



A young girl collecting water in Gaza © GAGE 2026

Young people's access to water, sanitation and hygiene (WASH) during the war on Gaza: longitudinal evidence from GAGE

Joost Vintges, Bassam Abu Hamad, Stella Leung, Riyad Diab and Nicola Jones

Introduction

Since the Hamas attack of 7 October 2023, Israel has carried out actions that amount to genocide. It has systematically destroyed the Gaza Strip, killed tens-of-thousands of people, and deliberately deprived Gaza's population of life-saving humanitarian aid (Amnesty International, 2024; Asem, 2025; B'Tselem, 2025; Forensic Architecture, 2025; HRW, 2024; UN, 2025). Given the unprecedented level of violence, an often-overlooked dimension of the conflict is its impact on WASH services, which has been especially profound in Gaza, where communities were already facing major water and WASH challenges before October 7 with 96% of its water deemed undrinkable (UNICEF, 2023). While the 'ceasefire' in place since October 10, 2025, has brought some relief to young people in Gaza, humanitarian aid continues to be obstructed, and hundreds of Palestinians have been killed because of Israeli hostilities (OHCHR, 2026).

This brief explores the impacts of the destruction of WASH services on young people amidst the war on Gaza so as to inform the post-ceasefire humanitarian response, paying particular attention to the impacts of the destruction of Gaza's water infrastructure, WASH facilities, and blockade of fresh water entering the Strip (Forensic Architecture, 2025; HRW, 2024; UN, 2025). It draws on two rounds of data collection (2024, 2025) with over 1000 young people undertaken by the Gender and Adolescence: Global Evidence (GAGE) longitudinal research programme. The brief concludes by discussing implications for the post-ceasefire humanitarian response.

Suggested citation: Vintges, J., E., Abu Hamad, B., Leung, S., Diab, R. and Jones, N. (2026) 'Young people's access to water, sanitation and hygiene (WASH) during the war on Gaza: longitudinal evidence from GAGE'. Policy brief. London: Gender and Adolescence: Global Evidence

Methods

The brief is based on longitudinal mixed-methods data collected in August to September 2024 (Round 1) and October and November 2025 (Round 2), to assess young people's experiences and perceptions of the conflict and to show changes over time. The research sample was proportionately sampled across all five governorates of Gaza: Rafah; North of Gaza; Gaza; Khan Younis; Middle Area. In Round 1, we collected data with 1,011 young people (526 females and 485 males aged 10–24 years). For Round 2, we surveyed 1,380 young people (543 male and 837 female) (Annexes: Table 1). We were able to reach 81% of the original sample and applied the same sampling selection approach to select replacements; the remainder did not participate (199), for a range of reasons: their phone was not working (159), they were beyond the age limit (9), killed (9) or travelled (5). In order to better understand the challenges facing some of the most disadvantaged young people, we purposely oversampled married girls and young women, young people with disabilities, and for Round 2, added an additional sample of orphaned children to reflect the experiences of the many newly orphaned young people in Gaza as a result of the war (Annexes: Table 1). Although this brief primarily focuses on data from Round 2 ($n = 1,380$), changes over time are examined using the panel of young people who took part in both rounds ($n = 812$) (Annexes: Table 2). This data is presented in Box 2, page 7.

Applying a sequenced mixed-methods approach, qualitative data for Round 1 was collected after the survey, in November-December 2024, with 100 young people (56 females and 44 males). The team also conducted 24 key informant interviews with service providers and community leaders. Round 2 interviews included in-depth individual interviews (IDIs) with 86 young people (44 females and 42 males), 10 focus group discussions (81 young people), 30 IDIs with caregivers (20 mothers and 10 fathers), and 24 key informant interviews with service providers and community leaders. The qualitative pool was selected from the larger quantitative sample, again deliberately oversampling the most disadvantaged individuals in order to capture the voices of those at risk of being 'left behind'. The tables below provide more details about the qualitative sample.

Ethical clearance for the research was granted by the Helsinki Committee (PHRC/HC/1245/24), the Gaza Ministry of Health and Ministry of Education, and the ODI Global Ethics Committee (ODI R025002). All procedures strictly followed international ethical guidelines, including the principles of informed consent, privacy, confidentiality, and voluntary participation. Written consent was obtained from participants aged 18 years and above, while those under 18 provided verbal assent in addition to consent from their caregivers.



