the key role of women in supporting quality WASH facilities, safely accessible for all.

Though based in eastern Ukraine, the implications reach well beyond. The activities examined are part of a broader project led by WeWorld, one of 26 interventions supported through the Italian Cooperation's Emergency Initiative in Ukraine. Together, these initiatives represent our effort to mainstream gender equality across different sectors, recognizing the positive role that women can have for community development. This report is not just a snapshot of fieldwork - it is an institutional tool. One that informs future action and reinforces our strategic commitment: that all humanitarian responses begin with those generally most marginalized and at risk - such as women and girls - and be shaped by the knowledge they bring as agents of change.

Marta Collu

Coordinator of the Humanitarian Aid and Fragility Unit and Gender Equality Focal Point. Office of the Deputy Technical Director, AICS (Italian Agency for Development Cooperation)

In Ukraine, war has not only disrupted access to essential services, it has reshaped the very structure of vulnerability. In the WASH sector, systemic failures such as damaged infrastructure, overcrowded shelters, and lack of privacy translate into daily risks for women and girls.

The case study presented here offers a field-based perspective on how WASH can serve as an entry point for deeper structural transformation. In Kharkiv and Donetsk oblasts, interventions were tailored to meet the specific needs of displaced and conflict-affected women and girls. Inclusive kit design, GBV-sensitive infrastructure, and community-linked referral mechanisms emerged not as optional components, but as integral elements of protection-oriented programming.

Beyond its practical findings, this report offers a methodological contribution: it draws on field data and lived experience to demonstrate what it means to design interventions that are informed, responsive, and locally owned. It also underscores the imperative for flexibility in times of crisis - to adapt, to listen, and to centre those who face the greatest risks.

At AICS Kyiv, this approach defines our work. In close collaboration with civil society organisations, and local authorities, we translate gender-transformative principles into everyday operational choices. We work alongside local actors to ensure that responses are coherent, inclusive, and designed to strengthen - not supplant - community systems. And we advocate for programming that transcends sectors, in favour of solutions that are holistic, context-sensitive, and enduring.

In humanitarian response, integrating a gender lens is not optional, it is essential for relevance and effectiveness. When approached this way, WASH becomes more than a lifesaving intervention: it becomes a tool for risk reduction, the restoration of agency, and the foundation for a more equitable recovery.

> **Barbara Taccone** Communication & Gender Officer, AICS Kyiv





In conflict-affected Ukraine, women and girls face serious risks to their safety, health, and dignity due to inadequate WASH infrastructure. Many facilities lack gender-segregated, lockable toilets and adequate lighting, increasing vulnerability to sexual violence. Access to essential hygiene and dignity itemsincluding menstrual products and personal care supplies-has declined, with vulnerable households, especially those

headed by women, struggling to meet basic needs. Women have stressed the importance of inclusive hygiene support for entire households, yet gaps remain: kits often exclude older women, adolescent girls, and people with disabilities. The lack of water heaters in collective centres further compounds hygiene challenges for women managing menstruation and caregiving duties. Despite these persistent needs, the April 2025

reprioritization of the Humanitarian Needs Response Plan significantly reduced WASH and GBV programming, with activities in lower-severity areas deprioritized. Life-saving interventions were preserved, but broader recovery efforts remain under-resourced-highlighting the urgent need for sustained, gender-responsive support.

Study Aim

This study analyzes the gendered dimensions of WASH access in conflict-affected regions of Ukraine, focusing on the distinct challenges faced by women, girls, and marginalized groups in obtaining safe, inclusive, and dignified WASH products and services. It forms part of Her Future at Risk: The Cost of Humanitarian Crises on Women and Girls, a report published by WeWorld in March 2025. Through a combination of desk research and field data collection, the study explores how the ongoing conflict has intensified preexisting gender inequalities and created new vulnerabilities within the WASH response.

The study's four primary objectives are to:

- 1. Identify and document specific barriers women and girls face in accessing WASH services, including risks related to safety, privacy, and dignity.
- 2. Assess critical gaps in humanitarian WASH programming, particularly regarding menstrual health and hygiene management (MHHM), inclusive governance, and responsiveness to diverse needs.
- 3. Examine how the conflict is reshaping gender roles, decision-making power, and access to basic services at household and community levels.
- 4. Provide actionable, gender-transformative recommendations to strengthen humanitarian response and recovery strategies.

By integrating existing gender analyses, new field data, and stakeholder consultations, this report intends to offer a comprehensive overview of challenges and opportunities for advancing gender-transformative WASH programming. Despite limitations, its insights aim to inform both humanitarian operations and future recovery efforts to ensure WASH systems are functional, equitable, and just.

Key Findings: Barriers to Inclusive WASH Response in Ukraine

- Insufficient safe, gender-segregated WASH facilities and menstrual hygiene support, especially in displacement settings.
- Poor water access causing health, psychological, and sexual/reproductive health impacts, disproportionately affecting marginalized groups.
- Women's participation in WASH decision-making remains largely symbolic; local women's organizations are often excluded from funding and coordination.
- Gender policies are superficially applied, with weak monitoring and inadequate health facility infrastructure.
- Humanitarian responses frequently overlook and sexual and reproductive health needs (SRH), and eclude marginalized voices, perpetuating inequalities.
- Women's unpaid labour fills systemic service gaps, but their expertise and leadership remain underutilized, risking a continuation of pre-conflict disparities.

Conclusions and Recommendations. Towards Gender-Transformative WASH

The report concludes with targeted recommendations for donors, humanitarian partners, policymakers, and service providers. **Central to these is the urgent need to adopt gender-transformative approaches to WASH programming.** The recommendations call for all WASH facilities to be designed and maintained with dignity, safety, and accessibility in mind, including regular safety audits and active engagement of affected communities.

Women-led local organizations should be recognized as equal partners in WASH leadership and supported through sustained, flexible funding and inclusive

decision-making processes. Stronger integration between WASH, GBV, and SRH sectors is essential, with joint planning, staff training, and user-centred infrastructure that respects privacy and autonomy. WASH services must be informed by intersectional gender and power analyses and continuously adapted through accessible community feedback mechanisms. Donors are urged to sustain integrated funding across sectors, avoid rigid silos, and enable adaptive, locally led responses. Funding frameworks should require gender and inclusion indicators while expanding access for local and women-led organizations. Investments should support women's participation in the WASH economy through enterprise development, technical training, and inclusive innovation. Ukrainian authorities must institutionalize inclusive design standards in all reconstruction efforts, ensuring national guidelines promote safety, access, and gender equity.

Gender-transformative WASH must be embedded across national recovery and gender equality strategies.

Gender-transformative WASH must be embedded across national recovery and gender equality strategies, supported by inter-ministerial coordination and measurable outcomes. Finally, cross-cutting priorities include shifting leadership to local actors, strengthening accountability and transparency, leveraging digital tools for inclusion, and engaging men and boys as active allies in promoting gender-transformative WASH systems. This approach is also critical in light of future reconstruction and recovery processes, where inclusive, resilient systems will be foundational to longterm sustainability and equity.

INTRODUCTION. The Gendered Impact of Humanitarian Crises



Why Is Women's Future at Risk?





This study aims to analyze the gendered dimensions of WASH response in conflict-affected regions of Ukraine, with a particular focus on the distinct challenges faced by women, girls, and other marginalized groups in securing safe, inclusive, and dignified services.

As such, it is part of the *Her Future at Risk*: *The Cost of Humanitarian Crises on Women and Girls*¹ series, a report published by WeWorld in March 2025, which examines how crises exacerbate gender and generational disparities—particularly in fragile and protracted emergencies.

Her Future at Risk builds upon data from the ChildFund Alliance World Index 2024², focusing on eight countries where WeWorld operates, including Ukraine, and underscores the critical need to empower women and girls in crisis response and recovery efforts.

Informed by firsthand testimonies, this study emerges from the foundational work of *Her Future at Risk* and advocates for a **gender-transformative approach**, **one that prioritizes women's voices and leadership in humanitarian action.**

By situating Ukraine's WASH challenges within this broader framework, the analysis highlights systemic barriers while proposing actionable pathways for gender-transformative interventions. By bridging empirical evidence with policy-oriented solutions, this study aims to contribute to the broader discourse on equitable WASH response in conflict settings while advocating for systemic, gender-transformative reforms.

Humanitarian crises disproportionately affect the most vulnerable populations, with pre-existing inequalities-shaped by gender, age, and socioeconomic status-intensifying under the strain of conflict and displacement. Women and girls, in particular, face compounded risks, including heightened exposure to gender-based violence, sexual exploitation, forced and child marriage, food insecurity, and restricted access to protection mechanisms (ICRC, 2019; UNFPA, 2024). These challenges are not only immediate but also intergenerational: the erosion of caregivers' well-being perpetuates cycles of poverty and trauma, further limiting access to essential services such as water, sanitation, healthcare, and education (UN Women, 2023).

The mass-scale invasion in Ukraine, since February 2022, has magnified these disparities and risks of gender-based violence for women and girls, both in public and private spheres.

Intimate partner violence remains the most reported form of GBV, driven by compounding stressors such as displacement, economic insecurity, collective living conditions, and the psychological toll of militarization—including among servicemen and veterans. Power cuts, lack of public lighting, shared sanitation facilities, and unsafe transport options further heighten feelings of insecurity and vulnerability to sexual violence in daily life. Reports from across regions reveal a rise in various forms of GBV, including sexual exploitation and abuse traf-

WHAT DEFINES A GENDER-TRANSFORMATIVE APPROACH?

To fully comprehend the impacts of humanitarian crises on women and girls and to adopt effective and long-lasting solutions, **it is essential to operate within the gender equality continuum.**

This framework progresses from a gender-unequal approach, which perpetuates existing inequalities through various stages of increasing inclusivity and equity, ultimately reaching the transformative level of gender-transformative approaches.

This continuum not only addresses the immediate needs of women and girls in emergency contexts but also seeks to confront and reform the entrenched power imbalances that exacerbate their vulnerabilities.

By doing so, it provides a comprehensive strategy that not only alleviates the symptoms of inequality but also targets its root causes, paving the way for enduring systemic change. The ultimate goal is to modify these systemic power imbalances, which are often magnified in crisis situations.

Addressing the root causes of inequality and discrimination enables the identification of more suitable, sustainable actions and strategies. Such an approach fosters transformative change that benefits society as a whole, creating solutions that are designed, implemented, and embraced by the community itself.

This continuum not only addresses the immediate needs of women and girls in emergency contexts but also seeks to confront and reform the entrenched power imbalances that exacerbate their vulnerabilities.

FIGURE 1. Gender Equality Continuum

Source: WeWorld Elaboration on UNFPA, UNICEF and UN Women (2020)



For an approach to be truly transformative, it must incorporate the following elements³:

 COMPREHENSIVE GENDER ANALYSIS: This involves identifying and understanding the societal norms and power imbalances that disadvantage women and girls, with a focus on the discrimination they face from early childhood. Such analysis lays the groundwork for effective interventions that address both the symptoms and root causes of gender inequality.

2 The report is available at this link https://www.weworld.it/ en/what-we-do/publications/childfund-alliance-world-indexon-the-rights-of-women-and-children

ficking, conflict-related sexual violence, and technology-facilitated abuse-particularly affecting adolescent girls, older women, and marginalized groups such as Roma and LGBTQIA+ individuals. Survivors face steep, intersecting barriers to seeking support: fear of retaliation, harmful gender norms, limited availability of confidential services, financial constraints, and concerns over child custody or the conscription of male perpetrators. Access to humanitarian aid is similarly compromised by poor infrastructure, stigma, gendered caregiving burdens, and risks of exploitation and corruption during distribution. With the erosion of coping capacities and shrinking humanitarian assistance, women and girls are increasingly left without safe avenues for protection or recovery (UNFPA, 2024).

GENDER RESPONSIVE: GENDER TRANSFORMATIVE: addresses the causes of gender-based inequalities and works to transform harmful gender roles, norms and power relations Monthe House date Transform

• **ENGAGING MEN AND BOYS:** Actively involving men and boys, particularly young men, as agents of change is critical. By fostering awareness and encouraging them to challenge harmful norms, they can play a pivotal role in creating a more equitable society.

 BUILDING PARTNERSHIPS: Collaboration with women and feminist organizations, local actors, community groups and civil society is key to ensuring that solutions are contextually relevant and driven by those who are most affected by these inequalities.

¹ The report is available at this link https://www.weworld.it/ en/what-we-do/publications/her-future-at-risk

WEWORLD IN UKRAINE

WeWorld has been actively engaged in Ukraine since the beginning of the full-scale invasion, launching its emergency response in March 2022 with the support of the ChildFund Alliance. Initial operations focused on aiding civilians fleeing conflict in the eastern regions, providing critical life-saving assistance such as food, clean water, and essential household items. By quickly mobilizing local partners, WeWorld established a permanent presence in Ukraine, enabling both emergency relief and early recovery programming, with a strong emphasis on supporting women and children.

