



WASH in Schools Empowers Girls' Education

Proceedings of the Menstrual Hygiene
Management in Schools Virtual
Conference 2012



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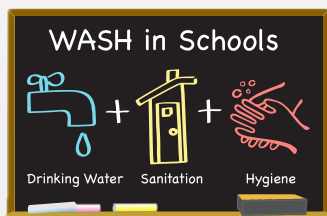


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Conference Overview Empowering Girls' Education through MHM and WASH in Schools

WASH in Schools (WinS) fosters social inclusion and individual self-respect. By offering an alternative to the stigma and marginalization associated with hygiene issues, it empowers all students – and especially encourages girls and female teachers. In recognition of the positive impact on girls' school attendance and achievement, initiatives around the world are addressing adolescent girls' menstrual hygiene management (MHM) needs through WinS programming. Such interventions are increasingly implemented in both development and humanitarian emergency contexts.

To provide an opportunity for sharing MHM research and practice, and to enable joint discussion on the way forward, Columbia University's Mailman School of Public Health and UNICEF co-hosted the Menstrual Hygiene Management in Schools Virtual Conference on 27 September 2012. The conference highlighted outstanding efforts to tackle the MHM challenges schoolgirls face, a topic that until recently was considered too secretive and taboo to address in most contexts.

The MHM in Schools Virtual Conference was attended by more than 200 online participants, plus 30 in-person attendees who met at UNICEF Headquarters in New York. The one-day event brought together water, sanitation and hygiene (WASH) and MHM experts, global health and education experts, and UNICEF country offices currently implementing MHM-related activities. In-person attendees included Columbia University faculty; experts from donor agencies; social entrepreneurial or non-governmental organizations (NGOs) working on MHM-related programming, research or advocacy; and UNICEF Headquarters staff from the WASH, Gender and Education units.

Through online (WebEx) presentations, 13 UNICEF country offices shared their MHM practices. In addition, there were two global-level presentations – the first provided background on the methodology being used for the joint Emory University-UNICEF research occurring in four countries; the second addressed UNICEF-related research and response to MHM in humanitarian emergencies.

Organizing the MHM in Schools Virtual Conference

- A call was made for presentations to UNICEF country offices in late spring.
- Statements of interest were submitted by potential participants in midsummer, and guidance was issued on presentation outlines.
- 15 presentations were submitted for consideration and review by mid-August.
- Multiple rounds of systematic feedback were provided on content and organization to assure flow of presentations.
- Finalized presentations were accepted by mid-September.
- Discussion and recommendations from the conference were shared with organizers of the MHM in WinS session at the University of North Carolina in October 2012, and with the global-level Joint Monitoring Programme advocating for inclusion of menstrual hygiene management in the post-2015 global targets and indicators.

Definition of menstrual hygiene management (MHM)

Women and adolescent girls use a clean material to absorb or collect menstrual blood, and this material can be changed in privacy as often as necessary for the duration of menstruation. MHM also includes using soap and water for washing the body as required, and having access to facilities to dispose of used menstrual management materials.

Source: WHO-UNICEF Joint Monitoring Programme, 'Consultation on Draft Long List of Goal, Target and Indicator Options for Future Global Monitoring of Water, Sanitation and Hygiene', 2012.

The conference agenda included three sessions of presentations on overarching themes: (1) exploring the MHM barriers faced by girls; (2) approaches to addressing MHM for girls; and (3) MHM in humanitarian emergencies. Following the conclusion of each session, the presenters responded to questions from online participants about their activities, and two in-person experts summarized main points and posed key questions about the activities in the presentations and others that are in progress.

An additional breakout session with a group of online and in-person participants was held to facilitate reflection on the day's presentations. This group sought to reach consensus on four or five MHM practices – including research, programmes and policy – that are already under way and could be recommended for countries that plan to initiate MHM interventions.

Although a great deal more work needs to be done to assure that female students and teachers are able to attend and participate comfortably in the school environment during menses, the virtual conference suggested innovative and effective pathways for improving existing MHM initiatives and getting started in new countries.

