



The charity for  
girls' equality

# PERIODS IN A PANDEMIC

## ONE YEAR ON IN 2021

HOW MENSTRUAL HEALTH HAS BEEN IMPACTED  
SINCE COVID-19 BEGUN





## INTRODUCTION:

On World Menstrual Hygiene Day in 2020, Plan International Australia released a groundbreaking report that revealed the extent the COVID-19 pandemic has impacted menstrual hygiene management (MHM) for girls, women and gender non-binary persons.

*Periods in a Pandemic* uncovered how COVID-19 and its secondary impacts have exacerbated period poverty – the struggle many low-income women and girls face while trying to afford menstrual products – and period stigma for people who menstruate, creating challenges such as product shortages, price hikes and heightened shame and stigma right across the globe, from India to Ethiopia.

Troublingly, our new 2021 report finds that the key challenges for people who menstruate have either worsened or stayed the same as they were this time last year. *Periods in a Pandemic: One Year On In 2021* looks at how the pandemic has impacted MHM more than a year since it began by interviewing WASH experts in the countries that Plan International works in.

Water, sanitation and hygiene (WASH) are the first line of defence against COVID-19. It's widely recognised that access to clean, running water and soap for handwashing is a critical need that must be met in our global response to the pandemic, however there are other essential aspects of WASH that should not be forgotten at this time.

On any single day during this health emergency, 800 million diverse women and girls\* are menstruating and grappling with the unique challenges of doing so in a global pandemic – and 500 million of those do not have sufficient, available facilities for their menstrual hygiene management.

Periods don't stop during a pandemic. For millions of people in the countries where Plan International operates, privately and safely managing menstruation and addressing the taboo and stigma associated with it is vital to ensuring their human rights, health and dignity.

The gendered impacts of COVID-19 are being seen all over the world. Holistic menstrual health and hygiene (MHH) includes having women and girls central to a global response that promotes equality and social inclusion.

While a handful of countries have emerged from the peak of the pandemic and restrictions have eased, many parts of the world including our nearest neighbours in the Asia and Pacific regions, are experiencing devastating second and third waves of COVID-19. Some are being hit hard by the virus for the first time.



## SHAHID, 15, LEBANON

“We are not going out at all, which is very hard. Only one family member is allowed to go outside to buy urgent needs, which is usually my father or my brother. Women, girls and children are not allowed to go anywhere. [So] it’s a big challenge to buy sanitary pads, I can’t go by myself to get them and I don’t have the money needed.”

The resurgence of COVID-19 is having a devastating impact on the most vulnerable communities. Curfews and lockdowns lead to loss of income and disruption to supply chains, making access to sanitary products significantly more difficult. Managing menstrual health is particularly challenging where there are shared toilet and bathroom facilities, especially in areas where COVID-19 is rife. Access to timely and accurate MHH information and guidance is limited when schools and community centres are closed. There is also a serious impact for people who menstruate who are at the frontlines of fighting the pandemic and caring for others.

*Periods in a Pandemic: One Year On In 2021* provides recommendations on how to include MHH within a COVID-19 response, and spotlights a new, successful pilot project in Indonesia that contributed to ease period poverty in many communities. The report also includes key learnings, after more than a year of COVID-19, on the benefit of online MHH education sessions – especially for boys – and the importance of building period education into all school curriculums.

And while many challenges are more acute, there have been some improvements to MHH: in some countries and communities, a greater overall focus on WASH has not only been crucial for the defense and response against COVID-19, it has also led to more attention on MHH – particularly in Pacific nations – while other experts noted that the pandemic had created more vigilance around good and habitual hygiene practices.

A Senior Program Officer in Japan noted that “There is an increased interest [in] MHH and poverty issue,” while a WASH Field Officer in the Solomon Islands said: “The hygiene message is stronger now than ever because of the pandemic – this indirectly raises awareness in sanitation and menstrual hygiene.”

“[It is crucial that governments around the world] provide more menstrual health and hygiene (MHH) information through radio/TV and ensure MHH supply chains are not disrupted. MHH products should become part of [all] emergency support packages.

WASH Senior Program Manager,  
Netherlands



## EXPERTS WORLDWIDE SPEAK OUT ABOUT COVID-19 AND MENSTRUAL HEALTH AND HYGIENE

To gain a deeper understanding of the specific problems COVID-19 has posed for managing menstrual health and hygiene over the last 12 months, Plan International conducted an online survey exclusively for professionals who work in the WASH and sexual reproductive health rights (SRHR) fields across the Plan International federation.