Today, WeWorld operates from offices in Kyiv and Kharkiv, with field outposts in Kherson and Donetsk. The organization works closely with communities who have remained in conflict-affected areas, as well as with those returning to previously occupied zones. Guided by a localization approach, WeWorld partners with local NGOs and civil society organizations to ensure that aid delivery is context-sensitive, community-driven, and sustainable. In neighboring Moldova, WeWorld also provides shelter and essential support to Ukrainian refugees.

In response to the ongoing crisis, WeWorld prioritizes interventions in the WASH (Water, Sanitation, and Hygiene), Shelter, Protection, and Education sectors. Collaborating with national partners, the organization delivers timely, inclusive support across these areas. Its integrated emergency and recovery efforts include the distribution of hygiene kits — with special attention to the needs of women, girls, the elderly, and other marginalized groups— and the rehabilitation of WASH infrastructure, particularly in healthcare settings. These activities align with Infection Prevention and Control (IPC) standards and employ the WASH FIT (Water and Sanitation for Health Facility Improvement Tool) framework.



To strengthen local infrastructure, WeWorld has also equipped public utility providers (*Vodokanals*) with essential machinery and tools to restore water, sanitation, and wastewater systems in frontline areas. These efforts not only save lives but also ensure that WASH services are accessible, safe, inclusive, and respectful of the dignity and diverse needs of affected communities.

At the intersection of the Health and WASH sectors, We-World contributes to the recovery and rehabilitation of vital medical infrastructure. This includes the repair – and where necessary, full reconstruction – of healthcare facilities, with a focus on restoring water and sanitation systems to meet the highest standards. These improvements are critical to maintaining access to quality healthcare during both emergency and post-emergency phases, especially for the most vulnerable.

All these activities are part of the RISE UP – Response for Integrated Support to Eastern Ukraine Population project (2024– 2025), funded by the Italian Agency for Development Cooperation (AICS), Kyiv office. The project aims to improve living conditions for refugees, internally displaced persons (IDPs), and returnees in Kharkiv and Donetsk oblasts by expanding access to integrated, life-saving services. Special attention is given to women, persons with disabilities, children, and the elderly, ensuring that humanitarian assistance remains multisectoral, safe, dignified, and inclusive for all affected populations.

WASH is a Gender Issue

Access to water, sanitation, and hygiene is never gender-neutral; it is shaped by unequal power dynamics, social roles, and entrenched expectations that differ for women, men, girls, and boys and other individuals. Across most societies, gender norms place primary responsibility for tasks such as water collection, household sanitation, and caregiving on women and girls (see WeWorld (2024), Flowing Futures). These roles situate them at the heart of daily WASH needs while making them disproportionately vulnerable when systems break down. For women and girls, inadequate WASH services are not merely a logistical challenge; they can trigger cascading impacts on safety, health, mobility, and social inclusion. Needs such as menstrual health and hygiene

management (MHHM), access to privacy, and freedom from violence are frequently overlooked in the design and implementation of WASH infrastructure and programming (WHO, 2022; WaterAid, 2023).

In Ukraine, this gendered crisis has been exacerbated by the ongoing invasion, which has severely damaged critical water infrastructure—reservoirs, pipelines, and treatment plants have been repeatedly shelled or disrupted. Millions of people, especially in frontline areas, have been left without reliable access to safe drinking water, creating urgent health and environmental hazards. The collapse of water and sanitation systems deepens existing inequalities, particularly for women and girls who bear the brunt of caregiving and domestic responsibilities under increasingly precarious conditions.

About one-fifth of households in Ukraine face constrained access to safe water, with over half of these issues directly linked to the war.

About one-fifth of households in Ukraine face constrained access to safe water, with over half of these issues directly linked to the war. Water access is especially fragile near front-line areas due to frequent service interruptions and repair challenges caused by ongoing shelling and security risks. Even regions far from the front-line experience water disruptions, often related to power outages from hostilities. In July 2024, nearly 19% of towns and villages were in severe need of water, with Donetska Oblast particularly affected. Many frontline communities rely heavily on trucked water, while financial constraints limit household water treatment and awareness of water safety risks remains low (HNRP 2025).

Beyond water, over 10% of households reported deteriorating access to hygiene services due to increased costs or reduced availability, disproportionately impacting internally displaced people, pensioners, low-income families, and frontline residents. Transit centres and collective sites frequently lack safe, accessible WASH facilities, often excluding people with disabilities and older individuals. Health facilities along the frontline struggle with sanitation safety, medical waste management, cleaning supplies, and water contingency plans. Safe water availability is also a key factor influencing school reopenings in affected regions (ibid.).

Women and girls, especially those living in collective centres or rural areas, continue to face acute safety, dignity, and health risks linked to deteriorating WASH infrastructure. Many facilities lack gender-segregated, lockable toilets and bathing areas with adequate lighting, significantly increasing the risk of sexual violence and amplifying a pervasive sense of insecurity. The availability of dignity and hygiene items-including menstrual products, household cleaning supplies, baby and adult diapers, and personal hygiene materials-has declined, despite ongoing and urgent needs voiced by affected communities. Vulnerable households, especially those headed by women, often struggle to afford basic hygiene goods, pushing some toward harmful coping strategies such as transactional sex or exploitation (UN-FPA, 2024).

Women have also emphasized the need for hygiene distributions that support all household members, particularly older women, people with disabilities, and men and boys, alongside dignity kits. Yet significant gaps persist as distributions often exclude older women and adolescent girls, while many kits fail to meet the specific needs of women and girls with disabilities. In some cases, hygiene kits for households or for men have included only "feminine" items, generating confusion or resentment within communities. The lack of water heaters in certain collective sites further exacerbates risks, especially for women managing menstruation, infant care, and other caregiving duties, raising additional concerns about health. hvgiene, and psychological distress related to MHHM and broader sexual and reproductive health needs (ibid.).

These disparities are not incidental: they are structural. With many men conscripted, gender roles have shifted, but structural power imbalances persist. Women are managing more, with less: less voice, less support, and fewer resources. These inequalities are reinforced by the persistent failure to recognize and prioritize women's specific needs-such as those related to menstrual health-often due to enduring taboos and stigmas. Without transformative change, recovery and reconstruction risk reinforcing these inequalities. The rebuilding of WASH systems will be among the earliest and most visible elements of Ukraine's recovery, making it a strategic opportunity to challenge entrenched gender norms, redistribute power, and invest in inclusive, resilient systems.

> Addressing these challenges requires more than gender-sensitive adjustments; it demands a gender-transformative approach that actively dismantles structural inequalities and centres the lived experiences of women and girls.

Addressing these challenges requires more than gender-sensitive adjustments; it demands a gender-transformative approach that actively dismantles structural inequalities and centres the lived experiences of women and girls. WASH must not be seen solely as a technical domain. It is a frontline arena where gendered power relations are visible, contested, and critically changeable. A truly transformative WASH response in Ukraine is not only necessary for equitable recovery but is also a pathway toward long-term social justice and systemic resilience (World Bank, 2023; UN Women, 2024).

Study Overview

This study aims to analyze the gendered dimensions of WASH response in conflict-affected regions of Ukraine, with a particular focus on the distinct challenges faced by women, girls, and other marginalized groups in accessing safe, inclusive, and dignified services.

Through a combination of desk research and field-based data collection, the study explores how the ongoing massscale invasion has both intensified preexisting gender inequalities and created new vulnerabilities within the WASH sector and humanitarian response.

The study has four primary objectives:

- **1.** Identify and document the specific barriers women and girls face in accessing WASH services, including risks related to safety, privacy, and dignity.
- 2. Assess critical gaps in current humanitarian WASH programming-especially around menstrual health and hygiene management (MHHM), inclusive governance, and responsiveness to diverse needs.
- 3. Examine how the conflict context is reshaping gender roles, decision-making power, and access to basic services at household and community levels.
- 4. Generate actionable, gender-transformative recommendations to strengthen both humanitarian response and forward-looking recovery strategies.

Building on empirical evidence and existing literature, the report proposes targeted recommendations aligned with the strategic priorities of the Italian Agency for Development Cooperation (AICS) and the EU Gender Action Plan III (GAP III). These include:

- Tailored WASH interventions that address the specific needs of diverse groups of women and girls;
- Improved integration of MHHM in both emergency and recovery phases;
- Inclusive governance frameworks that elevate women's participation and leadership in WASH decision-making;
- Strengthened capacity-strengthening for frontline practitioners to embed gender equity and GBV risk mitigation into WASH responses.

In doing so, the study aims to contribute to ongoing efforts to make WASH programming not only more inclusive and responsive but truly transformative in challenging and reshaping the structural inequalities that shape access to essential services in wartime and beyond.

METHODOLOGICAL APPROACH

Understanding gender dynamics in humanitarian contexts requires more than isolated metrics: it demands a lens attuned to power, structure, and context.

The study draws on a desk review, field observations, key informant interviews. and focus group discussions. While data collection was inevitably limited by ongoing insecurity and gaps in more representative disaggregation, the findings nonetheless provide a strong foundation for designing evidence-based, equity-oriented WASH interventions. The results of the desk review, presented in this chapter, informed the design and focus of the subsequent quantitative and qualitative investigations, which are detailed in the following chapters. Grounded in

feminist political ecology⁴ (Rocheleau, 1996; Sultana, 2021), the methodology seeks to move beyond surface-level inclusion metrics and toward a critical interrogation of structural inequality. The study also draws on the Italian Agency for Development Cooperation (AICS) Gender Guidelines and Toolkit, which advocate for a rights-based, intersectoral approach to humanitarian action. This perspective highlights the importance of embedding gender considerations not only to meet immediate protection needs -but also to promote women's empowerment and leadership in recovery and resilience-building.

Through the integration of existing gender analyses, new field data, and stakeholder consultations, this report provides a comprehensive overview of both challenges and opportunities in advancing gender-transformative WASH programming. Despite unavoidable limitations, the study's insights are intended to inform both humanitarian operations and future reconstruction and recovery efforts, ensuring that WASH systems are not only functional but also just.

Ultimately, this research affirms a central principle: gender-transformative WASH programming is not a complementary feature of recovery; it is a foundational pillar. By shifting power, addressing inequality, and centering the lived experiences of women and

_ _ _ _ _ _ _ _ _ _ _

4 Feminist Political Ecology (FPE) is an interdisciplinary frame work that explores how gender, power, and inequality shape people's relationships with the environment, natural resources and infrastructure. Rooted in feminist theory and political ecology, FPE emphasizes that access to and control over resource es—such as water, land, or sanitation—is not neutral or equally distributed, but is structured by intersecting systems of powe including gender, race, class, ability, and geography. FPE fore grounds the lived experiences, labour, and knowledge of womer and other marginalized groups, challenging technocratic or apo litical approaches to environmental and resource governance. calls attention to how social norms, institutional practices, and political economies reinforce exclusion and vulnerability, espe cially in times of crisis or conflict. In this context, applying FPE allows for a deeper analysis of WASH systems as arenas of both material struggle and symbolic power–where decisions about infrastructure, access, and participation reflect broader societa hierarchies. It pushes us to ask not just who benefits, but why, and at whose expense

girls, WASH systems can become catalysts for both public health and longterm social transformation in Ukraine.

Ethics and Safeguarding

This study adheres to the highest ethical standards in research, prioritizing the safety, dignity, and rights of all participants, particularly women, girls, and other vulnerable groups. Informed consent was obtained from all participants, with special attention given to language accessibility, cultural sensitivity, and the potential risks of discussing sensitive topics such as gender-based violence and WASH-related vulnerabilities. Data collection protocols followed the Core Humanitarian Standard (CHS) and Sphere Handbook guidelines, ensuring confidentiality, anonymity, and secure data storage. A do-no-harm approach was rigorously applied. The study also integrated safeguarding measures to prevent unintended harm (such as reinforcing gender stereotypes or exposing participants to retaliation) by employing trauma-informed methods. By embedding feminist and intersectional ethics throughout the process, the study not only protects participants but also amplifies their voices in shaping equitable WASH solutions.

DESK REVIEW: MAPPING **STRUCTURAL** PATTERNS

The desk review comprehensively analyzed existing studies, policy frameworks, and technical reports to understand gender dynamics in Ukraine's humanitarian and WASH sectors, situating these findings within the broader context of the ongoing conflict and its devastating impacts on water, sanitation, and hygiene infrastructure. Collectively, these documents offer a layered view of gendered vulnerabilities and institutional responses across Ukraine's humanitarian and WASH ecosystems5.

Central to the desk review is the recognition that the war in Ukraine has inflicted widespread destruction on critical WASH infrastructure, precipitating a severe humanitarian crisis with pronounced gendered consequences. Reports document the deliberate targeting of civilian water facilities by Russian forces as a military tactic, such as the complete shutdown of Mariupol's water supply, an action that violates international humanitarian law and established norms like the Geneva List of Principles on the Protection of Water Infrastructure (Harada et al., 2022). These attacks have left millions without reliable access to clean water and sanitation, with an estimated 8.5 million people requiring WASH assistance as of January 2025 (HNRP Ukraine, 2025). Repeated assaults on water supply systems have hindered repair efforts and deepened the humanitarian emergency (Shumilova et al., 2023; Kravchenko et al., 2024). In April 2025, the Humanitarian Needs and Response Plan was reprioritized in light of the deteriorating funding situation and evolving needs, reducing the number of people targeted for assistance by 10% (3.8 million). In response, the WASH Cluster applied an intersectoral severity lens to further concentrate efforts on frontline areas and integrated life-saving interventions. While recovery activities in lower-severity rayons were scaled back and solid waste management was deprioritized, all critical humanitarian WASH activities were maintained.