A young girl in Gaza © GAGE 2026

Findings

Water

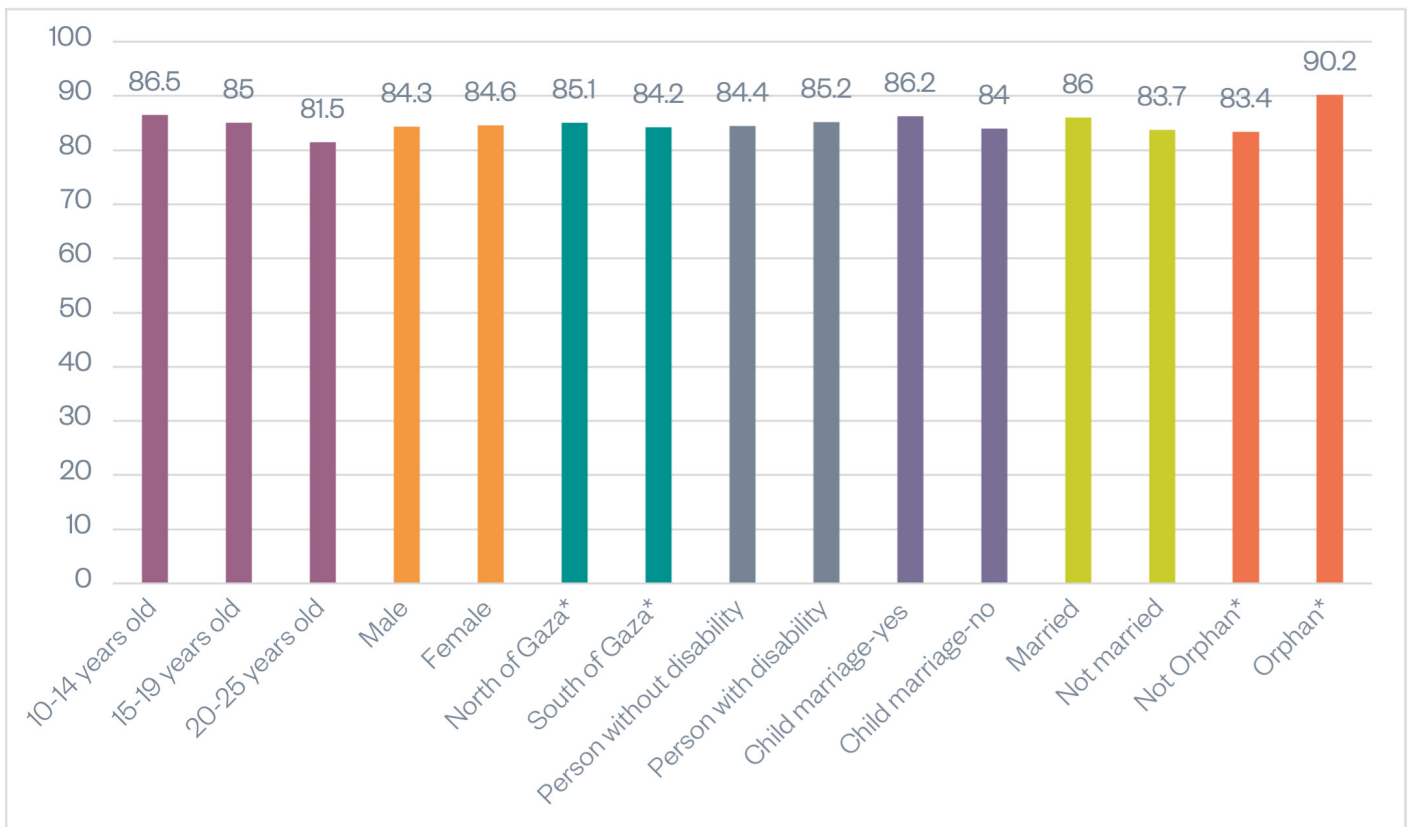
Water insecurity

Overall levels of water insecurity were very high, especially among those who were orphaned, and young people highlighted that the lack of potable water was a major source of concern to them.