The online survey was live from 13 - 23 May 2021 and attracted 62 responses from professionals working in 22 countries.

- Australia
- Bangladesh
- Burkina Faso
- Cameroon
- Canada
- Ethiopia
- Indonesia
- Japan
- Kiribati
- Laos
- Mozambique
- Nepal
- Netherlands
- Papua New Guinea
- Philippines
- Solomon Islands
- Timor Leste
- Togo
- Uganda
- United States
- Vanuatu
- Vietnam

### **Out of those surveyed, the majority of countries have seen increased rates of COVID-19 (77%) in the last 12 months.**

The survey results demonstrated that after more than a year of COVID-19, WASH professionals and menstrual health specialists still, for the most part, have substantial concerns around how COVID-19 is impacting MHH. However, many respondents noted the significant efforts the WASH sector and governments around the world are taking to address these problems, which otherwise would be worse. Plan International Australia, alongside many other Australian international non-governmental organisations (INGOs), are working in close partnership with the Department of Foreign Affairs and Trade (DFAT) and our local partners to mobilise projects funded by the Australian NGO Cooperation Program (ANCP) and the Water for Women Fund to meet the life-saving health, water, sanitation, hygiene and child protection needs in the Indo-Pacific region. This vital partnership between INGOs and the Australian Government has brought significant strengths to the global fight against COVID-19.

# KEY FINDINGS: HOW PERIODS HAVE BEEN MOST IMPACTED A YEAR SINCE THE PANDEMIC BROKE OUT

In relation to MHH, WASH professionals in 22 countries have reported that in the last year since Plan International Australia's first *Periods in a Pandemic* survey, COVID-19 has worsened the biggest challenges for people who menstruate in the following ways:

## **1** COVID-19 lockdowns have created problems in accessing accurate and comprehensive information and support around menstrual health and hygiene

In 2020, the scale of global school closures was unprecedented. It is estimated that up to 20 million secondary school-aged girls were pushed out of school as a result of the pandemic and that they may never return to the classroom if world leaders don't step up and invest in education that responds to the needs and rights of girls<sup>1</sup>. With significant disruptions to schooling leading to long term school closures and remote learning, the immediate connections that adolescent girls have with their teachers, schools, friends, health workers and family networks are absent, which can result in girls having limited information on their first period. This is particularly heightened in areas where young people have limited to no access to online resources.

Health and community centres are important access points for women and girls to access information on MHM and their sexual and reproductive health. The pandemic has led to a closure of these services or seen them re-directed to COVID-19 response. Additionally, schools that have curriculums and programs around MHM may not have incorporated this into learning materials for children studying at home. Without access to accurate and timely information on menstruation and reproductive health, adolescent girls are also at a higher risk of sexually transmitted disease and early and unplanned pregnancy.

**In May 2020, 54%\* of WASH professionals agreed the pandemic had led to a lack of access to information about menstrual hygiene management. One year later that percentage had increased to 59%, highlighting in particular the impact COVID-19 had on people who had menstruated for the first time.**

"...Usually the girl who get her first time menstruate will try to find information from their friends. Menstruation is still taboo to discuss for many families in Indonesia"

**WASH Program manager, Indonesia**

"Due to school closures, children mostly stayed at home. We had to modify our face-to-face peer educator [children] sessions to an online campaign using social media."

**WASH and Early Childhood (ECD) Advisor, Indonesia**

"No adequate and right information reaches girls when studying from home. MHM is not a school priority"

**WASH Project Manager, Indonesia**

"Due to COVID-19 emergence in PNG, focus has been placed on WASH programs in institutions and communities hence information on MHM has been greatly made accessible and available to most women in the country."

**WASH Officer, Papua New Guinea**

"Our project mostly used schools as an outlet for sell for sanitary products."

**WASH Country Program Lead, Ethiopia**

"The resource persons empowered with adolescents friendly information (Teachers, School Health Clubs) are still under lock down as schools are partially closed affecting access to information. The few VHTs trained get overwhelmed to support girls in communities."

**WASH National Program Manager, Uganda**

"Schools are a key place where young people learn about various health issues, often for the first time, including MHH. With the school closures, there are many who have missed out on receiving this info in past year due to the pandemic."