These include emergency repairs and provision of backup power to water and heating utilities, bottled water trucking, hygiene kit distribution, and the deploy-

diate impacts of conflict, it risks obscuring longer-term patterns of marginalization. Furthermore, the review revealed a pronounced urban and cisgender bias—rural women, LGBTQIA+ in-dividuals, and those with disabilities are either underrepresented or entirely absent from the data. This points to a deeper epis temic gap: who is seen, who is heard, and who is systematically erased in humanitarian data collection and programme design

ment of water treatment units with safe sanitation in hospitals, collective centres, and schools-particularly in areas heavily affected by airstrikes and ongoing hostilities.

Women and girls bear a disproportionate share of the burden in this crisis. The destruction of WASH services exacerbates existing gender inequalities. Displaced women and children face compounded vulnerabilities amid infrastructure collapse, ongoing attacks, and limited access to essential services such as food, healthcare, and hygiene products (Tucker et al., 2024; Wolfe et al., 2025). A survey by Positive Women found that 83% of displaced women reported unmet needs for basics including hygiene supplies, and nearly half experienced restricted healthcare access, highlighting critical service gaps (Wolfe et al., 2025).

The humanitarian crisis extends beyond infrastructure loss to public health risks including overcrowding, food insecurity, and elevated exposure to gender-based violence. GBV prevalence has risen significantly since the onset of armed conflict-tripling among displaced women compared to residents-with about 20% reporting violence from armed actors at checkpoints and social institutions (Capasso et al., 2021, 2022; Zimba et al., 2023). In January 2025, 2.4 million people were identified as in need of GBV-related assistance. However, following the reprioritization of the Humanitarian Needs and Response Plan in April 2025, the target population was reduced by 36%, with interventions now focusing on 0.5 million people. This strategic shift was guided by an assessment of need severity, aiming to concentrate resources on those most at risk. Activities under Strategic Objective 1-addressing the most critical GBV risks—were largely preserved with minimal reductions. In contrast, Strategic Objective 2 interventions were narrowed to focus on evacuation and displacement contexts. Programming in lower-severity rayons was

⁵ While the temporal focus (2022-2025) captures the imme

deprioritized to ensure greater impact in frontline areas and among the most vulnerable populations. **Healthcare systems are strained and dangerous to access, with WHO estimating that 15% of refugee women may require emergency obstetric care, and studies from Polish hospitals confirming high maternal and neonatal morbidity among refugees** (Varyvoda et al., 2022; Lewtak et al., 2022; Zimba et al., 2023). Women living with HIV face disrupted treatment due to displacement and healthcare breakdowns (Karagodina et al., 2023; Owczarzak et al., 2024).

In January 2025, 2.4 million people were identified as in need of GBV-related assistance.

In this context, multiple reports converge in underscoring persistent and systemic gender inequalities across humanitarian response and WASH programming. The Rapid Gender Analysis - Ukraine 2024 (CARE International) documents ongoing obstacles including limited access to health and social services (reported by 68% of women respondents), heightened risk of gender-based violence, and economic instability undermining women's livelihoods-nearly 60% of women surveyed had lost or reduced income since the escalation of hostilities. The report calls for integrated, gender-responsive interventions promoting women's leadership and participation in recovery.

UNICEF's Technical Paper: Towards Gender Transformative WASH-BAT (2024) advocates moving beyond gender-sensitive to gender-transformative programming. It notes that **only 28% of WASH interventions globally had specific gender indicators** and stresses the need to address underlying power dynamics and empower marginalized groups to ensure equitable access to WASH resources.

The Gender Analysis of Regional Development in Ukraine (2022) (UN Women & Poruch) reveals structural barriers that limit women's employment, mobility, and decision-making, especially in rural and conflict-affected areas: in rural oblasts, women represent less than 30% of local council members, and earn on average 20% less than men, pointing to entrenched gender inequalities. The report recommends targeted gender-responsive development policies to foster inclusive recovery.

A 2023 BBC reportage on gender roles during the war emphasizes women's expanding participation in humanitarian efforts—**with nearly half of local volunteer networks led by women**—but warns against persistent patriarchal narratives and media portrayals that risk reinforcing stereotypes. It recommends balanced representation and effective communication channels to amplify women's contributions across all sectors.

Finally, the 2025 study Gender Dimension of the Energy Crisis in Ukraine: Pathways to Resilience identifies the disproportionate impact of energy shortages on women's unpaid care work and financial strain: **73% of women reported increased time spent managing household energy needs**, and **42% reported sacrificing other basic needs (like food or health expenses) to pay for heating or electricity**. The report calls for gender-responsive resilience strategies to prevent the deepening of inequalities.

Despite these challenges, Ukrainian women demonstrate remarkable resilience and leadership. Grassroots initiatives have mobilized women nationwide to contribute to defence and humanitarian efforts through community-driven solutions (Boichak, 2022). A recent study of humanitarian organizations found women comprise the majority of frontline workers, delivering services across conflict-affected and occupied territories (Lazarus et al., 2024). These initiatives reflect how women have shifted from passive survivors to active agents of change, addressing urgent WASH needs while fostering social cohesion and community resilience.

> A recent study of humanitarian organizations found women comprise the majority of frontline workers, delivering services across conflict-affected and occupied territories.

Taken together, this body of literature reveals persistent gaps in women's inclusion, participation, and leadership in humanitarian and WASH programming, underscoring the urgent need for intersectional, gender-transformative approaches that address structural inequalities rather than merely representing women.

TAKEAWAYS FROM THE DESK REVIEW

→ SEVERE GENDERED IMPACT OF WASH INFRASTRUCTURE DESTRUCTION:

The war's targeting and destruction of water and sanitation systems disproportionately affect women and girls, who bear primary responsibility for household hygiene, intensifying their caregiving burdens and vulnerabilities.

→ CRITICAL GAPS IN SERVICE ACCESS FOR WOMEN AND DISPLACED POPULATIONS:

Displaced women face acute shortages of essential services—including clean water, hygiene products, healthcare, and food—exacerbated by ongoing conflict and damaged infrastructure, with significant barriers to healthcare access and increased risks of maternal and child morbidity.

→ ESCALATING RISKS OF GENDER-BASED VIOLENCE:

The conflict has substantially increased GBV prevalence, particularly among displaced women, with frequent violence occurring at checkpoints and social service sites; this is compounded by inadequate access to confidential and trauma-informed care.

→ PERSISTENT STRUCTURAL INEQUALITIES:

Systemic barriers limit women's employment, mobility, leadership, and decision-making opportunities, especially in rural and conflict-affected areas, highlighting the need for targeted, inclusive development and recovery policies.

COMPLEMENTING THE DESK REVIEW: PRIMARY DATA COLLECTION

To complement the documented evidence from the desk review, this study also conducted primary data collection using a mixed-methods approach. Quantitative surveys and qualitative interviews were carried out with individuals from diverse backgrounds affected by WASH challenges, as well as with key stakeholders, including recipients of We-World's projects, Cluster coordinators, international and national WASH actors, service providers, and WeWorld's humanitarian staff operating in Ukraine.

The data collection focused on three key areas: (1) humanitarian coordination and governance, including service delivery challenges and stakeholder engagement; (2) Menstrual Health and Hygiene Management (MHHM), with a dedicated survey targeting women and girls; and (3) a post-distribution monitoring exercise evaluating the effectiveness, relevance, and inclusiveness of hygiene kits distributed by WeWorld. These thematic areas were selected to reflect both urgent response

→ SHORTCOMINGS OF GENDER-SENSITIVE PROGRAMMING:

Existing humanitarian and WASH initiatives often fail to move beyond gender sensitivity toward transformative approaches that address power imbalances and empower marginalized groups for equitable service access.

→ UNDERREPRESENTATION AND STEREOTYPING OF WOMEN IN MEDIA AND HUMANITARIAN ROLES:

Despite growing leadership by women in humanitarian responses, persistent patriarchal narratives and media portrayals undermine their visibility and contributions, necessitating stronger communication and representation strategies.

→ RESILIENCE AND LEADERSHIP OF WOMEN:

Women have played crucial roles in grassroots defense and humanitarian initiatives, demonstrating agency and innovation by leveraging local knowledge and networks to build community resilience amid the crisis.

→ NEED FOR INTERSECTIONAL AND GENDER-TRANSFORMATIVE APPROACHES:

Addressing the complex and intersecting forms of discrimination requires humanitarian and WASH programming that goes beyond representation to dismantle structural inequalities, ensuring meaningful participation, inclusion, and leadership of women.

> needs and emerging opportunities for more inclusive and gender-transformative WASH programming. The results of this primary data collection are presented in the following chapters, each organized thematically.

As Ukraine enters the fourth year of war, the humanitarian crisis is deepening due to ongoing attacks, mass displacement, and the destruction of essential infrastructure. In 2025, 12.7 million people-one-third of the population-will need humanitarian assistance, particularly in the east, south, and north. This crisis is worsened by a sharp drop in humanitarian funding, especially after the U.S. suspended its aid programmes. Critical sectors like WASH, shelter, mental health, GBV prevention, and cash assistance are already affected. National NGOs, including women-led organizations, are facing closures and service reductions, undermining localization efforts.



In 2025, 12.7 million people-onethird of the populationwill need humanitarian assistance, particularly in the east, south, and north.

In response, the humanitarian community in Ukraine has revised the 2025 Humanitarian Needs and Response Plan, focusing on four priorities: support for frontline communities, evacuations, emergency response to strikes, and aid to the most vulnerable IDPs. The plan's funding requirement was reduced from \$2.63 billion to \$1.75 billion, with a smaller target population of 4.8 million. To safeguard life-saving operations, non-core activities that do not directly contribute to these four strategic priorities have been deprioritized. These include WASH services in lower-severity areas, shelter repairs not tied to emergencies, mental health and psychosocial support outside acute crisis zones. GBV prevention not linked to emergency response, and multipurpose cash assistance in areas where local authorities can meet basic needs. Programming in major urban centres has also been scaled back, as local governments are better equipped to manage recovery.

The 2025 Humanitarian Needs and Response Plan demonstrates recognition of gender disparities in WASH interventions, though integration remains superficial. While the WASH Cluster prioritizes infrastructure repairs in frontline areas-a measure indirectly benefiting women, who comprise the majority of households managers and caregivers-the plan lacks explicit gender-mainstreaming benchmarks. Key omissions include the absence of menstrual health and hygiene management (MHHM) in hygiene kit distributions, despite its established inclu-

Methodological Approach

CHAP

Gender Integration in Ukraine's Humanitarian **Response:** A Multi-Stakeholder Analysis

The plan's funding requirement was reduced from \$2.63 billion to \$1.75 billion, with a smaller target population of 4.8 million.

sion in comparable crises and insufficient gender-disaggregated data within WASH targets, unlike the Protection Cluster's detailed sex/age breakdowns.

Furthermore, while 75% of collective sites lack accessible WASH facilities, the response fails to propose tailored solutions for women with disabilities, despite 62% of bomb shelters being non-compliant with accessibility standards. This ad hoc approach contrasts with global standards (e.g., Sphere Handbook's gender-sensitive WASH indicators), particularly in cross-cluster coordination; for instance, WASH and GBV interventions remain siloed, missing opportunities to align MHHM supplies with dignity kits or ensure safe sanitation in high-risk settings. To meet crisis-related needs, future iterations must institutionalize MHHM, adopt gender-responsive design, and enforce intersectoral collaboration-gaps well-documented in peer-reviewed evaluations of other conflict zones.

Building on the desk review and evidence from the HNRP, we conducted a mixed-methods data collection exercise targeting both WASH practitioners and humanitarian actors. A total of 27 representatives from NGOs and WASH Cluster stakeholders completed self-administered questionnaires. In parallel, 15 staff members from WASH service facilities—6 from Vodokanal utilities and 9 from healthcare facilities—completed a tailored version of the questionnaire focused on institutional practices. One healthcare representative also participated in an in-depth interview. Furthermore, we conducted semi-structured interviews with 4 representatives from humanitarian organizations and the WASH Cluster. Concurrently, we undertook an internal organizational assessment through structured surveys and interviews with 10 members of WeWorld's humanitarian staff. This component aimed to evaluate our own institutional capacities and constraints in delivering gender-responsive and transformative WASH programming, while identifying potential areas for improvement in technical guidance, staff training, and monitoring frameworks. This analysis was deliberately designed to provide a 360-degree understanding of gender integration in Ukraine's WASH response. The approach moves beyond superficial gap identification to uncover the systemic, operational, and institutional factors that either enable or hinder meaningful gender mainstreaming in humanitarian WASH interventions. The methodological framework ensures our findings are grounded in both the formal architecture of humanitarian coordination and the practical realities of programme implementation, while maintaining critical awareness of our own organizational positioning within the response ecosystem. Subsequent sections will present the results

emerging from each distinct but interconnected investigative strand.