Three key recommendations for the future emerged from the conference discussions: (1) document current MHM practices and the barriers girls face in various contexts; (2) develop guidelines for integration of a minimum MHM package into existing WinS programmes; and (3) engage with national governments from the very beginning when initiating MHM-related activities to ensure buy-in and additional support for multi-sectoral involvement. Details of these and other recommendations are described in the final section of this report.



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Girls in Afghanistan's schools, as in many other countries, can benefit from increased knowledge of and facilities for menstrual hygiene management.

THEMATIC SESSIONS AND PRESENTATIONS

Session I. Exploring the MHM Barriers Faced by Girls	Session II. Approaches to Addressing MHM for Girls	Session III. MHM in Humanitarian Emergencies
<p>Emory University-UNICEF research collaboration: Menstrual hygiene management among girls in school – Getting to a model of an enabling environment</p> <p>Rwanda: MHM in schools – An assessment for applied learning and improved practice in Gicumbi District</p> <p>Bolivia: National context and preliminary findings in Cochabamba Department</p> <p>The Philippines: National context and preliminary findings in Masbate Province</p> <p>Sierra Leone: Baseline study on MHM for schoolgirls</p>	<p>India: Menstrual hygiene – Manage it well</p> <p>Tanzania: Supporting schoolgirls with their menstrual hygiene management</p> <p>Nigeria: Menstrual hygiene management in schools and communities</p> <p>Nepal: Reaching adolescent girls</p> <p>Malawi: Menstrual hygiene management in schools</p> <p>Ethiopia: Developing washable sanitary pads and raising MHM awareness</p>	<p>Somalia: Case study – The Management of Maturation Project</p> <p>Afghanistan: Menstrual hygiene management in schools</p> <p>Pakistan: Menstrual hygiene management for schoolgirls</p> <p>UNICEF Supply Division (Copenhagen): Supporting MHM in emergencies – A supply chain challenge</p> <p>UNICEF Headquarters (New York): Taking stock of support from UNICEF and partners</p>

Expanding interest towards building a holistic approach

During recent years, there has been growing interest in exploring and addressing the menstrual hygiene management challenges that are faced by schoolgirls through the incorporation of MHM in WASH in Schools programming. Although WinS research, programmes and policy are under way in 95 countries around the world, the unique water, sanitation and hygiene needs of students who have started menstruating and of their female teachers have received much less attention.

Among numerous explanations for past neglect of this important issue, a primary reason is likely the taboo nature of menstruation and menstrual hygiene in many societies. Addressing the MHM needs of female students requires paying careful attention to local cultural and social contexts, given the secrecy that surrounds the issue and also because the topic is often hidden from boys and men, as well as from girls and women in many contexts.

Similarities in the menstrual management barriers girls and female teachers face, however, can be identified across school environments in countries globally, which can guide the research, programming and policy in countries seeking to initiate or scale up attention on the issue.

Acceptable MHM facilities:

Provide privacy for changing materials and for washing the body with soap and water;

Provide access to water and soap within a place that provides an adequate level of privacy for washing stains from clothes/ reusable menstrual materials; and

Include access to disposal facilities for used menstrual materials (from collection point to final disposal).

Source: WHO-UNICEF Joint Monitoring Programme, 'Consultation on Draft Long List of Goal, Target and Indicator Options for Future Global Monitoring of Water, Sanitation and Hygiene', 2012.

A growing evidence base from South Asia, sub-Saharan Africa and other low-income regions indicates that many girls reach menarche with inadequate guidance and information on this important developmental stage and physiological change, or on how to manage their menses and body hygiene with confidence. Added to this, many female students encounter challenges in managing their menses en route to and within the school environment. Such challenges include: inadequate water and sanitation facilities, with many schools having insufficient numbers of private, safe and clean latrines; lack of access by schools to clean water within or near the latrine or toilet facilities for washing menstrual stains from clothes and uniforms; and inadequate mechanisms in schools for the disposal of used menstrual materials or menstrual waste. Adequate disposal facilities include those within the latrine or toilet stall/block itself (such as a dustbin) and a system for safe, culturally and environmentally appropriate disposal of the collected waste (such as an incinerator or burying pit).