**WASH Advisor, Canada**

\*N=44 (28 survey takers skipped the multiple choice questions)

## 2

### COVID-19 lockdowns, border closures and supply disruptions have limited access to menstrual products

When the pandemic broke out in 2020, global supply chains were disrupted, many smaller scale private sector enterprises ceased trading and deliveries of goods slowed down, particularly in remote areas. This had the knock-on effect of WASH and menstrual health products such as pads and soap becoming a scarce resource.

A year on, access and distribution of period products appears to have improved as some countries have eased restrictions. However, many others are experiencing devastating second and third waves of the virus. With shops and markets remaining closed and restrictions on movement due to lockdowns put in place, sourcing goods is still proving challenging. School closures have further compounded the issue: in many countries that Plan International works in, schools are an important avenue of distribution of menstrual health products and information.

People may avoid going to local markets or supermarkets to obtain essential supplies in fear of exposure to COVID-19 in public places. When sanitary products are hard to obtain, people may be forced to resort to using unhygienic alternatives that can increase their risk of reproductive and urinary tract infections. This lack of access to safe sanitary products during COVID-19 poses a real threat to people's health and safety .

Additionally, in the last 12 months many regions have been hit by the 'double whammy' of COVID-19 and natural disasters, which have increasingly been more intensified and frequent due to climate variability. From tropical cyclone Harold, which pummeled Pacific nations in early 2020, to the floods and landslides that hit Vietnam and Indonesia in late 2020 and more recently, the deadly storms that have battered India. This makes the distribution of sanitary products even more challenging.

**Three quarters (73%) of WASH professionals said access and distribution of menstrual products has been hampered by COVID-19 when the virus first broke out in early 2020. One year later, it appears that concerns have fallen and supply chains have improved, with 52% saying they had faced more challenges distributing and supplying products such as pads and soap to target groups since this time last year.**

“It was more challenging for the first few months of the pandemic, then it has become less challenging”  
**WASH & ECD Advisor, Indonesia**

“In September and October 2020, Vietnam was faced with severe floods in central regions. At that time, distributing sanitary health products was very challenging”  
**Influencing & Communications Manager, Vietnam**

“The challenges are enormous as the economic situation of families is degrading, it is difficult to have enough soap to wash and wash your sanitary napkins, because even if we could not buy them at the market, we made do with the rags of our moms but we need soap to wash them cleanly.”  
**Program Coordinator, Togo**

“Many charities that we work with had no choice but to close their doors therefore women were not able to access the normal way they would access sanitary items.”

Managing Director,  
Australia



“Currently my team produces reusable pads and by working with our partner organisation, we are able to supply and distribute without a lot of challenges as experienced in previous years. Collaborations has been a powerful tool that ease-off the challenges experienced previously.”  
**Director, Solomon Islands**

“In the first six months of 2020, there were government restrictions on movements of people and goods. This disrupted the supply chain. However the sanctions on movements have been lifted leading to less challenges”  
**WASH National Program Manager, Uganda**

“The closing of schools has made providing this kind of material support to girls more difficult.”  
**WASH Advisor, Canada**



## COUNTRY SPOTLIGHT: INDONESIA

With more than 1.7 million confirmed COVID-19 cases and 49,000 deaths, Indonesia is the worst-hit country in Southeast Asia, stuck in an endless wave of the pandemic since it recorded its first case in March 2020.

With a population of 270 million spread across a vast archipelago of 17,000 islands, the virus has brought heightened challenges to remote and difficult to reach regions in particular. Many of the communities Plan International work with have faced significant trouble accessing critical medical treatment, COVID-19 testing, along with water and food supplies, internet, and emergency and sanitary products. Children and girls in these areas have had little access to schooling, and are missing out on vital SRHR and MHM information and assistance.

Hampering COVID-19 relief efforts in Indonesia even further – the country has experienced more frequent and intense climate related disasters. In the first three weeks of 2021 alone, there were a staggering 185 fatal floods, hurricanes, landslides and other natural disasters.

“Over the past few months it still remains difficult to get out to our programs in Eastern Indonesia, due to COVID-19 and most recently the cyclone that ripped through the region. Our teams there are facing lockdowns but now, many also have had their homes destroyed and can’t access water. It is devastating,” said Silvia Devina, WASH and ECD Advisor in Indonesia.

In response to the pandemic and these disasters, Plan International pivoted its face-to-face MHM interventions within its Water for Women Funded project, creating smaller, online peer MHM education sessions for students to be able to take back to schools once they reopened, “investing in these students’ agency and understanding of MHM first so that they could have the capacity and knowledge to share with their peers once school begins,” said Devina.