WHAT IS A VODOKANAL?

In Ukraine, the term Vodokanals refers to municipal water and sanitation utilities responsible for the supply of water and the management of wastewater services. Vodokanals do not always have a standard structure. In some locations, a single city-level utility serves the entire hromada (territorial community), while in others, services are divided among multiple smaller providers. However, in all cases, Vodokanals operate in coordination with local authorities to identify and respond to priority areas and needs. These utilities are the primary providers of water supply and, in most cases, wastewater management services—especially in conflict-affected areas. These enterprises remain solely responsible for operating, maintaining, and rehabilitating WASH infrastructure, including during recovery and reconstruction efforts. As public service providers, Vodokanals are key actors in ensuring equitable access to safe water and sanitation.

ed institutions requires more than policy

reform: it calls for investment in inclu-

sive infrastructure, capacity-building for

frontline staff, and systematic gender

analysis across both workplace dynamics

and service delivery mechanisms.

KEY FINDINGS

Vodokanals and **Healthcare Facilities**

- Infrastructure-related exclusion emerged as a major concern. Over 70% of respondents reported structural barriers such as the absence of elevators and inaccessible or non-compliant restrooms. These physical constraints particularly affect persons with disabilities, pregnant women, and the elderly, underscoring the urgent need for inclusive infrastructure investments in line with international standards.
- Institutional gender responsiveness was found to be inconsistent. Among the 15 respondents, 11 were women (73%), most of whom held operational roles (nurses, support staff, engineers), while only one woman reported holding a managerial or leadership position. While some participants observed shifting gender dynamics since the onset of the conflict-including increased female visibility in the workforce-critical gaps persist: gender-specific training is lacking, there is limited capacity for gender-disaggregated monitoring, and participatory feedback channels are absent.

• The war has exacerbated pre-existing inequalities. Female frontline workers face particular exposure to under-resourced conditions, inadequate protection, and limited decision-making power.

Despite these challenges, around 60% of respondents expressed a strong personal commitment to improving inclusiveness in their institutions. This indicates potential for bottom-up change, provided that institutional leadership and technical guidance are in place to support it. Overall, the findings suggest that meaningful gender integration in WASH-relat-



Mariia Khvysiuk, Director of the Health Assistance

Centre in Dergachi, Kharkiv region, embodies the critical leadership role women play in sustaining health services under extreme conditions. Formerly a lecturer at the Faculty of Medicine at Kharkiv University, Maria stepped into a leadership role after the full-scale invasion began, coordinating remaining medical staff and ensuring continued access to healthcare. She shares a story that illustrates both resilience and commitment: "The director of a clinic in Nova Kozacha lost his facility in a missile attack in 2023. But he returned to Dergachi and now travels daily to a nearby clinic near the frontlines. That kind of dedication sends a powerful signal. When people see that services continue-even after destruction-they feel there is a reason to stay. They believe others will return." Maria sees this continuity not only as a lifeline but as a form of psychological and social stability. "Restoring public services like healthcare is about more than infrastructure. It restores trust and gives people hope," she says.

NGOs and Clusters

- Women constituted the majority of humanitarian actors surveyed, highlighting their strong presence in the WASH sector. Among the 27 respondents, approximately 63% were women, compared to around 33% who were men. This gender distribution underscores women's significant representation in the study sample and their active involvement in humanitarian operations.
- Participation in the WASH Cluster was widespread, with notable female representation in leadership roles. 17 organizations confirmed their involvement in the WASH Cluster, each with an average of four staff members. Roughly half of these participants were women, many of whom held leadership or decision-making positions, pointing to increasing gender inclusivity within cluster coordination.
- While women reported a general sense of equality, they also described psychological burdens and unmet support needs. Female respondents conveyed feeling treated equally by their male colleagues but also expressed a persistent pressure to appear strong and resilient at all times. Several participants emphasized the need for greater access to psychosocial support to address stress and emotional fatigue.
- Risks for women and girls in humanitarian contexts remain severe and **multifaceted.** The primary concerns included gender-based violence, inadequate WASH conditions—such as lack of privacy, insufficient lighting, and poor access to safe water-limited availability of healthcare and psychosocial services, heightened economic vulnerability, and entrenched social exclusion.

• Structural and social barriers continue to hinder women's participation in WASH coordination. Respondents cited several obstacles: persistent gender stereotypes, limited access to technical education, underrepresentation in decision-making spaces, inadequate funding for women-led organizations, and internalized self-doubt, all of which restrict women's engagement and leadership in the sector.

• Female participation is widely perceived to enhance the quality and inclusiveness of WASH program-

> **Bogdan Marotta, Monitoring and Evaluation Officer** for the Ukraine Humanitarian Fund (UHF) at OCHA, described the increasing institutionalization of gender mainstreaming within humanitarian coordination in Ukraine. "Gender considerations are now structurally integrated through the GiHA Working Group and dedicated Gender Focal Points in most clusters," he noted, emphasizing that these mechanisms have helped harmonize good practices and foster peer learning across sectors. Despite this progress, Bogdan identified significant challenges in translating gender commitments into practice. "One of the main barriers is the lack of accurate needs assessment data, especially in areas where partners rely solely on local authorities," he explained. This can result in overlooking the specific needs of women and marginalized groups, particularly when clusters lack in-house gender expertise. He pointed to several good practices, including the use of the Gender with Age Marker (GAM) in all UHF-funded proposals, and collaborative assessments between clusters like Shelter and Protection that address the vulnerabilities of female-headed households and persons with disabilities. "Our monitoring officers also provide feedback during field visits and reporting to help strengthen gender and age mainstreaming throughout the project cycle," he added. Bogdan also emphasized the central role of women-led organizations in shaping effective responses: "They are trusted by their communities and bring contextual knowledge. But to truly empower them, we must ensure they have access to flexible funding, mentorship, and a voice in decision-making platforms." With respect to WASH specifically, Bogdan highlighted persistent gender-related gaps including poor access to menstrual health products, lack of safety and privacy in sanitation facilities, and inaccessible infrastructure for persons with disabilities. "Inclusive WASH design is not just about technical standards: it is about dignity and

protection," he concluded.

ming. Many respondents empha-

sized that greater involvement of women leads to more responsive and inclusive humanitarian interventions, particularly in addressing the specific needs of vulnerable populations.

Sustained progress on gender inclusion in WASH requires targeted and systemic efforts. While findings reflect positive momentum, continued advancement will depend on dedicated capacity-building initiatives, the creation of leadership pathways for women, and the removal of structural and societal barriers that limit their full participation.

Oleksandr Avramov, Project Manager at Angels of Salvation, has been active in the humanitarian sector for over three years. Operating in conflict-affected regions, he observes that women and girls face heightened risks due to limited access to healthcare and psychosocial support, particularly in remote areas, and the absence of safe, gender-sensitive WASH infrastructure. "Their most pressing needs include safe, private, and accessible WASH facilities – something that directly impacts their dignity, protection, and well-being," he explains. While he believes that humanitarian actors are making efforts to address these needs, he stresses the importance of maintaining continuous dialogue with female recipients to identify and respond to emerging gaps. In his organization, women are present at all levels and play leading roles, and although he does not perceive systemic barriers to their participation, he underlines the need to create respectful and inclusive environments. He notes that women's involvement in humanitarian action has significantly increased community trust in aid efforts: "Their presence helps build more empathetic, responsive communication with affected communities, especially with other women." Looking ahead, Oleksandr identifies the creation of more safe spaces for women as a priority for the sector: "Women carry a lot of invisible burdens and giving them space to be heard can make a huge difference." He advocates for a shift in how gender is approached in humanitarian work – not as a risk to mitigate, but as an opportunity to create better, more inclusive programmes. "This is especially true in WASH, where daily routines and safety concerns are deeply gendered," he notes. Oleksandr deeply values the contributions of his female colleagues, describing them as the glue that holds teams together through their empathy, leadership, and attention to detail. He believes men can support gender equality by listening, acknowledging women's work, and actively creating space for their voices. "Support doesn't have to be loud – it can be as simple as asking, 'What do you need from me?' and meaning it," he concludes.

Vladislav Korneev, Programme Manager at Peaceful Heaven of Kharkiv, has been working in the humanitarian sector for two years and describes a context in which women and girls face multiple, overlapping risks. Based on his experience, exposure to violence, forced displacement, and the loss of family members lead to high levels of stress, depression, and anxiety among women. Vulnerability increases during displacement, when protective systems break down, putting women at greater risk of human trafficking, sexual exploitation, and forced labour, especially when financial resources are scarce. Among the needs still overlooked by humanitarian actors, Vladislav highlights the lack of support for women as heads of households, limited access to livelihoods and recovery opportunities, and insufficient inclusion of women in decision-making processes. He identifies key barriers to women's participation in the humanitarian sector, including entrenched gender norms, discrimination, harassment, family responsibilities, and the lack of professional networks. He notes that women's participation has already led to concrete improvements, such as the development of more practical and appropriate hygiene kits and greater awareness among men regarding women's specific needs. Looking ahead, he believes that the humanitarian sector must prioritize ensuring women's meaningful participation at all levels – from local planning to global policy-making – because "women understand the needs of their communities during crises best." Their involvement leads to more equitable, effective, and sustainable responses. To design humanitarian responses where the notion of gender becomes a transformative opportunity rather than a risk category, he advocates for a gender-transformative approach from the outset, recognition of women and girls as agents of change, support for specialized women's networks, and the removal of structural barriers. Within his organization, women play critical leadership roles: they manage complex projects, lead multiple departments – including logistics, procurement, and finance – and are, in his words, the core strength of the organization. "The main and only real resource of humanitarian organizations is people," he states. As a man, Vladislav believes that promoting gender equality requires amplifying women's voices, challenging inequality and harassment,

supporting structural change, and continuous self-education.

Vitaliy Zakharchuk, Head of the Branch in Ukraine for Outright International and Coordinator of the LGBTQIA+ Working Group, highlights how WASH responses in Ukraine often fall short of addressing the specific needs of LGBTQIA+ individuals in displacement contexts. "Most mobile toilets and showers are strictly gendered," he explains, "and hygiene kits rarely reflect our real priorities." In 2024–25, Vitaliy supported informal consultations with internally displaced LGBTQIA+ people, revealing critical barriers—from outing risks due to mismatched ID documents, to denial of hygiene kits for non-standard households. One initiative that brought hope was a voucher scheme led by the NGO Norma Vita in Kherson, which allowed recipients to choose hygiene products aligned with their personal needs. "It gave us dignity and a sense of autonomy," people reported. However, he notes that inclusion is still weakest during needs assessments and planning phases, when LGBTQIA+ voices are most often left out. "Local queer-led organiza-tions must be at the centre of design and delivery," Vitaliy stresses. "Only then can WASH become truly safe, responsive, and inclusive for all."

Tetiana Vatazhyshyna, National Gender and Inclusion Focal Point for the WASH Cluster in

Ukraine, highlights the urgent need to shift from gender-sensitive to gender-transformative approaches in the country's humanitarian WASH response. "WASH actors must ensure the intersectional participation of women, girls, LGBT-QIA+ individuals-including transgender and non-binary persons-and persons with disabilities throughout all phases of the response," she explains. While some interventions have considered age and disability, the specific barriers faced by LGBTQIA+ groups are still largely overlooked, due to a lack of systematic analysis and targeted action. Tetiana emphasizes the importance of empowerment-oriented outcomes, such as promoting women's leadership in WASH governance, and applying tools like Rapid Gender Analysis and GBV-WASH Safety Audits. Strengthening partnerships with local women's rights organizations, organizations of persons with disabilities, and LGBTQIA+ groups is also essential to building inclusive and accountable systems. She also points to persistent gaps in Menstrual Health and Hygiene Management (MHHM). "Many schools and shelters still lack private, safe spaces, and access to soap, water, and disposal options is inconsistent," she notes. Despite global best practices, MHHM is often excluded from WASH assessments and emergency planning, particularly in frontline and displacement-affected areas. To address safety and dignity concerns for women and girls, especially those with disabilities, she stresses the need for stronger coordination between the WASH and GBV clusters, including joint safety audits, shared referral pathways, and harmonized monitoring tools. Finally, she underscores the importance of gender-disaggregated indicators that go beyond access to facilities and capture participation in decision-making, safety concerns, and satisfaction with services. On inclusive design, she concludes: "Participatory WASH facility assessments with affected populations are non-negotiable if we want services that truly reflect users' diverse needs."



WeWorld's internal consultation with 10 Ukraine-based staff members (4 women, 6 men) has yielded important insights that both validate our current gender equality efforts and highlight valuable growth opportunities. The findings reveal several encouraging patterns while identifying strategic areas for organizational development as we implement our feminist humanitarian commitments.