Additional challenges highlighted by female students include inadequate cleaning supplies, such as gloves, mops, soap and disinfectant materials, because in many countries they are responsible for cleaning school sanitation facilities; the prevalence of male teachers or the nature of disciplinary relationships with female teachers, which inhibit the sharing of menstrual-related concerns and discomfort; absent or insufficient supplies of adequate sanitary materials, including a lack of underwear, for commuting long distances to schools and participating in lengthy school days (frequently with minimal breaks for use of sanitation facilities); harassment by male students, who mock or tease girls when they try to keep sanitary materials hidden in schoolbags or have a menstrual accident in class; and menstrual cramps or pain, which negatively affect school concentration and/or attendance.

In many countries, girls and their female teachers have shared recommendations and solutions for addressing such challenges, but the specific barriers to menstrual hygiene management have yet to be adequately explored. Although it is not essential for all of the MHM-related challenges noted above to be incorporated into guidelines for minimum standards on MHM interventions for WinS implementation and monitoring, the development of and consensus on a holistic MHM approach that can be easily monitored and evaluated within a WASH in Schools programme is long overdue.

This report on the conference proceedings aims to capture the range of MHM-related activities being conducted around the world, as well as key conclusions and recommendations originating from discussions during the conference.



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Many girls in low-income countries such as Malawi do not have private, clean and safe places for washing hands or clothing in school. MHM initiatives seek to increase and improve WASH in Schools facilities.

Session I.

Exploring the MHM Barriers Faced by Girls

The first thematic session of the MHM in Schools Virtual Conference included an overview of the research taking place in four countries as part of collaborative studies conducted by Emory University's Center for Global Safe Water and UNICEF. Presentations included plans for further study and a synthesis report, along with preliminary findings of the country-specific research.

Specific conclusions reached during discussions on this session include:

- It is necessary to engage with national governments from the onset when initiating MHM-related activities in order to ensure buy-in and additional support for multi-sectoral involvement.
- Those implementing MHM-related activities should document the MHM practices and barriers that girls face in various contexts. Studies should be carried out to understand the relationship between inadequate MHM programmes on girls' school performance and attendance. The evidence base on what menstrual management practices exist, in relation to WASH in Schools, and what the continuing MHM barriers are for girls in various contexts should be strengthened.
- It is also necessary to better understand the impact of inadequate MHM programmes on girls' attendance and school performance, including issues of cramps and other menstrual pain.

Summaries of the conference presentations on the research methodology and from Rwanda, Bolivia, the Philippines and Sierra Leone are provided in the following subsections.

Emory-UNICEF Research collaboration: Menstrual hygiene management among girls in school – Getting to a model of an enabling environment

In 2012, UNICEF and the Center for Global Safe Water at Emory University initiated a programme to support collaborative research focused specifically on exploring the MHM barriers faced by female students in Rwanda, Bolivia, the Philippines and Sierra Leone. The project includes developing or strengthening MHM-related programming in schools in those countries. Emory University sent research fellows to work with UNICEF and its in-country WinS partners on the research, which will be finalized in April 2013.

The conceptual framework of the research seeks to explore the experience of adolescent girls embedded within and shaped by a web of social and environmental contexts, interpersonal dynamics and individual-level circumstances. At the societal level, the teams are exploring factors relevant to current public policy, local traditions, cultural beliefs and social norms. At the environmental level, they

are examining school water and sanitation facilities and the availability of MHM resources, such as sanitary napkins. At the interpersonal level, they are focusing on eliciting information about changes that girls have experienced in social roles and relationships, as well as investigating the availability of support provided to girls by family members, teachers and peers.

In discussions with girls, the teams seek to understand their individual-level circumstances, personal knowledge, attitudes and beliefs about menstruation, coping mechanisms and sense of self-efficacy regarding MHM, as well as experiences with menstrual-related pain, monthly flow and fatigue.

To explore the MHM barriers influencing the experience of female students in each country, the research teams conducted a desk review of the available literature or policy pertaining to menstrual hygiene management, WASH in Schools, and girls' health and education. The teams also observed school water and sanitation facilities and conducted in-depth interviews with girls, their teachers and school administrators. In addition, focus group discussions were held with groups of girls, boys and mothers.