These smaller, virtual education sessions of four students, both boys and girls, perhaps allowed students to feel more comfortable discussing the issues around menstrual health, a taboo topic in many traditional Indonesian communities. “We observed they were very engaged and asking more questions, especially the boys, so in some ways COVID-19 has taught us too – we will look at this model going forward,” noted Silvia Landa, WASH Project Manager for Plan International’s Water for Women funded project in Indonesia.

In October 2020, Plan International commenced a three-month pilot partnership with Modibodi reusable menstrual underwear, providing 1,000 pairs (approximately three pairs each) of reusable underwear to 333 girls and women (including women with disabilities), alongside MHH educational messaging.

After the three-month pilot, almost all women and girls survey respondents (99%) said they will continue to use the Modibodi product. Overall, over 74% of respondents said they felt more confident managing their monthly menstruation due to the growing trust in using the reusable menstrual products compared to the start of the pilot. Prior to the pilot, no participants had tried any reusable menstrual underwear before. The pilot found that 47% of women and girls were using the Modibodi products on average for four to five hours during their menstruation prior to changing. By using the reusable underwear, it also reduced the amount of disposable sanitation products going to landfill (disposable pads can take over 500 years to biodegrade).<sup>2</sup>

“I think this is a really excellent solution to the challenges that disasters and pandemics have brought to MHM,” said Devina.

“The pilot has shown that reusable menstrual pants are a good solution and could make a real difference to period poverty in Indonesia... these girls and women feel safe knowing they can manage their period for some time until the supply chain is back in order,” added Landa.

# YALEN, 18, INDONESIA

“Occasionally, I managed to buy pads from the market using money my mother gave me. Without pads, I have to stay away from school for four days. When the government told us to stay at home to avoid the coronavirus, I was worried since the markets and local stores were closed as well as school. Normally people think of food or clothing, but menstrual hygiene products are too often neglected. People may forget that these products are a necessity for girls like me. I do not have the money to buy pads or soap so I have to rely on my mother. It must be hard for her to get money during this difficult time. It’s also uncomfortable to talk about it. I feel embarrassed to ask for pads from girls who live nearby.”



## 3 COVID-19 lockdowns and more crowded homes have led to a lack of privacy for people who menstruate, which has exacerbated stigma and shame for some

For people who live in households with several family members, it can be challenging to find adequate space and privacy to change menstrual products, clean one’s self hygienically (including washing menstrual blood), and to clean and/or dispose of menstrual products after use. This is especially so during heavy flow days when people who menstruate need to do this several times a day. Further, some can feel they need to hide signs of their menstruation from sight of other family members (e.g. washing clothes with blood stains) due to social norms, myths and stigma around menstrual blood, despite this being a normal body function. During COVID-19, and in particular during lockdown, this stigma was exacerbating the privacy challenges for people who menstruate.

Almost half (45%) of respondents said privacy was a significant issue since the same time last year, caused by widespread lockdowns and school closures that meant people were living in more confined spaces and cramped conditions with more people.

“Some households still lack information and compromise the proper management of menstrual hygiene for girls”

**WASH Officer, Togo**

“Yes, most of their family members stays around and they feel uncomfortable to move around or might having to access to a water to clean themselves is an issue without any member in family sighting them.”

**WASH Officer, Solomon Islands**

“Mostly for urban poor and slum people the problem is higher.”

**WASH Specialist, Bangladesh**

“During the total lockdown when access [to project areas to provide information and hygiene kits to girls] was a challenge because of restrictions”

**WASH Project Coordinator, Uganda**

# 4

## Increased/inflated price of sanitary products

Alongside the issues of global supply chains, in May 2020 people who menstruate and WASH professionals reported an increase in the price of sanitary products. One year on – when many countries have faced extended and stricter lockdowns – 41% said products had remained inflated. In part, the increase in prices can be attributed to limited supplies of sanitary products, but survey participants also suggest that in some areas, prices have been opportunistically inflated. With the pandemic significantly affecting livelihoods and household incomes, it is harder now for people, including adolescent girls, to afford to buy sanitary products than before the COVID-19 pandemic began, even when products are available.

Almost 60% of WASH professionals said they had observed price gouging and hikes of period products when the pandemic broke out last year. One year on, 41% said sanitary products had become even more expensive, while 55% said they had remained the same while 4% said they were now less expensive.

# 5

## COVID-19 disruptions have created a less hygienic environment for disposal of products and waste management

The disposal of menstrual products has become more difficult. Without access to rubbish disposal systems, people often burn or bury pads some distance from home.