Female colleagues consistently emphasized how their gender identity enables deeper community connections and more empathetic programming approaches-core strengths that align perfectly with our organizational values. Some respondents noted opportunities to further enhance the recognition of women's professional expertise, particularly in technical sectors, suggesting useful refinements for our talent management systems. Male staff responses presented a spectrum of engagement with gender issues, ranging from strong operational understanding to opportunities for increased awareness-building. Responses from male colleagues also indicated neutral or non-committal positions on gender questions, which we interpret as highlighting particularly valuable focus areas for our ongoing capacity strengthening initiatives. These patterns align with broader sectoral challenges in masculinities engagement, which WeWorld addresses through structured gender dialogues and peer-learning frameworks. Our approach recognizes that transforming deeply ingrained attitudes requires sustained safe spaces-not just one-time training-to foster reflection on privilege and power.

The data confirms that our programmes are effectively addressing critical priorities like GBV prevention and women's economic empowerment. Simultaneously, staff insights help us identify opportunities to strengthen integration of cross-cutting issues like menstrual health and hygiene management and childcare support-areas where more systematic approaches could enhance both staff and recipient experiences.

Within our organizational culture, we observe both existing strengths and pathways for growth. While many respondents noted positive examples of women's leadership, others highlighted the potential to further develop mentorship pathways and flexible work policies. The occasional "don't know" responses, primarily from male staff, represent not criticism but rather helpful indicators of where targeted professional development could yield significant benefits for our collective work. These

findings emerge at a strategic moment as we implement our Global Strategy 2024-2030. They provide focused guidance for refining several key systems: our gender training curriculum stands to benefit from more nuanced case studies; our HR policies could incorporate more flexible work arrangements; our programme design tools might integrate stronger gender markers; and our accountability systems may adopt more robust monitoring of gender parity in leadership development.

WeWorld embraces these insights as part of our culture of continuous learning and improvement. Within this strategic cycle framework, we will translate these findings into concrete actions including facilitated gender dialogues with staff, pilot initiatives for flexible work arrangements, targeted mentoring programmes, and enhanced gender integration in project design processes. This internal reflection exercise demonstrates our organizational commitment to examining practices with both honesty and optimism-celebrating progress while identifying thoughtful pathways forward. Indeed, the consultation outcomes will directly inform our upcoming Ukraine Gender Action Plan, ensuring WeWorld remains at the forefront of principled feminist humanitarian practice. By approaching these findings as opportunities rather than shortcomings, we reaffirm our commitment to modeling the same transformative practices we advocate for throughout the sector.

WOMEN IN HUMANITARIAN

In conflict-affected regions of Ukraine, women are playing an indispensable-though often underrecognized-role in sustaining humanitarian response and laying the groundwork for recovery. Through their diverse contributions, they help shape interventions that are more inclusive, responsive, and community-driven.

Kseniia Kulynych, Project Supervisor at WeWorld, reflects on her experience as a woman working in the humanitarian sector. Since joining the organization, Ksenija has seen firsthand how conflict reshapes women's lives and opportunities. "The greatest threat to everyone-especially women-is the risk of missile attacks. But beyond the security risks, there are systemic barriers that often go unnoticed," she adds. In many regions, a major obstacle for women with children is the lack of safe educational facilities. "Without proper shelters in schools and kindergartens, many women are forced to stay home with children who continue learning online. This isolates them from the workforce and community life." While Kseniia has not personally faced significant gender-based barriers in the humanitarian sector, she underscores the value of women's insights. "Women are often more attuned to the needs of other women-especially in sensitive areas like hygiene, protection, and childcare. That understanding leads to better-designed, more inclusive responses." Looking to the future, she highlights the need for targeted empowerment. "If I could prioritize one thing, it would be building women's capacities—helping them recognize their rights and seize their opportunities. Awareness is the first step toward change."

Olena Ostapenko, a Cash Officer at WeWorld, offers a different perspective, highlighting the persistent barriers women face in both daily life and humanitarian work. "Gender discrimination is still a major issue. It limits access to education, healthcare, employment, and leadership," she says. One particularly urgent challenge is the lack of reproductive health services, which can result in unwanted pregnancies and serious health risks. In crisis contexts, women's economic dependence on men further erodes their autonomy. Olena also points to the multiple burdens women carry—particularly in caregiving roles. "Domestic responsibilities often prevent women from engaging in humanitarian work, especially in roles that are mobile or involve frontline deployments." Cultural norms and entrenched gender stereotypes also shape who is seen as capable of leadership. "Stereotypes continue to limit women's participation in humanitarian decision-making, even though their presence improves the relevance and impact of aid," she explains. When women are included in humanitarian teams, Olena notes, "they bring broader perspectives and a more holistic approach to working with communities."

Through its work in Kharkiv and Donetsk regions, WeWorldsupported by the Italian Agency for Development Cooperation (AICS)—aims to rebuild health infrastructure while also promoting gender inclusion in recovery planning. Recognizing and elevating women's roles is not only a matter of justice but also a strategic investment in sustainable, community-led recovery.



These stories reflect broader trends: in crisis settings, women consistently take on expanded responsibilities, even as they face deepened structural inequalities. But their knowledge. leadership, and resilience are essential assets in building a future that is not only rebuilt, but reimagined with equity and dignity at its core.



CHAPTER 2. Menstrual Health in Crisis: An Overlooked Humanitarian Priority

Menstrual Health and Hygiene Management (MHHM) is a fundamental aspect of public health, gender equality, and human dignity. It encompasses access to menstrual products, sanitation facilities, education, and healthcare services that enable individuals to manage menstruation safely and with dignity (see enCYCLEpedia. The Things You Should Know About Menstrual Justice, WeWorld 2024). Despite its importance. MHHM is frequently overlooked in humanitarian responses and emergency settings, where competing priorities often push it to the margins.

Menstrual Health and Hygiene Management(MHHM) is a fundamental aspect of public health, gender equality, and human dignity. It encompasses access to menstrual products, sanitation facilities, education, and healthcare services that enable individuals to manage menstruation

safely and with dignity.

In crisis-affected contexts-such as Ukraine, where conflict has disrupted infrastructure, supply chains, and healthcare systems-menstrual health becomes even more challenging. Displacement, economic instability, and shortages of basic goods can limit access to affordable and appropriate menstrual products, while stigma and lack of education perpetuate misinformation and shame. Women and girls may resort to unsafe alternatives, such as rags or reused disposable products, increasing risks of infection and discomfort. Additionally, the absence of private sanitation facilities in shelters or camps further compounds the difficulties of managing menstruation with dignity.

Methodological Approach

The survey employed a self-administered online questionnaire, collecting 302 voluntary and anonymous responses from women across Ukraine. The research aimed to assess knowledge, practices, and challenges related to menstrual health, using a mix of closed and open-ended questions to capture both quantitative and qualitative insights. While the sample was not nationally representative, it included diverse participants, ranging from recipients of past hygiene interventions to women from the general population. A key limitation was the potential for self-selection bias due to the online format, as well as the relatively small sample size. However, the findings still offer valuable preliminary insights into MHHM challenges in a conflict-affected middle-income country. The findings will also inform future programming to better address the needs of women in both humanitarian and recovery contexts.

Humanitarian responses traditionally prioritize food, shelter, and medical care, often neglecting menstrual health as a "secondary" need. However, failing to address MHHM has tangible consequences: it exacerbates gender inequalities, restricts mobility and participation in daily life, and undermines mental and physical well-being. Recognizing menstrual health as a critical component of emergency aid is essential to ensuring the rights and dignity of women and girls in crisis.

This chapter presents findings from a survey conducted by WeWorld in conflict-affected regions of Ukraine, examining the challenges and gaps in MHHM amid ongoing conflict. By shedding light on these issues, we aim to advocate for more inclusive and effective humanitarian interventions that address menstrual health as a priority.

KEY FINDINGS

Participants reflected a diverse devaried financial realities. The survey

mographic cross-section, with most residing in urban areas and facing

participants represent a diverse demographic cross-section of Ukraine. providing valuable insights into menstrual health experiences across different settings. A significant majority-88%-reside in urban areas, while the remaining participants live in towns or settlements with fewer than 20.000 inhabitants, where infrastructure, including healthcare and hygiene services, tends to be more limited. Financial situations varied across the sample, offering a glimpse into how economic status shapes access to menstrual health resources. Just over one in four respondents (approximately 27%) reported having a stable financial situation, allowing them to afford non-essential goods such as a television or refrigerator. The largest segment (37%) said they could afford basic necessities like food and clothing, but not additional or emergency expenses. Meanwhile, a guarter of respondents indicated they had to make difficult spending choices-often prioritizing food over hygiene products or clothing. Alarmingly, nearly 4% of participants reported lacking the resources to even purchase food, highlighting a severe level of deprivation. While this sample of women and girls is not statistically representative of the entire Ukrainian population, it nonetheless provides a nuanced perspective on menstrual health realities in crisis-affected communities. Further analysis-particularly disaggregated by age, gender identity, or minority status-would be necessary to deepen understanding. This report is therefore presented as a preliminary study, with plans to conduct expanded follow-up research in the future.

Menstrual health status and awareness varied widely, with many women experiencing irregular cycles and limited access to education and care. Among respondents, the majority (67.2%) reported having a regular menstrual cycle, while 17.2% experienced irregular periods and 14.2% reported not menstruating at all. The absence or irregularity of menstruation may be linked to various factors, including diagnosed or undiagnosed menstrual disorders, nutritional deficiencies, or the chronic stress associated with prolonged exposure to conflict and instability (see enCY-CLEpedia, WeWorld 2024). The level of attention women pay to their menstrual and reproductive health varies significantly. While 43.7% attend gynecological exams at least once a year, 28.5% do so less frequently, and almost 10% have never had a gynecological check-up. These gaps in preventive care indicate potential unmet health needs and underline the importance of increasing access to reproductive health services. Information about menstruation is largely acquired through informal channels. Parents were the most commonly cited source (64.6%) for menstrual education, while teachers ranked much lower (12.9%), despite their potential role in delivering structured, science-based content. Healthcare professionals were identified as information sources by only 6% of respondents, suggesting that opportunities for clinical guidance are being missed. Overall, a striking 70.9% of participants reported never receiving formal, comprehensive sex and menstrual health education, indicating a critical gap in public health programming and youth empowerment.



Overall. a striking 70.9% of participants reported never receiving formal, comprehensive sex and menstrual health education, indicating a critical gap in public health programming and youth empowerment.

Access to menstrual products remains uneven, with strong preferences for disposable options and interest in better support systems. Access to menstrual products is uneven and influenced by factors such as affordability, availability, and supportive infrastructure. Disposable pads are by far the most widely used and preferred option, with 74.5% of respondents naming them as their primary product. In contrast, more sustainable products-like reusable pads and menstrual cups-were used by only about 4% of participants each. These low figures likely reflect the practical difficulties of using reusable items in environments with inadequate access to WASH facilities. Despite low current usage, there is potential interest in reusable options: almost half of respondents said they would consider using reusable products if they were included in humanitarian hygiene kits, especially if adequate instructions and support were provided. When choosing menstrual products, respondents prioritized comfort, convenience, and cost. The majority of women-93.4%-purchased products from local stores,

a preference for accessible, community-based supply chains. However, 10% reported receiving their products through humanitarian aid distributions. Still, 18.5% of respondents said they had difficulty accessing the menstrual products they needed, either due to cost, distance, or shortages. When asked about the most helpful types of menstrual support within their communities, 42% advocated for free or subsidized product distribution, followed by 22.3% who prioritized gynecological exams and consultations. Meanwhile, 18,7% emphasized the need for educational and awareness campaigns, and a smaller segment -around 5%- highlighted the importance of improving access to clean water and WASH infrastructure.

markets, or pharmacies, suggesting

Her Future at Risk. The Cost of Humanitarian Crises on Women and Girls.

Almost **1 in 5** (18.5%) said they experience difficulties in accessing the menstrual products they need



The data from this menstrual health survey offer a nuanced snapshot of the challenges faced by women and girls in Ukraine, particularly amid protracted conflict, displacement, and fragile health and WASH systems. Despite the fact that 88% of respondents live in urban areas, many still face notable barriers to safe and consistent menstrual health management-underscoring that urban settings are not exempt from issues like product shortages, cost barriers, and inadequate facilities. Financial vulnerability emerges as a significant theme. While around a quarter of participants reported stable financial conditions, the majority faced varying degrees of economic hardship. For some, this meant forgoing non-essential items, while others reported making difficult choices between food, hygiene products, or clothing. Alarmingly, 4% lacked the resources to buy food, reflecting acute deprivation in a minority of cases. These economic pressures, coupled with strained infrastructure, perpetuate cycles of exclusion and deepen existing gender inequalities. Gaps in education are also striking. Over 70% of participants had never received formal sex or menstrual health education, relying instead on parents or informal networks for information. Healthcare providers were cited as sources by just 6% of respondents, suggesting missed opportunities to integrate menstrual health into

While disposable pads were the dominant product choice (74.5%), the survey also highlighted interest in reusable alternatives-especially if accompanied by appropriate WASH infrastructure and user support. Yet, usage of such options remains low, likely due to limited access to clean water, privacy, and sanitary conditions, particularly in more remote or communal living environments.

routine reproductive care.