- 84.5% scored high on the Household Water InSecurity Experiences (HWISE) scale (5–24) (Young et al., 2019).
- 60.1% reported that, in the past 30 days, they worried at least three times about whether their household would have enough water, including 20.4% who worried more than ten times.
- 50.9% reported that they or a family member drank unsafe water at least three times in the past 30 days, including 15.4% who did so more than ten times.
- Water insecurity is more pronounced among orphaned children (90.2%) and young people in the North of Gaza (85.1%) (see figure 1).

Qualitative accounts echo the findings of the survey. An 18-year-old pregnant woman from the North recalled an acute water crisis, 'There was no fresh water. I was begging everyone... My throat was so dry... I was dying of thirst.' A 24-year-old woman with a disability explained that 'water completely ran out, and life stopped – no people, no water, and no places to buy from.' Households were forced to conserve water; a 16-year-old girl with a disability reported: 'Each one of us would drink a small quantity, just a glass.' These accounts illustrate how the Israeli imposed blockade and destruction of water infrastructure eroded physical health, dignity, and basic survival for Gaza's young people.

Figure 1: Households that experienced high level of water insecurity (5–25 points) on the HWISE scale in Round 2



The percentages above are based on the full sample of young people (n=1,380); categories noted with an asterisk (*) demonstrated statistically significant differences at the 0.05 level.

Box 1: The experiences of young people with disabilities and orphaned youth

The findings highlight the specific experiences of young people with disabilities and orphaned youth. Orphaned young people experienced more severe water insecurity than their peers. Adolescent girls and young women with disabilities were more likely to lack access to menstrual pads, underscoring their heightened vulnerability in meeting basic hygiene needs. For example, a 17-year-old girl with a physical disability and bladder condition struggled with standing in queue: *'because of my condition, I can't stand for a long time, so I might let my sisters wait for me and take a turn for me.'* Since the war began, she had to start wearing diapers: *'when I feel fear, my stomach starts hurting a lot, so I have to use them.'* However, due to the Israeli siege, diapers are scarce and highly priced, so she and her family cut diapers (that were too large) in half or started using pads. In addition, they washed them so they could be reused *'with great difficulty... we had no other option,'* illustrating the extreme coping strategies required to manage her basic hygiene.

Sources of water

Young people and their households reported primarily relying on potable drinking water provided through humanitarian assistance, with some facing risks of violence while collecting water.

- Respondents reported that during the past month, the primary sources of drinking water were free tank deliveries (68.7%) and paid tank deliveries (24.4%).
- More than half (51.7%) reported that it takes them more than 30 minutes to collect potable water and return home, including 18.3% for whom the trip takes more than two hours. Males and those in the North of Gaza report spending more time getting water.
- Over a quarter (25.6%) reported experiencing violence in the queues for water.
- The majority (93%) reported relying on potable water sources in the street, with only 4.3% having a potable water source in the household.
- The majority (74.6%) reported relying on public or shared water sources (in the street, from neighbours, or at mosques) for hygiene.
- 84.5% had received water as part of humanitarian assistance, and the overwhelming majority (99.8%) perceived this support as essential.
- Over two-thirds (68.2%) reported receiving water through non-governmental organisations (NGOs), community-based organisations (CBOs), or religious institutions, followed by international humanitarian organisations (UNICEF and WFP) (22%).

Because of the lack of potable water sources, young people report using bathroom water, sea water and rainwater for drinking. A pregnant 18-year-old described her feelings when drinking bathroom water: *'I'm disgusted to drink from the bathroom, but I had to... Bottled water was too expensive...'* resulting in *'vomiting and diarrhoea'*. A 22-year-old man described drinking improvised mixtures of seawater and tomato paste *'to moisten my saliva,'* despite vomiting and feeling *'exhausted... internally,'* simply *'to stay alive.'* In addition to the lack of potable water, several young people also reported that supposedly potable water was often

contaminated: *'sometimes the water was unsafe... there were algae in it'* (24-year-old woman). A 16-year-old girl added: *'sometimes it would come with worms in it.'*

Young people described the difficulty in accessing water, including having to walk long distances, waiting in lengthy queues, and physical strain carrying the water back to their dwelling. One boy explained that *'fetching water was extremely difficult'* while a 19-year-old girl in the South recalled having to *'walk for 100 meters... wait for the water truck to arrive or whether it will arrive or not... to fill 2-3 buckets... a lot of trouble,'* and sometimes surviving *'for a week'* only on carefully rationed rainwater. In the North, an 18-year-old pregnant woman described standing *'half an hour'* in line in her eighth month and carrying *'a jerrycan and a water skin'* of about 20 litres each because her injured husband could not help, praying she will not have a *'miscarriage'*. Although boys were often the ones sent to fetch water, girls and young women reported also frequently having to stand in long water queues which runs counter to prevailing conservative gender norms.

