

Design guidance for inclusive water, sanitation and hygiene (WASH) programming for women and youth with disabilities

Focus on menstrual health management (MHM)

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Introduction

Menstrual health is a fundamental need, yet women and youths from low-income countries are disproportionately affected by inadequate menstrual health management. Water For People's WASH Equity and Inclusion Guidance (2021) highlights that access to improved water, sanitation, and hygiene services is crucial for overcoming poverty and fulfilling basic needs. Women and youths with disabilities face significant challenges due to the intersection of gender, disability, and social barriers such as poverty, discrimination, and social stigma, which are often not critically factored in the design of WASH projects in low- and middle-income countries.

This guidance focuses on the lived experiences of these demographics, emphasizing the importance of inclusive WASH programs that address menstrual health management (MHM) needs. It outlines the barriers to integrating inclusive MHM into WASH initiatives and offers actionable recommendations for development practitioners to create inclusive designs. Additionally, it concludes with resources to enhance understanding of the specific challenges faced by women and youth with disabilities regarding MHM.

Barriers that Women and Youth with Disabilities experience in accessing MHM in Malawi

To determine some of the barriers experienced by women and youths with disabilities, the author of this guidance corresponded with a community-based disability rights activist from a federation for persons with disabilities in Malawi to draw a list of possible interviewees for this guidance. The interviews were then conducted via Zoom and WhatsApp video calling with four youths and women with disabilities. To facilitate accessibility, a Gambian and a Malawian Sign Language interpreter were involved in communication accessibility. The interviewees responded to several questions based on their lived experiences and expressed the challenges and barriers they face regarding accessing WASH resources and menstrual health management.

Interviewee #1, “Our house does not have piped water; we use the community borehole. Being in a wheelchair, I am not able to go and fetch water by myself, and I depend on my family members to use the toilet. I use a bucket and then pour the contents into a latrine.”

Interviewee #2, “I am hard of hearing. No tap in my house and no drainage system in my home. I am sad whenever I see used bath water or dirty water from laundry in a mini mosquito-infested pond in our backyard. When it rains, it gets bad and smells. Sometimes, I fear it will cause malaria. Sometimes, I fear other sicknesses. We are not rich, and so me and my sister cannot walk; we buy pads when we have money, but many times, we cut our old clothes when we have periods because we do not have money.”

Interviewee #2 further expressed disdain at local international development organizations. she said, my sister, they invite her to workshops, for what? We are still poor, they invite us, give us nice food and some money. I think we are “honorable beggars” because we get invited to beg and beg for things to live and others who beg on the street do not.”

Interviewee #3, who has low vision, says she does not use the latrines at her school because they are too dark and not well-lit. She also laments that water is sometimes splashed on the floor, posing a fall risk. Often, she would need a friend to guide her to the toilet. “On normal days, I try not to drink water before I leave my home, and when I feel I have a lot of blood, I stay at home because my friends will refuse to go with me to the toilet. I remember I fell five times because the floor was wet.”

Interviewee #3 also faces other challenges, such as communicating her menstrual needs: “I live with my aunt; my school is far from my parents, that is why I stay with her. It is very difficult to ask her for things. She gets angry.”

Interviewee #4, a wheelchair user, changed her mind at the end of the interview and declined to use her words in this guidance note because, like interviewee #2, she expressed concerns that local and international development organizations use women and people with disabilities. She does not see how contributing to the note will change things for her.

These experiences expose a link between gender, disability, and the intersection with other socially disabling barriers such as poverty, discrimination, and stigma.

The meaningful participation of women and youths with disabilities is important; however, most importantly, their needs also need to be factored into the designs for WASH and MHM programs and implemented so that they can access them rather than repeated subjection to storytelling for the sake of “inclusion” and donor engagement while still leaving them behind.

Participation is a universal human right that applies to everyone, including women and youths with disabilities. Meaningful participation goes beyond “check box” activities, including individuals in the assessment, design, implementation, monitoring, and reporting of projects. Meaningful participation strengthens the ownership and effectiveness of projects and increases the range of people benefitting from MHM interventions.

Key Barriers Identified

1. **Physical Accessibility:** Lack of accessible water sources and sanitation facilities limits independence for individuals with disabilities.
2. **Economic Constraints:** Financial barriers restrict access to essential menstrual hygiene products for women and youths with disabilities, thus impacting health and dignity.
3. **Environmental Health Risks:** Poor sanitation conditions create health hazards, increasing the risk of waterborne diseases.

4. **Safety and Comfort:** Inadequate lighting and unsafe conditions in latrines deter usage and access for women and youths with disabilities, affecting school attendance and other social activities as they feel less comfortable using facilities that are not tailored to their needs.

Their experiences underscore the urgent need for inclusive WASH programming that addresses the intersectional challenges faced by women and youths with disabilities in Malawi. This includes improving physical accessibility, providing economic support for menstrual products, and ensuring safe sanitation facilities. It will also be very “healthful” (word borrowed from interviewee #3) to include WASH awareness in school activities to ensure other students are made aware of keeping school toilet floors dry. The next section will discuss best practices on how to overcome these identified barriers.

Facilitators to Overcome Barriers

Stakeholder Engagement and Inclusion Design:

- **Conduct Situational Analysis Involving Youths and Women with Disabilities:** Engage women and youths with disabilities in the consultation, planning, design, and implementation of WASH facilities to ensure their needs and preferences are prioritized and provided.
- **Focus Groups and Surveys:** Conduct focus groups and surveys to gather input on specific barriers they face in accessing menstrual health management.