Preliminary findings from the formative research were included in four country presentations at the MHM in Schools Virtual Conference. Once the research is completed during first-quarter 2013, the four teams will write detailed case reports and work with local stakeholders to develop country-specific recommendations. These reports will provide the framework for establishing a basic package of school-based MHM interventions that can inform work in other country settings.

The basic package will be synthesized in a report on menstrual hygiene management within WASH in Schools programmes. The synthesis report will highlight both country-specific and global challenges, and will be presented along with a plan for more systematic monitoring and evaluation of MHM interventions in WinS programmes.



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The Emory University-UNICEF collaboration aims to identify specific barriers to menstrual hygiene management for girls in school, and to develop or strengthen MHM programming.

Shown above, a school hand-washing station in the Philippines is located between the female and male toilets, offering no privacy to girls for washing menstrual leaks or stains.

Rwanda **MHM in schools – An assessment for applied learning and improved practice in Gicumbi District**

With support from UNICEF, Rwandan primary schools have seen remarkable improvements in the availability of water, sanitation and hand-washing facilities throughout the past few years. Many schools have designated teachers to counsel girls on menstruation, and there have been campaigns to provide sanitary pads in schools. These are only initial steps towards fully supporting adolescent girls. The Rwanda Ministry of Health, in partnership with the Ministry of Education, UNICEF and Emory University, set out to understand what more could be done.

Focus groups, individual interviews and on-site observations were conducted at eight different schools in the Gicumbi District, Northern Province, to capture a 'snapshot' of girls' lives. The



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The sanitation facility shown above was recently built for a child-friendly school in rural Rwanda. It provides natural light, airflow, a clean water supply, and separate facilities for girls and boys.

The Rwandan Ministries of Health and Education are working with UNICEF and Emory University to improve WASH conditions in primary schools throughout the country.

findings suggest that many Rwandan girls have good knowledge levels about menstruation and menstrual hygiene, which they learn about primarily from their teachers, peers and mothers. However, menstruation still causes many girls undue stress, which in turn disrupts their full participation in school.

The findings also reveal that girls expend considerable energy trying to keep their menses a secret, given that menstruation remains taboo in Rwanda in everyday conversation. This poses particular challenges in schools where the infrastructure does not provide privacy. Most toilet facilities in Rwandan primary schools are not equipped with doors that lock from the inside. Some schools have a separate bathing room, but girls must request a key from a teacher to access it. Such requests may signal to other students that a particular girl has her menses, thus exposing her to embarrassment and potential ridicule.

Ensuring a consistent supply of water to the bathing rooms is also a challenge for schools. Girls who reuse cloths to manage their periods face an additional challenge, since the cloths must be changed more regularly than sanitary pads. Such girls must make frequent visits to the bathroom and require a private way to store their used cloths, which must be taken home to be washed. Many girls are also hesitant to use school sanitation facilities, expressing the concern that such facilities – which lack concrete floors and proper trash receptacles for disposal of pads – are not hygienic.

In addition to these challenges, many girls explained how menses restricts their normal activities. Girls often refrain from sports due to menstrual cramping or fear that menstrual cloths or pads will not be adequate during sports activities. Girls also reported sitting in the back of the classroom to keep embarrassing bloodstains hidden from view. In addition, girls expressed a preference for staying home during menstruation rather than having to manage their periods in an unfriendly school environment.

When young girls were queried about what would make menstruation a more positive experience, they highlighted having access to disposable pads and private toilet facilities with cement floors that would provide space and privacy to bathe, and enable proper disposal of sanitary pads. Girls recommended that the entrances to these facilities be discreet, so they would not be seen walking from their classrooms.

As a next step, the Rwanda Ministry of Health-UNICEF-Emory University team will summarize the findings from the research activities discussed above, drawing not only on conversations with girls, but also with boys, teachers and mothers. Recommendations from all groups will be used to draft a package of hardware and software interventions for schools. The draft will be shared with key stakeholders to be refined and finalized.

The Government of Rwanda and UNICEF are committed to carrying out further studies to understand the impact of such interventions on educational outcomes, with the aim of integrating them into the minimum standards for schools across the country.