WASH facilities and products

Access to toilets and bathing facilities remained a challenge for many young people post-ceasefire due to overcrowding and a dearth of gender-segregated facilities.

Toilets

- 1 in 10 young people reported not having a designated space for a toilet in the household.
- 71.4% reported having access to a traditional toilet in the household; the remainder were using primitive solutions (23.6%), a bucket (1.7%), or had no toilet at all (3.4%).
- The mean number of reported persons per toilet was 18.5, with higher numbers among people in the North (27). Almost all toilet facilities (98.3%) were not gender segregated.
- Half (50.9%) share their toilet with other households. Females (55.8%), participants in the North (55.6%), and married participants (61.8%) were more likely to share toilet facilities with other households than other young people.

Shower/bath

- One third (33%) reported not having a designated place for bathing or showering in their household. Access to such facilities was particularly limited among those who were married (39.7%), living in tents (39.2%), residing in the South of Gaza (34.5%), and those who were not orphaned (36.2%).
- Almost three-quarters (73.3%) reported frequently lacking access to shampoo, including 27.1% who reported that shampoo is never available.
- More than half 55.9% reported frequently lacking access to toothpaste, including over a quarter (27.2%) who reported that toothpaste is never available.

Young people's accounts show how overcrowded, non-segregated facilities and lack of hygiene supplies turned basic hygiene needs into a source of fear, shame, and ill-health. Girls reported going a month without soap, washing *'with just water'* or even *'with sand'*, and bathing with dishwashing liquid because shampoo cost up to 120 shekels (approximately USD39).

A 16-year-old girl in the North described long lines of *'70 people'* for the bathroom where it was *'very crowded'*, and *'we could hear the boys when they entered, and see them, and they could see us'*. Moreover, the bathrooms were *'always dirty'*. Another 24-year-old woman living in a tented camp reported that shared toilets for *'men and women'* offered *'no cleanliness, no privacy'*, leaving her so afraid to go at night that she *'stayed from 3:00 AM until 7:00 AM needing to go... from holding it in.'* Girls repeatedly linked mixed, public toilets with feeling *'afraid to use these bathrooms (17-year-old girl)'*, while a 12-year-old boy recalled waiting an hour to use a single, unclean toilet shared by *'everyone at school.'*