Improved Water Access:

- **Community Water Points:** Develop community water points that are easily accessible for women and youths with disabilities, ensuring they can independently fetch water.
- **Home Connections:** Where feasible, explore the possibility of connecting homes to piped-water systems to reduce dependency on community sources.

Accessibility Standards:

- **Needs-Based Design:** Design toilets and washing facilities with enough space for wheelchair users and others with mobility impairments and with enough lights for those with low vision. This will also ensure safety from the risk of accidents.

Address Gender-Based Violence

- Women with disabilities experience higher rates of violence than men with disabilities, and youths with disabilities experience violence more than their peers without disabilities. In many cases, this violence is carried out by caregivers who may take advantage of individuals while changing sanitary pads. Support safe mechanisms to report sexual exploitation and gender misconduct for general safeguarding measures.

Safe and Private Facilities:

- **Ensure Privacy:** Create private, well-lit facilities for menstrual health management, including gender-segregated toilets with locking doors.
- **Regular Maintenance:** Establish regular maintenance schedules to keep facilities clean, safe, and free of hazards like wet floors.

Support for Menstrual Products:

- **Affordable Menstrual Hygiene Products:** Distribute menstrual health products through community-based advocacy groups, schools, or WASH facilities to ensure availability and affordability.
- **Affordable and diverse MHM Product Options:** Offer a variety of menstrual products, including reusable options that are environmentally friendly and cost-effective reusable sanitary pads.
- **Support advocacy for removing tax on menstrual health products:** Work with local civil society organizations (especially Organizations with Persons with Disabilities (OPDs)) to advocate to duty bearers to ensure products are available at lower costs. Water For People Tanzania has experience with this; please contact the team for more information and advice.

Recommendations for Development Practitioners

The word inclusive has become so familiar in the development field that its true meaning is often lost in the process. Inclusive does not mean just including people or what international development practitioners and project designers assume their needs are but engaging with affected communities and ensuring that international development programs are tailored to represent the voices and choices of people with disabilities. Doing this ensures that the project designs employ equitable and needs-based principles that address the various needs of persons with disabilities. The following is a set of recommendations for development practitioners to keep in mind when designing inclusive WASH Programming.

Meaningfully Engage with Communities of Persons with Disabilities:

- Involve women and youths with disabilities in all stages of project design, implementation, and evaluation. Their insights are invaluable for creating effective and inclusive solutions.

Conduct Comprehensive Needs-Based Assessments:

5. Regularly assess the specific needs of women and youths with disabilities in target communities to identify barriers to accessing WASH services and products. This will enhance understanding and foster a meaningful roadmap to providing better services and resources to those who need them and reduce the risk of workshop and community engagement fatigue by targeted communities.

Adopt Needs-Based Design Principles:

- Ensure that all WASH projects and programs are designed to provide specific disability demographic accessibility needs in mind. This includes well-lit WASH facilities for low vision disabilities, solar emergency light alarms in toilets for deaf youths and women, height-sensitive WASH stations for those in wheelchairs, automatic taps for deaf and hard-of-hearing youths and women to control water conservation as they are likely to leave taps running, and other needs-based designs to accommodate individuals with various disabilities associated with sight, hearing, and intellect.
- Nutritional needs and pain management support should be offered as needed, identify links to access these types of services as well.

Promote Inclusive Government and Organizational Policy Frameworks:

- Advocate for inclusive policies at local, national, and international levels that prioritize specific equity-based disability inclusion in WASH programming, ensuring that funding and resources are allocated accordingly.

Develop Needs-Based Accessible Educational Materials:

- Create and disseminate information on menstrual health management and hygiene practices in formats that are accessible to individuals with disabilities, such as local languages and sign language info graphs and videos, braille, large print, and audio.

Train and Empower Local Stakeholders:

6. Offer training for community leaders, health workers, caregivers, and WASH practitioners on topics that address the needs of individuals with disabilities while emphasizing rights-based models of disability. This will also ensure sustainability and community resilience. Learn more about the different models of disability [here](#).

Build Community Awareness:

- Implement community sensitization campaigns to reduce stigma by using social and human rights models of disability to promote understanding of the needs and rights of individuals with disabilities to enhance a more inclusive environment.

Strengthening Data Collection and Monitoring:

- Implement robust data collection systems to track the participation and experiences of women and youths with disabilities in WASH programs, using this data to inform future initiatives. One way of doing this is to employ the Washington Group Questions, i.e., the short set. However, there must be some caution when collecting data through the short set as the questions often ask about one specific kind of disability with responses directed to yes/no answers. While collecting data, practitioners might come into contact with individuals or groups with multiple or intersectional disabilities such as deaf blindness. In this kind of scenario, the recommendation is for practitioners to frame questions to fit the

groups they are collecting data from in order to design and implement fully inclusive WASH initiatives.

Identify, Collaborate, and Maintain Multi-Sectoral Partnerships:

- Collaborate with organizations focused on disability rights, health, education, and community development to create holistic approaches that address the intersecting needs of women and youths with disabilities.

Ensure Safe and Secure Facilities:

- Prioritize the safety and security of WASH facilities, especially for women and youths with disabilities, by incorporating proper lighting, privacy features, and regular maintenance to ensure safety, security, and sustainability.

Following these recommendations, international development practitioners can create more inclusive and effective WASH programs that address the barriers and intersectional challenges faced by women and youths with disabilities. This will not only enhance their health and dignity but will also contribute to the overall well-being and resilience of communities as well as the set indicators for achieving SDG 6.

Sources

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