These findings reinforce broader concerns noted in the 2025 Humanitarian Needs and Response Plan (HNRP) for Ukraine, which acknowledges the gendered impacts of war but does not yet treat menstrual health as a standalone priority. Instead, it is subsumed under broader WASH and protection activities, such as dignity kit distribution and hygiene support. While these interventions are vital, the absence of explicit MHHM programming risks minimizing the specific and recurring nature of menstrual health needs-especially for women and girls in frontline or displaced communities. Taken together, these preliminary insights point to the importance of recognizing menstrual health as a fundamental component of public health and gender-responsive humanitarian action. It is not a peripheral issue, but one that intersects directly with dignity, health, and equity. Future humanitarian planning must invest in education, product access, and infrastructure to ensure menstrual health is no longer sidelined, but fully integrated into comprehensive,

gender-transformative aid.

Taken together, these preliminary insights point to the importance of recognizing menstrual health as a fundamental component of public health and gender-responsive humanitarian action. It is not a peripheral issue, but one that intersects directly with dignity, health, and equity. Future humanitarian planning must invest in education, product access, and infrastructure to ensure menstrual health is no longer sidelined, but fully integrated into comprehensive, gender-transformative aid.

ADVANCING MENSTRUAL HEALTH AND RIGHTS IN UKRAINE: WEWORLD HOSTS MULTI-STAKEHOLDER EVENT FOR INTERNATIONAL MENSTRUAL HEALTH DAY



On May 28, 2025, to mark International Menstrual Health Day, WeWorld– alongside partners including World Vision, REALRELIEF, and FemTech Ukraine–convened a multi-stakeholder event focused on advancing menstrual health and rights in Ukraine. The gathering served as a platform to present the preliminary findings from WeWorld's 2025 Menstrual Health and Hygiene Survey, reinforcing the organization's global commitment to menstrual justice. The event also featured the official presentation of *enCYCLEpedia: The Things*

You Should Know About Menstrual Justice, WeWorld's latest advocacy publication on this topic. The event aimed to elevate the conversation around menstrual health, promote innovative solutions, and emphasize the need to integrate MHHM into both humanitarian and development programming. The agenda included a presentation of the *enCYCLEpedia* by WeWorld's Research Coordinator, a review of Ukraine-specific survey insights, and a product showcase by RE-ALRELIEF. FemTech Ukraine and World Vision contributed perspectives on embedding MHHM into multisectoral responses. A closing panel discussion underscored the urgency of breaking menstrual stigma by involving men and boys in the conversation, addressing gender-based inequalities, and fostering stronger cross-sectoral coordination. The event concluded with a compelling call to action: menstrual health must be recognized as a core component of both national and international response frameworks.

Oleksandra Firsova, MHPSS Specialist at World Vision Ukraine, emphasized that while the organization does not implement MHHM-specific activities directly, it views menstrual health as integral to protection and psychosocial well-being. She pointed to the lack of structured collaboration between MHPSS, WASH, and health sectors as a major barrier to meeting the needs of vulnerable women and girls. MHHM, she noted, is often treated as secondary, despite its profound impact on dignity and mental health—particularly for displaced adolescent girls. To address these gaps, Oleksandra advocates for an integrated, participatory approach with clear indicators and dedicated budgets in response plans. She highlighted promising practices such as incorporating MHHM into safe spaces and adolescent-focused psychosocial programmes. Ultimately, she called for a coordinated national strategy, enhanced training, culturally appropriate materials, flexible funding, and digital tools to fully embed MHHM into humanitarian planning.

Olena Ivanova and Julia Ivanytska, founders of FemTech Ukraine, identified inconsistent supply chains for menstrual products—especially in hard-to-reach areas—as a key challenge. MHHM, they explained, is still perceived as non-essential in some humanitarian responses, leading to its marginalization. Cultural taboos further stifle open dialogue and impede effective programming. Although progress has been made in inter-cluster coordination, Olena and Julia noted missed opportunities for joint initiatives, particularly in integrating MHHM with GBV risk mitigation and adolescent health efforts. They stressed the importance of disaggregated data, user-centred feedback, and technical knowledge to ensure interventions are both age- and gender-appropriate. To strengthen MHHM programming, Olena and Julia recommended co-designing dignity kits with end users, establishing MHHM corners in safe spaces, and expanding access to reusable products through local NGOs. They also called for inclusive participation—particularly involving Roma communities, disability-focused organizations, and adolescent girls—along with the development of Ukrainian-language technical guidance, accessible information materials, and dedicated funding.

Post-Monitoring of Hygiene Kit Distribution by WeWorld

Hygiene kit distributions serve as a critical entry point for analyzing the effectiveness of humanitarian assistance, particularly in addressing gender disparities in crisis response. While often treated as standardized commodities, hygiene kits in fact reflect deeper systemic issues-how well humanitarian actors understand and respond to the lived realities of affected populations, especially women and marginalized groups.

In conflict settings like Ukraine, where access to basic services is disrupted, hygiene kits are not merely about health and sanitation; they directly impact dignity, safety, and gender equity. Women and girls, who typically shoulder the burden of household hygiene management, face heightened risks when these supplies are inadequate such as increased exposure to GBV when forced to search for alternatives, economic strain when purchasing missing items, and health complications when menstrual health needs are unmet

KEY FINDINGS

The data reveals critical disparities in how different groups experience hygiene assistance:

• Satisfaction Levels: An overwhelming 94% of respondents expressed full satisfaction with the hygiene

Methodological Approach

Her Future at Risk. The Cost of Humanitarian Crises on Women and Girls.

kits. An additional 5% reported being partially satisfied, while less than 1% indicated dissatisfaction or strong dissatisfaction - demonstrating a consistently high approval rate.

- Gaps in Essential Items: Despite overall satisfaction, women frequently highlighted the absence of key hygiene items. The most commonly reported shortages included toilet paper, laundry detergent, and menstrual hygiene products. Shampoo and soap were also regularly mentioned as missing or insufficient.
- Relevance to Immediate Needs: A total of 100% of respondents acknowledged the kit's relevance, with 67% strongly agreeing and 33% agreeing that the contents addressed their most urgent needs. This affirms the high relevance and effective targeting of the kits.
- Adequacy Over a Three-Month Period: Three-quarters (75%) of respondents stated that the kits fully met their needs over a three-month period. An additional 21% reported that the kits mostly met their needs, while 4% found the contents mostly or entirely insufficient. Overall, over 96% of recipients considered the kits to be substantially adequate.
- Conclusion: The hygiene kits are widely regarded as relevant and

largely sufficient by recipients. However, the data suggests a need for more gender-sensitive adjustments - particularly to better address the practical hygiene needs of women to further improve the effectiveness and inclusivity of future distributions.

While post-distribution monitoring (PDM) results show a high overall satisfaction with hygiene kits - with over 99% of respondents reporting that their urgent needs were met - the feedback also reveals important, recurring gaps, particularly from women. These insights highlight that even well-received interventions can fall short when gender-specific needs are not fully integrated.

Three key observations emerge. First, the standardized nature of hygiene kits, while efficient, may not adequately reflect the realities of diverse users. Women consistently reported missing essentials such as menstrual hygiene products, toilet paper, laundry detergent, shampoo, and soap. These gaps point to the limitations of pre-packaged approaches that do not account for caregiving roles, menstruation, or other gendered hygiene needs. Second, while the PDM exercise collected gender-specific feedback, the absence of routine, systematic gender-disaggregated monitoring across many interventions allows these patterns to persist. Without structured mechanisms to consistently capture and respond to women's input, well-intentioned programmes risk repeating the same oversights. Third, although hygiene kit distribution is a relatively simple intervention,

these findings suggest that even basic responses require stronger gender sensitivity. If gaps in menstrual hygiene support and household care products remain unaddressed, it raises important questions about how well more complex gender-responsive goals are being met across the WASH sector.

In response, WeWorld is taking action. Based on PDM findings, we are revising the composition of hygiene kits to include the most frequently reported missing items. This immediate adjustment is part of a broader strategy to deepen gender responsiveness: future distributions will be informed by inclusive community consultations, with a specific focus on engaging women's

groups in the design process. At the policy level, WeWorld is also advocating within the WASH Cluster for stronger, gender-responsive standards and practices. These findings serve as a reminder: high satisfaction rates do not mean all needs are being met equitably. By using post-distribution monitoring as a tool for learning and accountabilitynot just compliance-we can make rou-

THE VOICE OF

Anna Crescenti. Global WASH Expert for WeWorld

"If we want to move toward truly gender-transformative approaches in the WASH sector, we have to start by addressing the root causes of gender inequality. That means going beyond simply acknowledging that differences exist. It requires deliberate efforts to challenge power imbalances, harmful norms, and structural barriers.

This begins with thorough gender analyses to understand the specific needs, risks, and capacities of women, girls, men, and boys-supported by disaggregated data. Women and girls must be involved in decision-making across all phases of the project cycle. In Ukraine, as WeWorld we focused on consultations around hygiene and health to shape tailored responses like menstrual hygiene management, SRH support, and the distribution of appropriate hygiene items. Engaging women in leadership roles, like healthcare facility directors, ensures more inclusive and effective interventions.

Equity also means ensuring access to resources—especially for marginalized women, people with disabilities, and the elderly. Supporting women-led local organizations is vital, as is creating space for women in male-dominated sectors like water management through training and employment.

MHHM in emergencies is still too often overlooked, yet it is essential for dignity, health, and well-being. Even though women in Ukraine may have more baseline knowledge, economic hardship threatens proper MHHM. We need targeted needs assessments and responses tailored to urban, rural. and displaced populations. I often recommend cash-based approaches, which provide dignity and choice-while also promoting environmentally friendly options like menstrual cups We also can't ignore the emotional burden. Stress from crisis impacts menstrual health and should be addressed through psychosocial or medical support. Sanitation facili-

WeWorld, in collaboration with its local partners, conducted post-distribution monitoring (PDM) surveys across Kharkivska, Donetska, and Khersonska oblasts to assess whether these kits adequately address the needs of affected populations. A total of 497 recipients were interviewed, including 448 women (90%). The surveys evaluated satisfaction levels, identified item-specific gaps, and disaggregated responses by sex, age, and other relevant factors. While not statistically representative, this method allows for a more nuanced understanding of the experiences of women-an already pre-identified group with unmet needs—by capturing their perspectives and challenges more directly. It ensures the assessment is focused and gender-sensitive, highlighting gaps and priorities that may otherwise remain overlooked in broader surveys.





tine interventions more responsive, inclusive, and empowering for those they aim to serve. Hygiene kits should not be treated as generic aid packages, but as vehicles to promote dignity and equity in crisis response.



ties in shelters must be safe, protective, and private, and female staff need support to do their work with dignity.

In collective shelters, infrastructure is the first step to safety. Facilities must be sex-segregated, secure, and accessible, including for people with disabilities and caregivers. WASH staff should be trained in GBV risk mitigation and referral, and WASH and GBV actors should coordinate closely-from co-designing dignity kits to ensuring safe distribution spaces. To ensure inclusive, accountable programming, we must track indicators disaggregated by sex, age, and disability. These should reflect access to services, safety, MHHM use, and GBV-related incidents. We can only address what we measure.

When it comes to design, accessibility and inclusion are non-negotiable. That includes separate facilities, good lighting, and family-friendly options. Participation is key-affected communities must be involved in every step. Programmes should be age, gender, and diversity sensitive, and environmentally responsible. Rather than setting up parallel systems, I believe in strengthening local services and involving community members directly. Strong coordination between actors and a robust MEAL system are essential to ensuring quality, inclusivity, and accountability. This work is not easy, but it is possible. In Ukraine and beyond, we have the tools to move from gender-sensitive to truly gender-transformative WASH programming. The next step is making that commitment come true".

This work is not easy, but it is possible. In Ukraine and beyond, we have the tools to move from gender-sensitive to truly gender-transformative WASH programming. The next step is making that commitment come true.



The full-scale invasion of Ukraine has precipitated a multifaceted humanitarian crisis in which access to water, sanitation, and hygiene is not only a survival imperative but also a determinant of long-term social equity. **Amid continued hostilities, WASH interventions** must urgently respond to immediate needs, while laying the groundwork for inclusive, rights-based recovery. Yet without a gender-transformative framework, such interventions risk reinforcing, or even exacerbating, deeply rooted inequalities.

KEY FINDINGS FROM THE STUDY

SYSTEMIC BARRIERS TO INCLUSIVE WASH RESPONSE

- Inadequate Infrastructure: The absence of gender-segregated, safe, and accessible WASH facilities in collective centres, schools, and healthcare settings continues to compromise the dignity, privacy, and safety of women, girls, and gender-diverse individuals.
- Neglect of Menstrual Health: Menstrual health and hygiene management is often deprioritized, with emergency responses lacking appropriate disposal systems, privacy, and culturally sensitive solutions—particularly in displacement contexts.
- Psychosocial and SRH Impacts: Inadequate or unsafe access to water affects more than hygiene—it can cause psychological distress, reinforce stigma around menstruation, and undermine broader sexual and reproductive health (SRH) outcomes, particularly for adolescent girls and displaced women.
- Intersectional Disparities: Roma women, LGBTQIA+ individuals, people with disabilities, women-headed households and internally displaced persons face layered barriers to WASH access that are rarely captured in standard needs assessments, resulting in persistently unmet needs.