Menstrual hygiene management

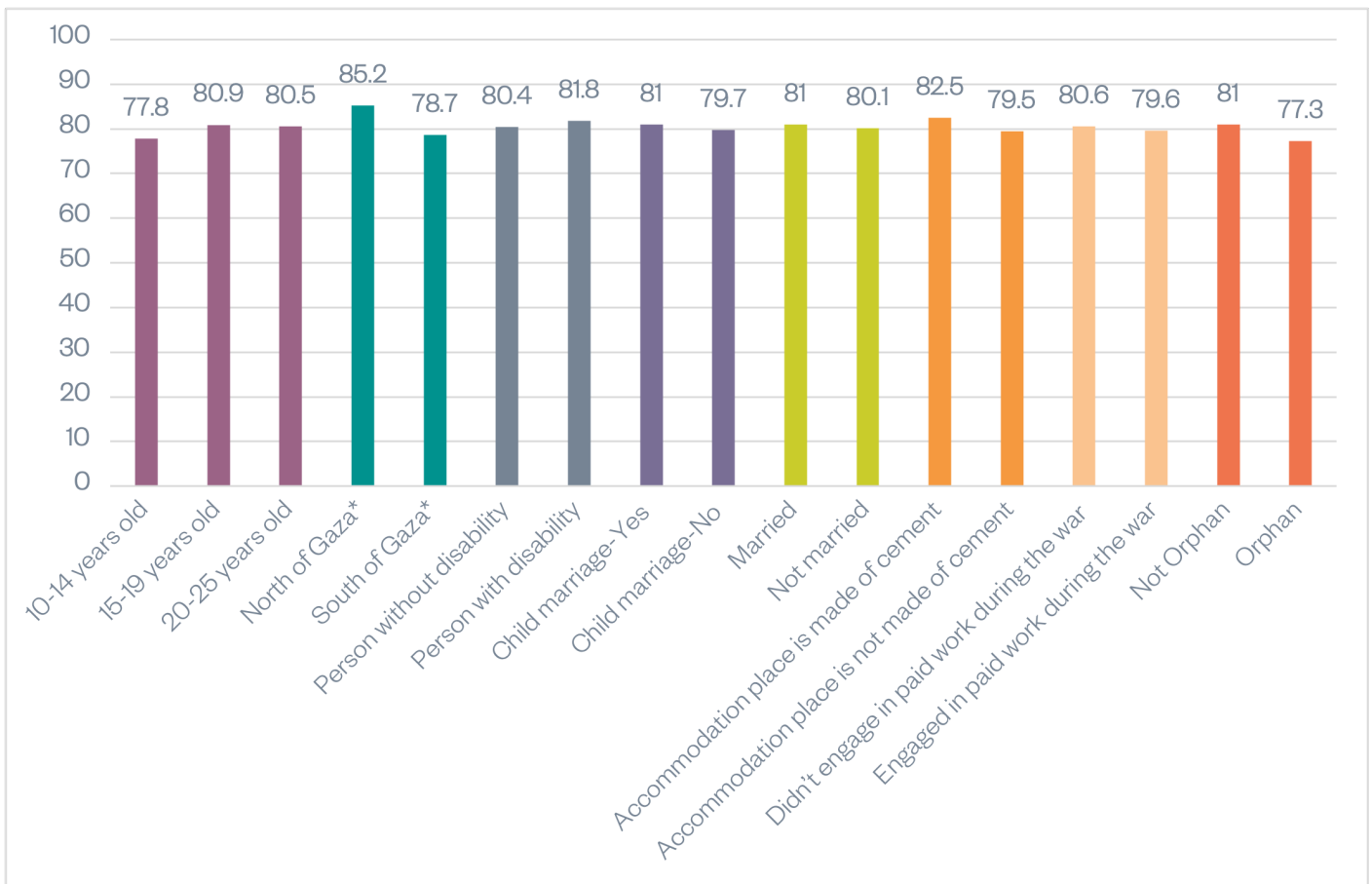
Girls and women emphasised that access to menstrual hygiene facilities and supplies was difficult due to household financial constraints, a dearth of water/soap and toilets lacking privacy, with girls with disabilities and married girls at heightened disadvantage.

- Four fifths of females (80.6%) reported difficulties obtaining menstrual hygiene supplies and commodities since the start of the war, mainly due to financial constraints (83.4%), lack of availability on the market (38.4%), and insufficient support to purchase them (16.1%). Girls and young women in the North of Gaza reported more difficulty obtaining menstrual hygiene supplies and commodities. (see Figure 2)
- More than half of young females (58.1%) reported that menstrual pads are often not available, with higher numbers (69.6%) among girls with disabilities.

- Problems that girls and young women reported included: inadequate supplies (47%); not enough privacy (28%); not enough soap/water (26.5%); no toilet (8.3%).
- Measures taken to manage lack of pads: borrowed from family (50.2%); used cloth (42.4%); borrowed money (28.1%); used baby diapers/tissue (3.7%).
- 41.6% reported feeling embarrassed to ask their family members for support to manage their menstrual hygiene.
- More than half (58.1%) reported never receiving menstrual hygiene kits through humanitarian aid, with higher proportions among those who are married (63.5%), especially those who married as a child (66.2%).