Bolivia National context and preliminary findings in Cochabamba Department

In Bolivia, UNICEF and Emory University are exploring the barriers that female students face in 11 primary schools in two rural municipalities within the state of Cochabamba. As in all rural areas in the country, where primary schools are found, there are, on average, 1.2 toilets (pit latrines) and 0.5 hand-washing basins per school.

The pit latrines in most schools are inadequate for girls' menstrual hygiene management because they are generally small, poorly maintained and lack proper waste disposal facilities. This makes it difficult for girls to change and dispose of absorbent materials discreetly. Pit latrines can be so uninviting that girls avoid them altogether and leave school to manage their menses at home.



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Girls in Bolivia face multiple barriers to managing menses in school, including shyness about discussing menstruation with parents and teachers.

Pit latrines in rural schools were found to be small, poorly maintained and without proper facilities for waste disposal – leading some girls to go home rather than trying to manage their needs at school.

There is also tremendous shyness around the topic of menstruation in Bolivia, which posed a challenge for the research team. It is not uncommon for girls to go many months before telling someone they have started menstruating. When girls do talk about the topic, it is often with their peers. Parents and teachers can be a source of support, although many parents are migrant labourers and are routinely absent from home, and some girls feel uncomfortable discussing menstruation with teachers. Additionally, teachers feel limited in their ability to respond effectively to girls' needs.

Thus, when the researchers tried to involve girls in focus groups and interviews, the girls were too shy to open up. To break through the silence, the researchers engaged the girls in a board game. The girls, as players, were asked to roll dice and then follow activity prompts. One prompt, for example, asked them to draw a school bathroom and explain their drawing to the larger group. Another prompt asked a player to pick a girl in the group and together describe the rules regarding bathroom use to a new girl in their class. The exercise allowed girls to talk about menstruation in a way that was less direct and therefore less threatening.

Using the board game as a research tool, the researchers learned that menstrual practices among girls in Bolivia are guided by local beliefs about blood and personhood. Girls view menstrual blood as an extension of themselves, which in turn dictates the disposal of used sanitary materials. For example, burying used menstrual pads is an acceptable form of disposal, but incineration is not. Girls also believe that washing themselves with cold water will cause blood clots and heavy bleeding. When only cold water is available, which is the case in school facilities, they prefer not to wash.

Most girls reported managing their periods with sanitary pads. When pads are unavailable, girls will use cloths, toilet paper or nothing at all. Although it appears that girls greatly prefer pads, it is unlikely that pads are accessible to all of them due to the cost and the rural locations of the communities.

Evidence suggests that admitting to using a cloth could be stigmatizing because it might signal a girl's economic status and her inability to follow the guidance of teachers, who teach about managing menstruation only with sanitary pads. An inability to conceal menstruation is especially troubling for girls, with their worst fear being that others will find out that they have their periods (usually because they have stained their clothes) and tease them.

In the next phase of the study, the researchers will conduct key informant interviews with health professionals and midwives, and focus group discussions with mothers in the community. They will then compile a list of challenges and recommendations. The recommendations, once validated by key stakeholders, will be integrated into a set of national standards for Bolivian schools.

The Philippines

National context and preliminary findings in Masbate Province

Across the Philippines, there are more latrines per school when compared with other countries, although sanitation facilities are still far from adequate. Toilets are often out of order, and even when functional, students avoid them because they are reported to be unclean, smelly and poorly lit. According to the WASH Situation Analysis in Poor and Under-Served Communities in the Philippines, 2011, 20 per cent of schools do not have access to water.

To understand what these challenges mean for female students who need to manage their menstruation, the UNICEF-Emory research team, in collaboration with Plan International and Save the Children, is conducting research in the provinces of Manila and Masbate, where the latrine-to-student ratios are very challenging.



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In two Philippine provinces, Emory University, UNICEF, Plan International and Save the Children are teaming up to study the MHM challenges girls face in school.

At a school in Masbate Province, the latrines had doors, but they were locked from outside, requiring students to get a key from a teacher in order to access them.