PARTICIPATORY GAPS IN WASH GOVERNANCE

- Tokenistic Engagement: Women, girls, and gender-diverse individuals are often included in consultations in name only, with limited influence over WASH planning, design, or monitoring. This results in programming that lacks community ownership and fails to meet real needs.
- Undervalued Women's Leadership: Local women's organizations—key actors in delivering hygiene supplies, raising awareness, and supporting GBV survivors—tend to be excluded from formal coordination mechanisms and direct funding opportunities, limiting their sustainability and scale.
- Inconsistent Use of Disaggregated Data: While sex- and age-disaggregated data is often collected, it is rarely analyzed or applied systematically to shape inclusive WASH responses, undermining evidence-based programming and accountability.

Despite data limitations due to insecurity and gaps in sex disaggregated information, the evidence offers a robust foundation for more equitable WASH programming both during the ongoing humanitarian phase and throughout recovery.

POLICY-PRACTICE DISCONNECTS

- Superficial Gender Mainstreaming: Gender is often reduced to symbolic actions—such as installing separate toilets—rather than embedded through transformative approaches that address power dynamics, inclusion, and decision-making.
- Weak Accountability Mechanisms: Although WASH programming aligns with key frameworks like the AICS Gender Guidelines and EU Gender Action Plan III, implementation often lacks rigorous monitoring and evaluation of gender outcomes, including underutilization of tools like the OECD-DAC Gender Marker.
- Health System Gaps: Healthcare facilities are frequently unprepared to meet gender-specific WASH needs. This includes the absence of menstrual health supplies, inadequate water access for maternity and postnatal care, and a lack of disability- and age-inclusive infrastructure design.

HUMANITARIAN COORDINATION CHALLENGES

- Overlooking GBV Risks: Gender-based violence risks and targeted support for survivors are often insufficiently integrated into humanitarian planning and response. This leaves critical protection gaps, particularly in WASH, shelter, and health interventions.
- Exclusion of Marginalized Voices: The specific needs of marginalized groups—such as elderly women experiencing incontinence or LGBTQIA+ individuals facing safety risks are frequently sidelined in cluster coordination discussions. This results in programming that fails to reflect the full spectrum of vulnerability.

These findings reveal a **crisis of equity** in Ukraine's WASH sector: women's unpaid labour fills systemic service gaps, yet their expertise is sidelined in recovery planning and emergency responses risk to replicate pre-war inequalities by neglecting transformative measures.

At the heart of Ukraine's WASH sector recovery lies a critical truth: WASH is never gender-neutral. In areas impacted by conflict, women are often the ones managing disrupted water supplies, navigating damaged infrastructure, or caring for displaced family members with limited sanitation access. These are not just service delivery issues: they are political questions, shaped by gender norms, unequal power structures, and compounded by the social dislocation of war. Ignoring these dynamics risks reinforcing the very vulnerabilities that Ukraine's recovery aims to overcome.

Eugenia, a woman reached by WeWorld's projects and originally from Donetsk, exemplifies the resilience and leadership of countless Ukrainian women navigating war not only to survive but to sustain the fabric of their communities. A former intensive care nurse, she made the deliberate choice to remain in her hometown to care for her two sons, both living with asthma. Instead of fleeing, she adapted, transforming her medical expertise into everyday crisis management, securing clean air spaces, safe water, and emotional stability in a city under fire. "Staying is a quiet act of resistance. If everyone leaves, who will take care of their country?", she reflects. Far from passive, Eugenia takes the initiative where systems fail, organizing informal support networks, negotiating with local aid providers, and advocating for better health and hygiene conditions in her shelter. Her story challenges assumptions about women as victims of war and instead underscores their role as frontline humanitarians, decision-makers, and community protectors. She represents a call to reframe WASH interventions through the lived realities and expertise of women who are already doing the work.

What Do We Mean by **Gender-Transformative WASH?**

A gender-transformative approach to WASH moves beyond technical fixes or token participation. It actively dismantles the norms, roles, and power imbalances that perpetuate inequality (Mercer, 2019). This requires:

- Centering dignity, safety, and agency in all WASH infrastructure, from toilets placement to MHHM provision in shelters;
- Working with and through women-led local actors who are already trusted in communities;
- Embedding intersectionality into assessments, recognizing how gender intersects with disability, age, ethnicity, displacement, and class;
- Investing in women's leadership and governance roles within WASH service delivery and decision-making bodies;
- Addressing unpaid care burdens by designing systems that ease, rather than reinforce, the disproportionate load carried by women;

Creating feedback and accountability mechanisms that shift power to users, particularly those historically excluded from formal planning.

A Gender-Transformative Approach to WASH

(WeWorld's elaboration on "Gender transformative WASH infographic" created by Elaine Mercer⁶)



Mercer Elaine, 2019, Nine ideas for Gender Transformative WASH programming https://sanitationlearning-hub.org/2019/06/27/nine-ideas-for-gender-transformative-wash-programming/

The war in Ukraine will not last forever. But the systems built-or neglected-during this period will shape the country's recovery and future for decades.

The war in Ukraine will not last forever. But the systems built-or neglectedduring this period will shape the country's recovery and future for decades. A WASH facility in a basement shelter without menstrual hygiene supplies is not just a technical oversight; it is a denial of dignity. A toilet shared by families in overcrowded collective centres, without

WHY GENDER-TRANSFORMATIVE WASH MATTERS FOR RECOVERY

In Ukraine's ongoing recovery, WASH systems are more than infrastructure: they are lifelines. When designed with gender equity at the core, WASH systems can become powerful tools for empowerment, safety, and resilience. Conversely, when women and marginalized groups are excluded from WASH decision-making, systems often replicate the very inequities that fuel vulnerability.

- to ensure no one is left behind.
- women in WASH leadership see faster infrastructure repair post-disaster (GWI, 2024).

Alessia Macchiavello and Silvia Botti of the One Works Foundation stress that post-conflict urban reconstruction must go beyond physical repair to fundamentally reimagine urban systems through gender-transformative lens. "The city reflects the priorities of those who design it," they explain, noting that traditional planning paradigms tend to centre the needs of a normative male subject-thereby marginalizing the lived experiences of women, caregivers, LGBTQIA+ individuals, and persons with disabilities. In their work, particularly within the Concept Masterplan for Mykolaiv developed under the UN4UkrainianCities programme, they have championed an approach that blends technical innovation with participatory sensitivity. Using the exp-EIA method—an integrated system of physical and digital tools co-developed with the Politecnico di Milano-they collected nearly 2,000 citizen responses in one week, capturing both objective data and subjective perceptions. "What emerged," they recount, "was the emotional geography of the city-how people feel about safety, care, and belonging in public space." **They emphasize** that inclusive planning must account for fragmented mobility patterns, care responsibilities, and hidden vulnerabilities that disproportionately affect women and marginalized groups. Drawing on international best practices such as Vienna's gender-sensitive housing and Paris' "15-minute city" model, they argue for locally tailored strategies in Ukraine that prioritize community networks, participatory mapping, and safe, accessible infrastructure. "Reconstruction is not just a technical act," they conclude. "It's a cultural opportunity to redesign the city starting from those most often left at its margins."

locks or lighting, is not a neutral space; it heightens risks of gender-based violence. The ongoing defunding of sexual and reproductive health programming, particularly in conflict-affected countries like Ukraine, strips humanitarian WASH of its ability to protect, let alone empower.

• Women as Agents of Change. Women in Ukraine are the primary caregivers and household managers. Their lived experience makes them indispensable to effective WASH design and governance. Yet, when their perspectives are sidelined, WASH infrastructure often fails to meet real needs, leading to unsafe or inefficient systems (CARE, 2022; EU Gender Action Plan III, 2025).

• Intersectional Vulnerabilities. The war has deepened disparities. Women from rural communities, elderly women, and women with disabilities face compounded barriers to WASH services. Recovery programming must integrate intersectional approaches

• Economic and Social Multipliers. Gender-transformative WASH yields measurable returns: for example, girls' school attendance increases when toilets are compatible with menstrual hygiene management (WaterAid, 2023); and communities with These are not abstract risks. They are grounded in the lived realities of displaced women, frontline responders, and civil society actors working to maintain dignity amid destruction. Without a gender-transformative approach to WASH, emergency responses risk institutionalizing exclusion, where makeshift fixes today become the inadequate systems of tomorrow. But this outcome is not inevitable. There is an alternative: one that views WASH not just as infrastructure, but as a lever for justice and recovery. It means designing mobile hygiene units equipped for menstruation, not just water tanks. It means resourcing women-led local organizations that already deliver underfunded services in areas international agencies cannot reach. It means ensuring that national recovery

plans embed universal WASH standards in rebuilding clinics and schoolsnot just restoring what was lost, but building something better.

Without a gender-transformative approach to WASH, emergency responses risk institutionalizing exclusion. where makeshift fixes today become the inadequate systems of tomorrow.

This transformation requires donors to fund differently, humanitarian actors to design differently, and Ukrainian authorities to legislate differently. It also requires

Recommendations

FOR HUMANITARIAN **ACTORS: IMMEDIATE RESPONSE**

1. PRIORITIZE SAFETY, DIGNITY, AND BODILY AUTONOMY IN WASH DELIVERY

- Conduct regular, participatory safety audits of all WASH facilities, ensuring features such as lockable doors, adequate lighting, and gender-segregated spaces are in place and maintained.
- Distribute culturally appropriate and sustainable MHHM kits, tailored to community preferences and inclusive of reusable options where feasible.
- Engage protection actors and diverse community members, especially women and girls, in identifying WASH-related risks and solutions through site safety assessments and participatory mapping.

2. ELEVATE WOMEN'S LEADERSHIP ACROSS THE WASH RESPONSE

- Institutionalize the leadership of women-led local organizations in WASH sector coordination, assessments, and accountability structures-not as token participants but as co-designers of the response.
- Allocate flexible, core funding and invest in capacity strengthening, enabling sustainable, long-term engagement of women-led groups beyond project cycles.
- Ensure the representation of diverse women-including displaced. Roma. elderly, and LGBTQIA+ individuals-across decision-making forums, with proactive outreach and support mechanisms.

3. STRENGTHEN INTEGRATION ACROSS WASH, GBV, AND SRH **SECTORS**

- Foster joint planning, programming, and budgeting between WASH, gender-based violence (GBV), and sexual and reproductive health (SRH) actors to address overlapping risks and needs.
- Train WASH personnel in basic GBV risk mitigation, survivor-centred approaches, and safe referral pathways, in close coordination with protection and health clusters.
- Design all hygiene infrastructure with an emphasis on privacy, safety, and agency, recognizing WASH services as foundational to bodily integrity and human rights.

4. PROMOTE INCLUSIVE, USER-CEN-TRED WASH INFRASTRUCTURE

- Apply intersectional gender and power analysis to all WASH assessments and design processes, identifying and addressing the distinct barriers faced by marginalized groups.
- Ensure facilities are accessible, dignified, and adaptable to the needs of girls, women, persons with disabilities, the elderly, and ethnic minorities.
- Institutionalize community feedback mechanisms-including anonymous reporting tools and user satisfaction surveys-to monitor facility safety and effectiveness and inform timely adjustments.

FOR DONORS: **STRATEGIC AND FINANCIAL** SUPPORT

1. SUSTAIN INTEGRATED. **CROSS-SECTORAL FUNDING**

- Prioritize continued investment in integrated WASH-SRH-GBV programming, recognizing the interdependence of these sectors in advancing bodily autonomy, dignity, and safety-particularly for women and girls.
- Avoid siloed budgeting that weakens holistic service delivery; instead, champion flexible, pooled funding mechanisms that allow implementers to respond dynamically to evolving needs.
- Provide multi-year, predictable funding to support the continuity and sustainability of gender-transformative interventions.

2. PROMOTE EQUITY AND INCLU-SION IN FUNDING FRAMEWORKS

- metrics in WASH proposals and reports-such as the percentage of women in leadership roles, satisfaction rates disaggregated by gender reduction through WASH response.
- Review and adapt eligibility criteria to ensure they do not unintentionally disadvantage local or women-led organizations, such as by overemphasizing prior large-scale grant experience or rigid compliance models.
- Establish dedicated funding windows ty-building grants to support compliance, reporting, and innovation.