Girls and young women described how financial constraints, lack of water and soap, and shared, non-private toilets made managing menstruation stressful and undignified. Because pads were *'very expensive'*, (16-year-old girl) or *'weren't available most of the time'* (17-year-old girl), girls were forced to resort to unorthodox measures. The same 17-year-old girl reported: *'We used baby diapers if we couldn't find sanitary pads.'* A married 18-year-old recounted that when sanitary pads disappeared from the market she *'used gauze'*, describing the experience as *'disgusting! What were we supposed to do?'* – echoing other girls' reports of relying on cloth strips or rags. For many, inadequate facilities compounded these shortages: one 16-year-old girl said she *'wasn't comfortable changing'* because in the tents there is *'no privacy... if you sneezed, people heard you'*, while long queues, limited water, and crowded, non-segregated spaces made it impossible to wash or change as needed. A 21-year-old young woman refused to use the *'extremely miserable camp bathrooms at all during her period, instead walking to friends' homes to bathe*, stressing that during menstruation *'cleanliness'* was essential. Small packs of 12 pads could cost up to *'40 shekels [around 13 dollars]'* (24-year-old woman) and menstrual kits rarely reached married girls.

Figure 2: Percentage of respondents who reported difficulties getting menstrual hygiene supplies and commodities since the beginning of the war



The percentages above are based on a sample of older girls and young women (n=746); categories noted with an asterisk (*) demonstrated statistically significant differences at the 0.05 level.

Water security as a key concern among young people's post-conflict priorities

When asked to reflect on priorities for post-conflict Gaza, most young people in the study underscored the importance of tackling water insecurity.

- When respondents were asked a general question about what they are mainly worried about and what requires urgent intervention, 60.2% mentioned water insecurity and 21.6% reported sanitation as one of the main issues.
- When asked which aspects of infrastructure and basic services need to be addressed most urgently to improve their living conditions, 80.9% of respondents believed that water should be prioritised, and 46.8% mentioned sanitation.
- When asked which housing and shelter priorities need to be addressed most urgently to improve living conditions, more than half (52.2%) believed that reconnecting households with electricity, water, and WASH facilities should be prioritised.



Box 2: Change over time in water security and access to WASH facilities

Using panel data involving 812 young people who were interviewed at both rounds, between Round 1 (August–September 2024) and Round 2 shortly after the October 2025 ceasefire (October–November 2025), changes over time highlight that limited progress has been made in addressing water insecurity since the ceasefire, although access to free filtered tank water more than doubled.

- The panel data showed only a slight reduction in water insecurity (Round 1, 87.9% versus Round 2, 81.7%).
- However, the mix of respondents using paid versus free filtered tank water shifted notably. In Round 1, 59.1% relied on paid tank water and 34.2% on free tank water. By Round 2, only 22.7% relied on paid tank water, while 70.4% used tank water free of charge. This represents a positive change.

Overall access to WASH facilities and supplies had improved between data collection rounds, but access to menstrual hygiene supplies and support did not.

- In Round 2, more people reported having no toilet in their current accommodation (4.2% versus 2% in Round 1) or having to use primitive solutions (24.3% versus 18.2% in Round 1). The median number of persons per toilet improved from 14 to 9.
- The reported availability of soap improved since Round 1, where 53% reported never having access to soap. In Round 2, 11.3% reported never having access to soap. In addition, reported access to shampoo improved with 71.8%
- Reported availability of menstrual pads changed little between rounds: in both, around one-fifth of respondents indicated that they never have access to pads when needed. In Round 2 more people reported they were not able to go to the store to buy menstrual supplies.
- Reported shame to talk about menstrual hygiene challenges with family members seems to have reduced slightly. This could also relate to the fact that participants have become older. Still, in Round 2 girls and young women reported increased fear to ask family members for support around menstrual hygiene issues.



Bathroom in Gaza © GAGE 2026

Policy and programming implications

Since the war on Gaza began, young people and their families have been effectively denied their right to water. Without a doubt ending the illegal occupation of Gaza and the blockade and the withdrawal of Israeli soldiers are essential for rebuilding the lives of young people and their families. In order to fulfil Sustainable Development Goal (SDG) 6 and achieve water and sanitation for all, the new administration of Gaza, humanitarian agencies, and potential donors should prioritise reconstruction of the water infrastructure, specifically:

Short term

- Deliver potable water into Gaza to address water insecurity, with particular priority given to the North, where insecurity is most severe. Special attention is also needed for orphaned children, who are at increased risk of being deprived of safe drinking water.
- Educate young people on how to collect, store, and purify water using basic household tools. This should serve only as a temporary measure while Gaza's water infrastructure is being restored.
- Emphasise the crucial current role of international NGOs in providing water to young Gazans. The ongoing defamation by Israel of independent NGOs operating in Gaza must stop immediately so as to ensure that they can continue to play this critical gap-filling role.
- Give due attention to the specific needs of girls and young women—and in particular those with disabilities and those who are married due to compounded disadvantages – when providing aid, especially with regard to providing menstrual hygiene facilities and supplies.

