



Sexual and  
Reproductive Health  
Working Group Gaza



**HEALTH  
CLUSTER**  
OCCUPIED PALESTINIAN TERRITORY



**WASH Cluster**  
State of Palestine



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## Silent Struggles: The Menstrual Hygiene Crisis in Gaza

May 2025

## BACKGROUND

In Gaza, nearly **700,000 women and girls of menstruating age** are facing a menstrual hygiene emergency amidst one of the most severe humanitarian crises in recent history. The destruction of infrastructure, mass displacement, and the limited access to sanitary products and WASH services have made it nearly impossible to manage menstruation safely and with dignity.

Since October 2023, over 70 per cent of all infrastructure in Gaza has been destroyed or partially damaged, including 92 per cent of housing units and 89 per cent of WASH sector assets. Water insecurity now affects 90 per cent of households, forcing families to make impossible choices between drinking, cooking, or washing. In overcrowded shelters, women and girls lack privacy, safe toilets, and

access to water, forcing them to adopt coping strategies that compromise both their safety and dignity.

Amid ongoing displacement and aid restrictions, managing menstruation is no longer a matter of discomfort but a daily struggle with serious health, protection, and psychological consequences. Menstruation has become a silent emergency. It is no longer a natural part of life—but a source of distress for hundreds of thousands of women and girls.



***“I forgot I’m even a woman during this war. I can’t remember the last time I took care of myself or had a comfortable shower. My body doesn’t feel like mine anymore.”*** —37-year-old woman, Gaza

## WHY MENSTRUAL HEALTH AND HYGIENE MATTERS IN EMERGENCIES

Menstrual management is not a secondary need in humanitarian crises. It is a matter of health, protection, dignity, and human rights. When women and girls are unable to manage their periods safely and privately, the consequences extend far beyond discomfort. Poor menstrual hygiene in emergencies increases the risk of reproductive and urinary tract infections, sexually transmitted infections, and long-term gynecological complications.



***“As a doctor specialising in sexual and reproductive health, I have borne witness to these immense and heartbreaking struggles... I know the misery of menstruating in such circumstances, when there are no sanitary products.”*** —MDM Doctor

In Gaza, where safe water, clean toilets, and hygiene supplies are scarce, menstruation become a source of deep psychological stress.

Many girls and women report feelings of shame, fear, and helplessness. Some avoid eating or drinking to limit the need for unsafe, overcrowded toilets. For adolescent girls who begin menstruating during the war, the lack of information, privacy, and support leads to extreme discomfort and challenges.



***“My period has become a nightmare. No water, no pads, no privacy of any kind. Every time my period comes, I wish I wasn’t a girl.”*** —Adolescent girl, Deir Al-Balah

Menstrual insecurity also increases exposure to gender-based violence, harassment, and exploitation. When basic supplies are unavailable, women and girls may be forced to rely on others or adopt unsafe coping mechanisms that place them at risk. Inadequate menstrual hygiene also limits their mobility and access to essential services, compounding their isolation and vulnerability.

## CURRENT GAPS

Access to menstrual hygiene products in Gaza has collapsed. An estimated **10.4 million sanitary pads are needed each month, yet over 75 per cent of this need remains unmet**. Since the closure of border crossings on 2 March, hygiene and protection supplies—including sanitary pads, dignity kits, and soap—have been blocked from entering Gaza. While aid convoys have recently resumed, they focus primarily on food and medical supplies, with no hygiene materials included.

Prices for the few remaining menstrual and hygiene products have soared—reaching up to five times their pre-war cost, placing them out of reach for most families. Meanwhile, the destruction of water and sanitation infrastructure has left women and girls unable to wash, clean, or safely dispose of menstrual materials.

More than one-third of households now receive less than 15 liters of water per person per day, while 75 per cent report that their water situation has further deteriorated. Nearly half (46 per cent) lack basic toilets, and 83 per cent face major challenges—such as lack of privacy, functionality, or hygiene—when using available facilities.

Severe shortages of clean clothing and undergarments—particularly among displaced populations—further hinder menstrual hygiene management and contribute to discomfort, insecurity, and loss of dignity.

With Gaza's waste disposal systems only partially functioning, many women and girls are forced to discard used materials in unsafe ways—such as open areas, makeshift shelters, or latrines not designed for solid waste—posing both environmental risks.