Due to restrictions of movement this may not be possible and can increase the risk of environmental contamination and increase risks of disease transmission. Additionally, the embarrassment and stigma of soiled sanitary products being found close to or in homes reduces the likelihood that people will use safe and hygienic menstrual products.

However, in some countries COVID-19 has led to an increase in government and WASH sector efforts and investment in creating more sustainable waste management solutions such as reusable period underwear and pads, leading to a more hygienic environment.

In May 2020, 47% said they had encountered a less hygienic environment for menstrual product disposal. One year on, 32% said the environment had become even less hygienic, while 45% said it had remained the same and 23% said that they had actually witnessed a more hygienic environment.

“We have seen a 30% increase on the average usage of our Dignity Vending Machines [free period products] in 2021.”

**Share the Dignity Founder, Australia**

“In general, during the pandemic prices for many basic domestic items everywhere have gone up and sanitary products are no exception.”

**WASH Advisor, Canada**

“Affordability became a challenge because most people were thrown out of employment as a result of the pandemic. So the purchasing power is weakened.”

**WASH Project Coordinator, Uganda**

“With the increase in demand and limited availability in the market, suppliers have increased prices.”

**WASH Coordinator, Mozambique**

“No observed changes in prices”

**WASH Project Manager, Solomon Islands**

“A little more expensive because of the border closure and the quarantine”

**WASH Advisor, Burkina Faso**



“For the first few months less wastewater pick-ups in happening in many areas.”

**WASH and ECD Manager, Indonesia**

“In city, collection of garbage is still ongoing well”

**Program Manager, Vietnam**

“There are two big WASH projects that support the community to produce reusable sanitary pads and that products are well accepted.”

**Child Development and Protection Program Manager, Indonesia**

# 6

## Access to clean water to maintain good menstrual health is still a problem for many communities

Access to clean and reliable water is essential for managing menstruation safely and hygienically. For people who were already facing difficulties with reliable supply of water, this may have become more profound during COVID-19. Most WASH professionals surveyed said the situation had not worsened since this time last year, although almost a third said there was even less access to water for some communities. The pandemic has placed restrictions on movement which pose challenges, particularly for women and girls, who are often responsible for collecting household water, walking considerable distances to do so.

Approximately one-third of the global population lives in water-stressed areas where water is frequently rationed. With COVID-19 intensifying household water needs in water scarce environments and with lockdown reducing access to water, women and girls may not prioritise water for their menstruation needs. Similarly, they may be unable to access a toilet that is in another household or is shared with others due to the risks of contracting COVID-19. Still, almost a fifth (18%) of WASH professionals had witnessed or contributed to an improvement in water supplies in some communities, noting free water initiatives and greater access.

In a time of scarce resources, basic items such as soap may also be difficult to find or may be rationed for handwashing. For those people in refugee and internally displaced camps, this lack of access is even more acutely felt.

**In May 2020, 51% agreed there had been less access and availability of clean water due to COVID-19. One year on, more than half (55%) said it was the same as this time last year, and 27% said access to and availability of water had become more tricky over the last 12 months.**

“Yes, it was very difficult in the cities as in the villages. Not everyone has access to drinking water, you have to get up early to queue around a borehole or a well to get water, these practices are very common in our communities where failing people continue to drink river water and more good reason to have clean water to wash your underwear”

**Program Coordinator, Togo**

“Water had become free for 6 months”

**WASH Coordinator, Togo**

“I am not sure. Water access has been increased due to COVID-19 concern, [but] there is no guarantee it will be used for MHM”

**WASH Project Manager, Indonesia**

“The existing water sources are overstretched as more people are home and the demand for water increased. This makes it difficult to practice effective MHM.”

**WASH National Program Manager, Uganda**

“During the emergency state due to COVID-19, based on my observation community has more difficult to access to clean water to practice good menstrual practice”

**Program Manager, Timor Leste**

## MANJU, NEPAL

“Menstruation does not stop during a pandemic situation. Girls are facing a situation where they lack sanitary pads because markets and shops are closed. It is difficult to manage menstruation if there is little access to water, soap and sanitary pads. Therefore, such necessities should be available for all girls, especially in rural areas. This should be a part of any relief package and available to girls having to quarantine.”