Long term

Water insecurity

- Support Gaza's municipalities to restore and improve freshwater aquifers, desalination facilities, supervised private water wells, water treatment systems, and the sewage network.
- Provide expertise to help rebuild and innovate Gaza's water supply.
- Prioritise pipes, concrete and fuel to reconstruct Gaza's water and sewage system.

WASH and menstrual health management

- Restore and upgrade shared and household WASH infrastructure, and ensure their accessibility for young people with disabilities.
- Pay particular attention to the specific needs of girls and women, particularly by guaranteeing privacy and ensuring consistent access to facilities and supplies to support menstrual hygiene management.
- Provide awareness among young people and parents on menstrual health as to reduce shame and stigma around the topic.



Young people in Gaza © GAGE 2026

References

- Amnesty International (2024) 'You feel like you are subhuman': Israel's genocide against Palestinians in Gaza. London: Amnesty International (<https://www.amnesty.nl/content/uploads/2024/12/Gaza-genocide-report.pdf?x90620>)
- Asem, S. (2025) 'Top genocide scholars unanimous that Israel is committing genocide in Gaza: Dutch investigation'. Middle East Eye, 17 May (<https://www.middleeasteye.net/news/top-genocide-scholars-unanimous-israel-committing-genocide-gaza-investigation-finds>)
- B'Tselem (2025) 'Our genocide'. B'Tselem, July (https://www.btselem.org/sites/default/files/publications/202507_our_genocide_eng.pdf)
- Forensic Architecture (2025) *A spatial analysis of the Israeli military's conduct in Gaza since October 2023*. London: Goldsmiths, University of London (https://content.forensic-architecture.org/wp-content/uploads/2024/10/FA_A-Spatial-Analysis-of-the-Israeli-militarys-conduct-in-Gaza-since-October-2023.pdf)
- HRW (2024) *Extermination and acts of genocide: Israel deliberately depriving Palestinians in Gaza of water*. Human Rights Watch (<https://www.amnesty.nl/content/uploads/2024/12/Gaza-genocide-report.pdf?x90620>)
- Jamaluddine, Z., Abukmail, H., Aly, S., Campbell, O.M. and Checchi, F. (2025) 'Traumatic injury mortality in the Gaza Strip from Oct 7, 2023, to June 30, 2024: a capture-recapture analysis'. *The Lancet* 405(10477): 469–477.
- OHCHR (2026) 'Gaza: Civilian killings continue after ceasefire'. Office of the High Commissioner for Human Rights (<https://reliefweb.int/report/occupied-palestinian-territory/gaza-civilian-killings-continue-after-ceasefire-enar>)
- Pettit, J., Presler-Marshall, E. and Abu-Hamad, B. (2017) *Adolescent girls in Gaza: the state of the evidence*. London: Gender and Adolescence: Global Evidence.
- UN (2025) 'Legal analysis of the conduct of Israel in Gaza pursuant to the Convention on the Prevention and Punishment of the Crime of Genocide'. United Nations Human Rights Council, 16 September (<https://www.un.org/unispal/wp-content/uploads/2025/09/a-hrc-60-crp-3.pdf>)
- UNICEF. 175,000 additional parents and children are getting access to safe drinking water in the Gaza Strip. 5 June 2023, https://www.unicef.org/sop/stories/175000-additional-parents-and-children-are-getting-access-safe-drinking-water-gaza-strip#_ftn1
- Young, S. L., Boateng, G. O., Jamaluddine, Z., Miller, J. D., Frongillo, E. A., Neilands, T. B., ... and Workman, C. (2019). The Household Water InSecurity Experiences (HWISE) Scale: development and validation of a household water insecurity measure for low-income and middle-income countries. *BMJ global health*, 4(5)



A young boy in Gaza © GAGE 2026

Annex: Further information on the research sample

Table 1: Round 1 and 2 survey: distribution of study participants by characteristic variables and living conditions (n=1380)