***“My period started while I was in a crowded shelter. I only had one pad, so I wrapped it with toilet paper to make it last. I couldn't wash, and the pain was horrible. I sat in silence crying until the day ended.”***

***—Young girl, Gaza city***

In the face of these conditions, women and girls have turned to coping strategies that compromise their dignity and well being. Many use old clothes, torn fabric, or sponges in place of sanitary pads. Without clean water, they cannot wash or reuse materials safely, increasing the risk of infection. Some report skipping meals or reducing fluid intake to avoid using unsafe toilets. In overcrowded shelters with no privacy, managing menstruation becomes a risk in itself.



***This is not just a supply gap—it is a full-scale crisis of health, dignity, and protection.***

© Suad El-Nawajha/ Women's Affairs Center, Gaza

# CONSEQUENCES OF INACTION

The inability to manage menstruation safely and with dignity has immediate and long-term consequences.

When menstrual needs are ignored, the price is paid in infections, trauma, and increased vulnerability.

Health risks are escalating. The use of improvised materials, combined with the lack of clean water and soap, has led to a rise in reproductive tract infections, skin conditions, and hygiene-related diseases. Health workers also report a surge in sexually transmitted infections (STIs), linked to poor hygiene and limited care.



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***“I used pieces of my old clothes instead of sanitary pads, and then I got infections.”***

*—A displaced woman from North of Gaza*

The psychological toll is equally profound. Girls describe menstruation as a source of shame, panic, and isolation. For many, it marks a time of deep anxiety and distress, particularly in displacement settings where privacy is nonexistent.

The lack of menstrual hygiene support is also driving girls out of safe spaces. Many are missing school in temporary learning centers, avoiding youth activities, and withdrawing from age-specific programming due to shame and discomfort. This deepens isolation, disrupts their learning, and cuts them off from essential protection and support services.

Menstrual insecurity also raises the risk of harassment and GBV. When women are forced to seek pads from strangers or access unsafe toilets, they are more vulnerable to exploitation. Risks are heightened for adolescent girls, women with disabilities, and those in overcrowded shelters.

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***“I had to cut one of my only shirts into small pieces so that my daughters could use them instead of sanitary pads.”*** —

*Displaced father in Nuseirat Camp*

***Inaction on menstrual hygiene is not just a failure of service delivery—it is a failure to protect health and dignity of all menstruating people***

If left unaddressed, the crisis will continue to erode women’s and girls’ agency, at a time when they are already among the most at risk.

# HOW WE ARE RESPONDING

Despite severe access constraints and ongoing supply chain disruptions, humanitarian actors have made important efforts to respond to the menstrual hygiene needs of women and girls in Gaza. Menstrual hygiene has been integrated into broader WASH, protection, and health interventions, though the scale and consistency of these efforts remain limited.

## Key response strategies have included:

- **Community dialogue and participation:** Women and girls have been engaged through ongoing community consultations to understand their needs, reduce stigma, and co-design culturally appropriate MHM solutions such as including long shirts or scarves in dignity kits and involving trusted female community leaders in awareness sessions. Local women and youth-led organizations, including peer educator networks such as Y-PEER, have been central to leading these efforts—facilitating outreach, awareness-raising, and the distribution of dignity kits in ways that are trusted and grounded in the community.
- **Distribution of menstrual hygiene supplies:** Several partners distributed dignity and hygiene kits containing sanitary pads, soap, underwear, and disposal bags. Some also explored sustainable menstrual products. Pads have also been prepositioned at SRHR services, and included in post-partum kits. However, distribution has often been irregular and constrained by access and supply challenges.
- **Safe and gender-sensitive sanitation facilities:** WASH partners worked with communities to design latrines that prioritized privacy, lighting, locks, and menstrual hygiene support, helping restore a sense of safety and dignity in some shelters.
- **Cash and voucher assistance:** Cash-based interventions enabled some women and girls to meet basic hygiene needs by purchasing items where available, offering a more flexible and dignified approach.
- **Safe spaces for women and girls:** Several safe spaces were established or adapted to provide multi-sectoral GBV services—including mental health and psychosocial support, GBV case management, and SRH education and referral to other services—offering an entry point for menstrual health support.



*“Food keeps us alive, but pads, soap, and privacy let us live with dignity. When we receive hygiene kits, it feels like someone finally sees us. They don’t just protect our health, they protect our dignity.” —42-year-old displaced woman, Khan Younis*

While these efforts provided critical relief, they have not met the overwhelming and growing needs. Sustained, coordinated, and expanded action is urgently required to ensure no woman or girl is left to manage her period in crisis without safety, dignity, or support.