The researchers conducted separate focus group discussions with boys, girls and mothers, as well as in-depth interviews with girls and key informant interviews with teachers. The findings suggest that poor sanitation facilities make it especially difficult for menstruating girls in school. In addition, girls struggle with a lack of privacy in the available facilities. The poor construction enables others to peek in, and the doors frequently lack locks. As a result, girls report leaving school grounds in search of more private solutions, and might manage their menses in nearby tall grass or behind trees and, more frequently, go home.

Another challenge for girls is that the hand-washing sinks in schools are stationed outside the toilet facilities, which poses a problem for girls who hope to wash bloodstains from their clothes in private. Hand-washing sinks also lack soap and, oftentimes, the water has to be fetched.

Most girls use sanitary napkins during their menses, but some girls use nothing at all. The most commonly used sanitary napkin is a folded piece of cloth called a *pasador*, which provides only minimal absorbency. Whether girls use a commercially sourced sanitary pad, a *pasador* or nothing, they fear that blood will stain their clothes and their peers will tease them. In attempts to avoid ridicule, girls wear multiple pairs of underwear or black shorts beneath their uniforms. They may also restrict their movements or isolate themselves while at school, and some girls find the pain of their periods so unbearable that they have difficulty paying attention in class.

In light of these challenges, girls may avoid school altogether so that they can manage their periods comfortably and privately at home. Economically marginalized girls in the Philippines have little incentive to stay in school during menstruation when the school environment is not amenable to their needs, therefore, much work needs to be done.

The provision of sanitary napkins and educational materials to girls is key, and enlisting school nurses as educators in menstrual hygiene practices may be especially useful for allowing girls to stay in school during menstruation. Boys and parents must also be involved to debunk myths and reduce the stigma associated with menstruation. Lastly, latrines need to be updated to include trash receptacles, soap, good lighting and private hand-washing stations.

Looking ahead, the researchers will complete their data analysis in Manila and Masbate, and make recommendations to UNICEF based on their findings.

Providing sanitary napkins and educational materials to girls is key. Enlisting school nurses as educators in MHM practices may be especially useful in allowing girls to attend school during menstruation.

Sierra Leone **Baseline study on MHM for schoolgirls**

In Sierra Leone, UNICEF, in partnership with the Ministry of Health and Sanitation and the Ministry of Education, Science and Technology, examined menstrual hygiene management in schools in six rural districts. The research revealed that while the majority of female students interviewed believe that menstruation is a normal part of growing up, 21.3 per cent report that they miss school when they have their menstrual periods. Nearly one third of girls also reported that they prefer not to stand up in the classroom to answer questions when they have their periods out of worry about leakage and stains.



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School health club members in Pujehun District participate in a performance, shown in the photo above, and are excited about promoting sanitation and hygiene to their peers at school.

Plans for scaling up WASH in Schools in Sierra Leone include a pilot programme for peer education on menstrual hygiene management.

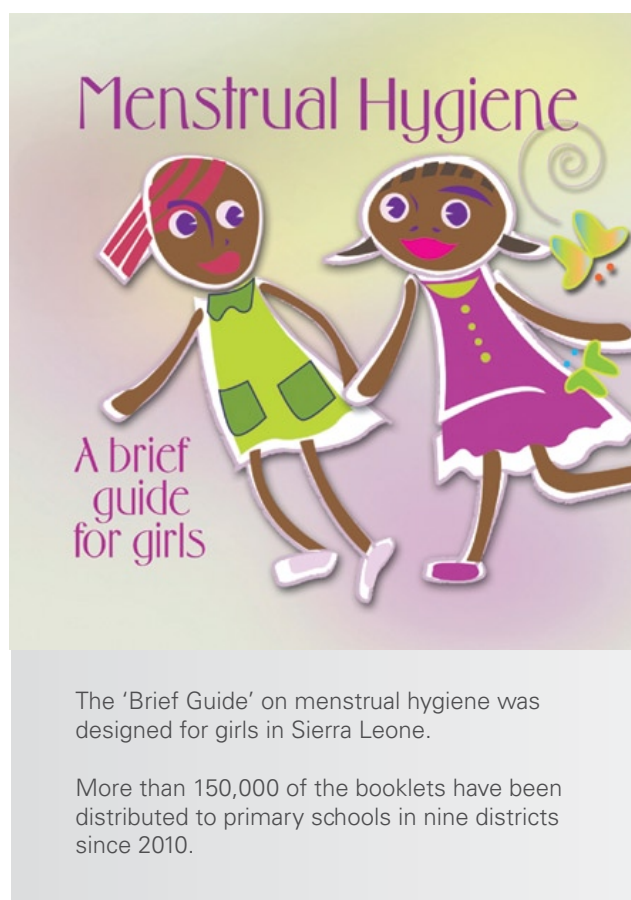
Although most girls agreed on the importance of school attendance, girls who reported missing school because of their periods said that they were absent during menses for about four days over the previous three months. Explanations for their absences included menstrual-related pain or discomfort; fear of leakage, shame or heavy blood flow; and lack of facilities for menstrual hygiene management at school.