Round 1 (n=1,011)		
Variable	Number	Percentage
Age		
14 years–10	304	30.1
19 years–15	397	39.3
24 years–20	310	30.7
Mode 18 SD 4	Mean age 17.14	Median 17
Gender of participant		
Male	485	48
Female	526	52
Place of living (before the war)		
North of Gaza	234	23.1
Gaza	347	34.3
Middle area	132	13.1
Khan Younis	184	18.2
Rafah	114	11.3
Current place of living by governates		
North of Gaza	142	14
Gaza	225	23.3
Middle area	280	27.7
Khan Younis	213	21.1
Rafah	151	14.8
Current place of living (North or South of the Gaza Strip as divided by the Israeli occupation)		
North of Gaza (Gaza City and north)	367	36.3
South of Gaza (middle and south)	644	63.7
Refugee status		
Refugees	332	32.8
Non-refugees	679	67.2
Current marital status		
Married	181	17.9
Not married	830	82.1
Mean age at marriage	17 years	
Child marriage, among those ever-married (n=195)		
Yes	109	55.9
No	86	44.1
Having any sort of disability		
Yes	123	12.2
No	888	87.8

Round 2 (n=1,380)		
Age		
14 years–10	289	20.9
19 years–15	762	55.2
24 years–20	329	23.8
Mode 17 SD 3.527	Mean age 17.32	Median 17
Gender of participant		
Male	543	39.3
Female	837	60.7
Place of living (before the war)		
North of Gaza	361	26.2
Gaza	396	28.7
Middle area	191	13.8
Khan Younis	290	21.0
Rafah	142	10.3
Current place of living by governorate		
North of Gaza	45	3.3
Gaza	332	24.1
Middle area	514	37.2
Khan Younis	487	35.3
Rafah	2	0.1
Place of residence (North or South of the Gaza Strip as divided by the Israeli occupation)		
North of Gaza (Gaza City and north)	377	27.3
South of Gaza (middle and south)	1003	72.7
Refugee status		
Non-refugees	390	28.3
Refugees	990	71.7
Orphan status		
Orphaned	214	15.5
Not orphaned	1166	84.5
Current marital status		
Not married	929	67.3
Married	451	32.7
Mean age at marriage	17.02 years	
Child marriage, among those ever-married (n=433)		
Yes	333	76.9
No	100	23.1
Having a disability		
Yes	209	15.1
No	1171	84.9

Table 2: Panel data, participants

Panel data during Round 1 (N=812)		
Variable	Number	Percentage
Age		
14 years–10	263	32.4
19 years–15	323	39.8
24 years–20	226	27.8
Mode 15 SD 3.947	Mean age 16.8	Median 17
Gender of participant		
Male	372	45.8
Female	440	54.2
Place of living (before the war)		
North of Gaza	194	23.9
Gaza	232	28.6
Middle area	113	13.9
Khan Younis	168	20.7
Rafah	105	12.9
Current place of living by governates		
North of Gaza	112	13.8
Gaza	128	15.8
Middle area	244	30.0
Khan Younis	197	24.3
Rafah	131	16.1
Place of living (North or South of the Gaza Strip as divided by the Israeli occupation)		
North of Gaza (Gaza City and north)	240	29.6
South of Gaza (middle and south)	572	70.4
Refugee status		
Non-refugees	248	30.5
Refugees	564	69.5
Current marital status		
Not married	673	82.9
Married	139	17.1
Mean age at marriage	17.8 years	
Child marriage, among those ever-married (n=147)		
Yes	84	84
No	63	63
Having any sort of disabilities		
Yes	102	12.6
No	710	87.4

Table 3: In-depth interviews sample with young people and their caregivers from Round 1 and 2

Categories	Girls/ young women	Boys/ young men	Young people subtotal	Mothers of adolescents	Fathers of adolescents	Parent subtotals	Total individual interviews
ROUND 1							
Young people	32	24	56				56
Married young people	12	8	20				20
Young people with disabilities	12	12	24				24
Total	56	44	100				100
ROUND 2							
Young people	18	18	36	10	10	20	56
Married young people	8	8	16				16
Orphans	6	4	10				10
Young people with disabilities	12	12	24	10		10	34
Total	44	42	86	20	10	30	116