3. INVEST IN GENDER-RESPONSIVE AND LOCALLY ROOTED RECOVERY

- Support women-led enterprises and cooperatives engaged in the production, distribution, or maintenance of WASH-related goods and services, including menstrual hygiene products, water filtration kits, and sanitation hardware. Offer startup capital. procurement incentives, and access to public procurement platforms.
- Fund vocational training, apprenfor women and girls in WASH-related fields-including plumbing, wawaste treatment-to expand their access to sustainable, non-traditional livelihoods.
- private sector actors to foster inclusive innovation in sanitation technologies, menstrual health, and climate-resilient WASH infrastructure.

listening to the voices of women like

Eugenia: not as passive recipients, but

as co-creators of systems that uphold

dignity, redistribute power, and anchor

recovery in equity. What is needed now

is not just action, but the right kind of

action: gender-informed, intersectional,

What is needed now is not

iust action, but the right kind

of action: gender-informed,

intersectional, community-

led. and accountable.

community-led, and accountable.

• Require the inclusion of gender-disaggregated indicators and inclusion and disability status, or GBV incident

or quotas for local and women-led NGOs, accompanied by capaci-

ticeships, and mentorship schemes ter management, engineering, and

Consider co-investment models with

FOR UKRAINIAN **AUTHORITIES: POLICY AND** SYSTEM REFORM

1. INSTITUTIONALIZE INCLUSIVE WASH STANDARDS

- · Revise and enforce national infrastructure guidelines to mandate the integration of gender-, age-, and disability-inclusive WASH facilities in all public buildings-especially schools, health clinics, and shelters-undergoing reconstruction.
- Align new infrastructure development with global best practices and mandatory national standards including the Sphere Standards and UNICEF Minimum Standards for WASH, to ensure that facilities are not only functional but safe, accessible, and empowering for all users.
- Promote the systematic adoption of inclusive design standards across national and local reconstruction programmes, supported by technical training for engineers, architects, and local contractors.

2. ADVANCE WOMEN'S LEADERSHIP IN LOCAL WASH GOVERNANCE

- Pilot community-based WASH governance structures, such as municipal or neighborhood-level WASH committees, with a minimum 50% representation of women, including those from underrepresented and marginalized groups (e.g., Roma women, LGBTOIA+ individuals, displaced persons, and persons with disabilities).
- Provide financial and technical support for these pilots to ensure they are sustainable, participatory, and embedded in local planning processes.

• Document, evaluate, and scale successful models across municipalities, integrating learning into decentralization and public participation reforms.

3. EMBED GENDER-TRANSFORM-ATIVE WASH IN NATIONAL PLAN-NING AND POLICY

- Ensure that WASH is not siloed but is fully integrated into national gender equality, recovery, and social protection strategies, including Ukraine's commitments under SDG 5 (gender equality), SDG 6 (clean water and sanitation), and the EU Gender Action Plan III.
- Introduce mandatory gender and inclusion indicators into WASH-related planning, budgeting, and performance monitoring tools at national and subnational levels.
- Support the development of an inter-ministerial task force or coordination mechanism to align gender-transformative WASH policy implementation across relevant ministries (e.g., Infrastructure, Health, Social Policy, Reintegration).

CROSS-CUTTING GAPS TO ADDRESS

1. LOCALIZATION AND LEADERSHIP SHIFTS

- Commit to progressively transferring both funding and decision-making authority to national and local NGOs, with a clear trajectory toward equitable partnerships. Prioritize investment in women-led and community-rooted organizations, recognizing them as essential drivers of resilient WASH systems.
- Move beyond transactional subcontracting models toward strategic, long-term partnerships that emphasize mutual learning, shared accountability, and co-leadership in programme design and delivery.
- Facilitate capacity strengthening initiatives co-designed with local actors, ensuring that support addresses systemic barriers to access, compliance, and visibility in humanitarian coordination mechanisms.

2. ACCOUNTABILITY AND COMMU-NITY TRANSPARENCY

- Establish or strengthen independent gender and inclusion monitoring mechanisms, such as civil society-led oversight committees, to assess WASH programme effectiveness through a rights-based, intersectional lens.
- Ensure that monitoring outcomes are not only collected but translated into action, with transparent feedback loops to affected populations-especially women, youth, and persons with disabilities-using accessible, inclusive formats.
- Promote the participation of community representatives in evaluation processes, validating local knowledge as a critical form of evidence and accountability.

3. INNOVATION AND DIGITAL IN-CLUSION

- Leverage low-cost, user-centred digital tools—such as SMS platforms, mobile surveys, or offline-compatible apps—for real-time reporting of service gaps, safety concerns, and user satisfaction in WASH services.
- Invest in interactive digital platforms for menstrual health education, designed for adolescents and caregivers, with culturally relevant content and inclusive language.
- Prioritize solutions that are designed for low-connectivity and low-literacy environments, ensuring that digital innovation enhances, rather than exacerbates, equity.

4. MALE ENGAGEMENT AND TRANS-FORMATIVE NORMS

- Integrate male engagement strategies into WASH and protection programmes to challenge harmful gender norms, reduce stigma around care work and hygiene, and promote shared responsibility for sanitation and safety.
- Facilitate community dialogues, peer education, and role model campaigns that involve men and boys as active allies in advancing gender equality and preventing GBV.
- Collaborate with faith leaders, educators, and youth networks to embed positive masculinity narratives in both formal and informal community spaces.



Bibliography

AICS (Italian Agency for Development Cooperation). (2024). Guidelines for Gender-Responsive WASH Programming. Rome: AICS.

BBC. (2023). Women in Ukraine: How Have Gender Roles and Attitudes Changed?

Boesten, J. (2022). Sexual violence as a weapon of war in Ukraine. *British medical journal*.

Boichak, O. (2022). Camouflage aesthetics: militarisation, craftivism, and the in/visibility of resistance at scale. *Contemporary Voices*.

Boman, B. (2023). Vulnerable Women: Negotiations Among Migrant Women in the Aftermath of the Ukraine War. *Human Arenas*.

Capasso, A. et al. (2021). Patterns of Gender-Based Violence in Conflict-Affected Ukraine: A Descriptive Analysis of Internally Displaced and Local Women Receiving Psychosocial Services. *Journal of Interpersonal Violence*.

Capasso, A. et al. (2022). Lessons from the field: Recommendations for gender-based violence prevention and treatment for displaced women in conflict-affected Ukraine. *The Lancet Regional Health - Europe*.

CARE International. (2022). Gender and WASH in Emergencies: Ukraine Case Study. Geneva: CARE.

Global Water Initiative (GWI). (2024). Women's Participation in WASH Governance: Global Trends and Barriers. Washington, DC: GWI.

Gonçalves Júnior, J. et al. (2022). The impact of "the war that drags on" in Ukraine for the health of children and adolescents: Old problems in a new conflict?. *International Journal of Child Abuse & Neglect*.

Harada, K. H. et al. (2022). Conflict-related environmental damages on health: lessons learned from the past wars and ongoing Russian invasion of Ukraine. *Environmental Health and Preventive Medicine*.

HNRP (Humanitarian Needs Response Plan). (2025). Ukraine Humanitarian Needs Overview. Kyiv: UNOCHA.

ICRC (International Committee of the Red Cross). (2019). Women in War: Unseen Scars. Geneva: ICRC.

Jagtap, S. et al. (2022). The Russia-Ukraine Conflict: Its Implications for the Global Food Supply Chains. *Foods*.

Karagodina, O. et al. (2023). Qualitative study of barriers and facilitators to HIV detection and treatment among women who inject drugs during the war against Ukraine. *AIDS Research and Therapy*.

Koshulko, O., Dluhopolskyi, O. (2022). Exploring women's resistance against occupation and war in Ukraine. *Revista Estudos Feministas*.

Kostenko, A. et al. (2024). *Resilience and vulnerability of Ukrainians: The role of family during the war.* *Problems and Perspectives in Management*.

Kravchenko, K. et al. (2024). War consequences and prospects for post-war reconstruction (case of Ukrainian urban agglomerations). *Visnyk of V.N. Karazin Kharkiv National University*.

Lazarus, L. et al. (2024). "...because the social work never ends": a qualitative study exploring how NGOs responded to emerging needs while upholding responsibility to HIV prevention and treatment during the war in Ukraine. *Journal of the International AIDS Society*.

Lewtak, K. et al. (2022). *Hospitalizations of Ukrainian Migrants and Refugees in Poland in the Time of the Russia-Ukraine Conflict.* *International Journal of Environmental Research and Public Health*.

Magioni, A. et al. (2022). *Cascading Risks for Preventable Infectious Diseases in Children and Adolescents during the 2022 Invasion of Ukraine.* *International Journal of Environmental Research and Public Health*.

Mieriemova, Y. (2025). How Ukrainian servicewomen's stories of war matter. *International Feminist Journal of Politics*. Moise, A. D. et al. (2023). European attitudes to refugees after the Russian invasion of Ukraine. *West European Politics*.

Owczarzak, J. et al. (2024). "Will you need this health at all? Will you be alive?": using the bioecological model of mass trauma to understand HIV care experiences during the war in Ukraine. *Journal of the International AIDS Society*.

Piotrowski, A. et al. (2023). Women during the war - stress, resilience and self-efficacy during the Russian-Ukrainian war (May 2022) among women from Ukraine, Poland, Slovakia and Romania. *European Psychiatry*.

Sadova-Chuba, Z. et al. (2023). IS THE QUALITY OF LIFE OF WOMEN WHO WENT ABROAD DURING THE FULL-SCALE RUSSIAN-UKRAINIAN WAR RE-ALLY HIGHER COMPARED TO WOMEN WHO STAYED IN UKRAINE?. *Вісник соціальної гігієни та організації охорони здоров'я України*.

Sallimi, H., Jatmika, S. (2024). *Media Coverage of Sexual Violence Cases in the Russia-Ukraine War.* *Journal of Islamic World and Politics*.

Sheather, J. (2022). As Russian troops cross into Ukraine, we need to remind ourselves of the impact of war on health. *British Medical Journal*.

Shkodina, A. D. et al. (2022). *Healthcare system amidst the war in Ukraine*. *Annals of Medicine and Surgery*.

Shumilova, O. et al. (2023). Impact of the Russia–Ukraine armed conflict on water resources and water infrastructure. *Nature Sustainability*.

Stepanova, N. (2022). War in Ukraine: the price of dialysis patients' survival. *Journal of Nephrology*.

Teodorescu, L. (2024). Women on the move: Understanding the female face of migration to develop targeted policies. *European View*.

Tucker, S. et al. (2024). Hope Groups: a protocol for a cluster randomized controlled trial of psychosocial, mental health, and parenting support groups for Ukrainian caregivers during war and conflict. *Trials*.

UN Women. (2023). Gendered Impacts of the Ukraine War: Water, Time Poverty, and Security. New York: UN Women.

UNFPA. (2024). Gender-Based Violence in Conflict Settings: A Global Review. New York: UNFPA.

UNFPA. (2024). Voices from Ukraine 2024. UN

UNICEF. (2023). WASH Access and Gender Risks in Ukraine: A Displacement Crisis. Kyiv: UNICEF Ukraine.

Varyvoda, Y. et al. (2022). Ukraine's most vulnerable need healthcare: Priorities during the armed conflict. *Public Health in Practice*.

WaterAid. (2023). Menstrual Hygiene Management in Humanitarian Contexts. London: WaterAid.

WHO (World Health Organization). (2022). Gender, WASH, and Health: A Global Policy Brief. Geneva: WHO.

Wolfe, A. et al. (2025). Characterising the effects of displacement on gender-based violence among women living with HIV in Ukraine: a cross-sectional study. *BMJ Global Health*.

World Bank. (2023). Gender Equality in Water Management: Lessons from Post-Conflict Zones. Washington, DC: World Bank.

Zimba, O., Gasparyan, A. (2023). *Refugee Health: A Global and Multidisciplinary Challenge.* *Journal of Korean Medical Science*.



WeWorld

WeWorld is an independent Italian organization engaged in development cooperation and humanitarian aid projects over the last 50 years, operating today in more than 20 countries.

Over the last year, WeWorld has carried out over 160 projects, reaching over 5.6 million people, in Afghanistan, Benin, Bolivia, Brazil, Burkina Faso, Burundi, Cambodia, Jordan, Italy, Kenya, Lebanon, Libya, Mali, Moldova, Mozambique, Nicaragua, Niger, Palestine, Peru, the Democratic Republic of Congo, Syria, Thailand, Tanzania, Tunisia, and Ukraine.

Children, women, and young people, agents of change in every community, are at the centre of WeWorld's projects and campaigns in the following areas of intervention: access to water hygiene, and sanitation; education; food security, livelihoods and local development; gender and protection; environment and climate.

Mission

We work alongside individuals on the geographic, economic or social margins to overcome inequalities together and build a fairer future which respects the dignity and diversity of people and the environment. We support people and communities with humanitarian assistance in crisis contexts and support pathways to self-determination and development, to contribute to structural change and generate opportunities for all people.

Vision

We strive for a better world in which everyone, especially children and women, have equal opportunities and rights, access to resources, to health, to education and to decent work.

A world in which the environment is a common good to be respected and preserved; in which war, violence and exploitation are banned. A world where no one is left behind.

WEWORLD

VIA SERIO 6, 20139 MILANO - IT T. +39 02 55231193 F. +39 02 56816484

VIA BARACCA 3, 40133 BOLOGNA - IT T. +39 051 585604 F. +39 051 582225

www.weworld.it