The study also revealed a strong correlation between the lack of gender-separated latrines in schools and absenteeism among girls 9–14 years old. Only a third of schools surveyed had latrines, and just 6.9 per cent of girls said that their schools had water available in a private area to wash themselves. Almost none (0.7 per cent) of the schools surveyed offered sanitation facilities that enabled girls to change their sanitary cloths while at school, nor did any of these schools make sanitary cloths available in the case of an emergency.

Based on the research findings and evidence from additional MHM research conducted by UNICEF in collaboration with Emory University, a new design element has been initiated. Locally made barriers positioned in front of latrines have been installed in targeted schools in some operational areas. This is a simple redesign that improves privacy for girls. A pilot programme to install girls' urinals with built-in washing facilities in individual cubicles is also being implemented in targeted schools.

Although menstruation remains a taboo topic and is typically only discussed among women, UNICEF is working with local partners to encourage teachers and families to talk with girls, answer their questions and become aware of their MHM-related needs. More than 150,000 menstrual guidance booklets, tailor-made for girls in Sierra Leone, have been distributed to primary schools in nine districts since 2010.

UNICEF and its partners in Sierra Leone envision teachers as primary agents for the dissemination of MHM information. Since 2011, they have included sessions on menstrual hygiene management at annual School Sanitation and Hygiene Education training for teachers. Looking forward, advocacy is under way to further incorporate MHM into standard school curricula, continue teacher training and pilot a peer education programme through school health clubs.



Session II.

Approaches to Addressing MHM for Girls

The second thematic session of the MHM in Schools Virtual Conference included country presentations from six UNICEF WASH teams that are implementing a wide range of MHM activities. The approaches include water and sanitation facility interventions, the development of pragmatic guidance materials on puberty for girls, the production of local sanitary materials and some policy-focused interventions.

Specific recommendations for action suggested during this session include:

- Develop guidelines for minimum standards on implementing, monitoring and evaluating menstrual hygiene management in development contexts.
- Provide factual and pragmatic MHM guidance that girls can access privately and that is not dependent on teachers, given the predominance of male teachers in many schools and existing disciplinary dynamics of many teacher-student relationships.
- Integrate sensitivity training on menstrual hygiene management into teacher training curricula.
- Identify simple design innovations to efficiently and effectively enhance MHM facilities in schools for girls and female teachers. These designs may include privacy screens, full-length mirrors, dustbins for disposal, incinerators, buckets of water inside latrines or toilet stalls, and doors with locks on stalls.
- Establish peer clubs focused on MHM and other activities, including mentoring by female teachers and older girls, to support and encourage girls in school.
- Explore the sustainability of new sanitary protection products under development in various countries, including how such products can be profitable and disposed of in an environmentally safe manner.

Summaries of the conference presentations from India, Tanzania, Nigeria, Nepal, Malawi and Ethiopia are provided in the following subsections.

India Menstrual hygiene – Manage it well

Addressing the issue of menstrual hygiene in India is an issue of scale in many respects. India's population includes 225 million adolescent girls for whom MHM is relevant in terms of health, well-being and educational opportunity. And the country has 1.37 million government schools, where adequate facilities must be maintained.

The Government of India recognizes menstrual hygiene management as an important issue, and strides have been made towards increasing knowledge and the accessibility of sanitary materials in some areas. The National Rural Health Mission programme, for example, provides sanitary napkins at subsidized prices to adolescent girls in 259 districts and is supporting the production of sanitary napkins by women's groups in 45 additional districts.