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# OPPORTUNITIES FOR ACTION

The menstrual hygiene crisis in Gaza demands urgent, coordinated, and sustained action. Member States, humanitarian actors, and coordination bodies must prioritize menstrual hygiene management (MHM) as a core component of emergency response and recovery. The following actions offer concrete, scalable opportunities to restore dignity, protect health, and uphold the rights of women and girls:

- **Ensure privacy and adequate infrastructure:** In consultation with women and girls, design and maintain safe, private, and gender-sensitive WASH facilities. Toilets and bathing spaces must include locks, lighting, and support for washing, drying, and changing menstrual materials with dignity.
- **Provide consistent and culturally appropriate MHM supplies:** Distribute sanitary pads, soap, clean underwear, and disposal materials through hygiene and dignity kits, ensuring all women and girls can manage menstruation safely and hygienically, including postpartum care.
- **Offer targeted support for vulnerable groups:** Tailor interventions to meet the needs of female-headed households, adolescent girls, postpartum women, women and girls with disabilities, and GBV survivors, ensuring inclusive, accessible, and protective MHM services.
- **Integrate MHM into health, WASH, and protection services:** Systematically embed MHM into SRH programming, community outreach, mobile health teams, and GBV response services, ensuring it is not treated in isolation.
- **Expand cash and voucher assistance:** Support women and girls to access essential hygiene supplies through flexible cash-based programming, especially where market access remains possible.
- **Scale up safe spaces for women and girls:** Expand access to multi-sectoral services, including MHM education and supplies, through safe spaces that provide psychosocial support, GBV case management, and referral services.
- **Strengthen youth engagement and peer-led education:** Empower adolescents and youth through culturally sensitive SRHR education, peer-to-peer dialogue, and creative approaches such as theatre and digital platforms.
- **Embed mental health support into MHM response:** Address emotional trauma and stigma linked to poor menstrual conditions through integrated mental health support in youth hubs, safe spaces, and SRH services.
- **Leverage temporary learning spaces and community centers:** Use local spaces to introduce age-appropriate, culturally sensitive SRHR education and menstrual health literacy for girls and their caregivers.
- **Promote sustainable and localized solutions:** Support innovative approaches and ensure acceptability, comfort, and access to water and soap for safe use. Oxfam's recent pilot project in Gaza, implemented with local partners and supported by ELRHA, distributed reusable antimicrobial underwear and hygiene kits to over 5,000 women and girls. Post-distribution feedback showed 86 per cent used the products, 95 per cent reported reduced household expenses, and nearly all recipients recommended the solution. This model presents a scalable, environmentally friendly alternative in protracted crisis settings.
- **Support women-led organizations:** Strengthen the role of local women-led organizations in delivering culturally appropriate menstrual health education and services by providing direct funding, capacity support, and involvement in decision-making processes.
- **Collect and apply disaggregated MHM data:** Invest in ongoing data collection and community feedback to guide needs-based interventions, track gaps, and adapt programming over time.

# OUR APPEAL

No woman or girl should be forced to bleed in silence. Yet in Gaza, menstruation has become a source of pain, fear, and shame for nearly 700,000 women and girls—because basic hygiene needs are being unmet.

We call on **Israeli authorities** to immediately allow **unrestricted, safe, and sustained humanitarian access**, including the entry of **menstrual hygiene supplies**, fuel, and materials necessary to restore WASH infrastructure. The lack of access to Gaza of humanitarian goods, including sanitary pads and hygiene kits, is a violation of international humanitarian law and a direct assault on the health, dignity, and safety of women and girls.

We call on **member states and the international community** to act with urgency and resolve. Menstrual hygiene must not remain an invisible issue in funding priorities and diplomatic engagement. We urge:

- **Dedicated funding** for menstrual hygiene supplies, dignity kits, and gender-sensitive WASH facilities in Gaza.
- **Stronger political pressure** to lift the blockade and ensure aid—including hygiene items—can reach women and girls without delay.
- **Full integration of MHM** into protection, health, GBV, education, and WASH programming.
- **Support for local actors and innovation**, including sustainable solutions that offer dignity and long-term impact and all needed enabling conditions.

**Ignoring this crisis means accepting that dignity, safety, and health are optional for women and girls in Gaza. The world must refuse that choice.**



## Acknowledgment:

This advocacy brief was developed through a collaborative effort and informed by insights, field data, and inputs shared by partners working on the frontlines of the crisis. We extend our sincere appreciation to Médecins du Monde Suisse, Médecins du Monde France, UNRWA, UN Women, OXFAM, Social Development Forum, Save Youth Future Society, and Sharek Youth Forum for their valuable contributions.

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