## 7

**Stigma, shaming or harmful cultural practices associated with menstruation have become more profound**

In areas where menstruation is considered impure, people who menstruate are often systematically excluded from daily activities and discriminated against. The discrimination for those who face intersecting issues such as being transgender, non-binary, intersex and a-gender is even greater.

Additionally, if a person is suspected of having or has been diagnosed with COVID-19 that stigma is even further entrenched. The deep shame and stigmatisation that may be felt at this time poses a serious risk to access to essential services and scarce resources for people who menstruate, as well as for their mental health and well-being.

This lack of knowledge alongside the stigma and taboo concerning menstruation increases girls' feelings of shame, embarrassment and discomfort which can lead to increasingly poor mental health outcomes.

“In mountainous and remote areas, people still have stigma associated with menstruation such as shame, sin, dirt. Girls and women during menstruation are not allow to pick the fruit and to stay at the house. During lock down time, women and girls spend more time at home and of course these stigma become more serious.”

**Influencing Manager, Vietnam**

“With the closure of schools the girls have limited counselling services and once they soil their dresses' they are subjected to a dose of laughter by the boys and men”

**WASH National Program Manager, Uganda**

**In May 2020, 24% of WASH professionals said there had been an increase in period shaming and stigma as a result of the pandemic. A year on, 23% said stigma, shaming and harmful cultural practices had become further entrenched since May 2020, 18% had seen a decrease and 59% had seen neither.**



# RECOMMENDATIONS

This report acknowledges the efforts of multiple actors across the globe that contributed to the COVID-19 response, and these recommendations are largely to reinforce that more continued and holistic efforts to MHH are needed, and to build on the gains that have been made including:

## **Governments must continue to invest in inclusive water, sanitation and hygiene services and facilities, and their ongoing use.**

One of the most effective strategies to support people's access to good menstrual health, especially in resource-constrained settings, is investing in core public health infrastructure, including inclusive water and sanitation systems. Good WASH and waste management practices, consistently applied in households, communities, health centres, institutions and public spaces, are essential, not only as the first line of defence in preventing the spread of COVID-19 but also in promoting the health and dignity of women and adolescent girls during the pandemic and into the future as countries focus on recovery efforts.

## **Start – or continue – to build MHH into COVID-19 health responses.**

Ensuring that MHH is part of every government's emergency health response during the COVID 19 pandemic is crucial. This includes information on menstruation distributed as part of a package of health information, broader health messaging campaigns that address the period stigma and working closely with ministries of health and education (and other development actors) to ensure that MHH is built into recovery and longer-term responses (such as policies and budget). Finding ways to adapt and continue monitoring, evaluating and learning (MEL) during COVID-19 times is also important to build the evidence-base for influence and improving MHH implementation, as well as for accountability.

The supply of menstrual products can be improved by supporting local small business and microenterprises to meet demand and reduce the reliance on global supply chains, and considering reusable, rather than disposable, sanitary products such as reusable menstrual underwear (example provided in Country Spotlight: Indonesia).

## **Start – or continue – to include MHH in remote learning curriculums.**

With so many children out of school at this time, integrating MHH into remote and online learning curriculums is an important way of ensuring that people, including girls have the knowledge that they need on their first period and safely manage their menstrual health during this time. Donors and other development actors that are working with Ministries of Education and other relevant Ministries can build this into their response.

## **Continue to apply a strong inclusive and participatory lens in the COVID-19 response.**

In order to meet the needs of the most marginalised people, such as adolescent girls, those living with a disability, those who identify in a sexual and gender minority, or those who live in conflict settings and refugee and internally displaced person camps, must be part of COVID-19 planning and response. Importantly, a good MHH response is one that is part of a wider gender equality and socially inclusive response that seeks to not only tackle the practical barriers (e.g. access to water for all), but one that also contributes to tackling strategic barriers (i.e. those that address discriminatory power relations, such as women's meaningful decision making in households and communities). Doing so, enables development interventions to shift from just a momentary response to COVID-19, to supporting the transformation of the lives of the most marginalised.

## ABOUT PLAN INTERNATIONAL AUSTRALIA

Put simply, we're the charity for girls' equality. We tackle the root causes of poverty, support communities through crisis, campaign for gender equality, and help governments do what's right for children and particularly for girls. We believe a better world is possible. An equal world; a world where all children can live happy and healthy lives, and where girls can take their rightful place as equals.

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## ENDNOTES

- 1 <https://malala.org/newsroom/archive/malala-fund-releases-report-girls-education-covid-19>
- 2 <https://www.modibodi.com/pages/sustainability>



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