The initiatives in India are supported by almost a decade of research conducted by UNICEF and local WinS partners. Findings from studies of cultural practices related to MHM and girls in several regions reveal that the topic of menstruation remains taboo and, consequently, the majority of girls experience menarche with little information.

A study conducted in Rajasthan, in 2006, found that 56 per cent of girls in and out of school did not have any information about menstruation before reaching menarche. More recently, a baseline study conducted in Uttar Pradesh found that 66 per cent of girls knew nothing about menstruation prior to menarche.



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Cultural factors and economic constraints in India lead to poor menstrual hygiene management among girls, particularly in rural areas.

To foster better access to hygiene products, as well as economic opportunity, UNICEF supports local production and marketing of low-cost sanitary napkins.

The study also revealed that 89 per cent of girls use cloths or rags and 11 per cent of girls share used menstrual cloths and rags with others. In Rajasthan, 75 per cent of girls were using cloths or rags to absorb their menstrual flow, while 27 per cent of girls out of school did not use any material at all. An assessment conducted in Chhattisgarh revealed that none of the shops in 65 villages stocked sanitary napkins.

Cultural factors and economic constraints lead to poor menstrual hygiene management among girls, particularly in rural areas, as indicated in the studies noted above and other research. Evidence shows that limitations are placed on girls' mobility during their menses, which in turn limits their school attendance. More broadly within society, menstruation is found to be associated with impurity, secrecy and shame.

Economic constraints lead to girls and women having limited access to hygienic materials for managing menses. Even girls and women who have access to sanitary pads may only change them once or twice a day. Limited resources also hinder access to private and hygienic sanitation facilities, both at home and in school. Almost 63 million adolescent girls live in homes without toilet facilities. Although schools were found to generally have at least one toilet facility, and about 60 per cent have separate facilities for girls, these facilities are often poorly maintained or non-functional. Moreover, an estimated 14 per cent of children have no access to toilet facilities in schools.

In concert with local partners, UNICEF is engaged in several interventions to address adolescent girls' MHM needs in India. The UNICEF approach emphasizes a framework with three fundamental elements: (1) access to facilities and products; (2) hygiene promotion and awareness; and (3) the maintenance of enabling environments to reduce infection and empower girls.

To create better access to hygiene products, as well as economic opportunity, UNICEF has supported Women on Wings, a Dutch NGO, to provide women with training on sanitary napkin production, sales and marketing. Partnering with the Ministry of Women and Child Development, UNICEF has supported development of educational materials aimed at improving awareness about MHM in school settings and has advocated for gender-separated WASH facilities in schools.

Local MHM projects in the states of Madhya Pradesh, Maharashtra and West Bengal are also supported by UNICEF. In Madhya Pradesh, UNICEF is providing technical assistance to women's groups for the production and marketing of low-cost sanitary napkins, and it has supported the development of a training manual on sanitary napkin production. In addition, UNICEF advocacy helped make incinerators for safe disposal of sanitary napkins a part of the new government-supported toilet design. In Maharashtra, activities have included the provision of counselling and support for girls as part of a life-skills package in 200 villages, as well as advocacy to orient government agencies on the MHM challenges that girls face. Also in Maharashtra, UNICEF is supporting the social marketing of sanitary napkins by girls' groups in six districts.

The Tribal Welfare Department of Madhya Pradesh has allocated US\$180,000 to underwrite an MHM capacity-building and awareness programme in all tribal residential schools. Training is to be provided for both adults and adolescents on outreach and peer support. UNICEF has collaborated on MHM training sessions at residential schools in two districts. In addition, content on menstrual hygiene management has been integrated into curricula in 15 districts, directly benefiting 800,000 adolescent girls.

UNICEF has been involved in similar efforts in West Bengal. Women's groups have received training on MHM, and a quality certification for sanitary napkin production has been established in collaboration with the local government. Through small pilot programmes, the school education department has installed 50 incinerators for sanitary napkin disposal and aims to cover all upper primary schools in the UNICEF-supported district. Sanitary napkin vending machines have been installed on a pilot basis in 21 schools and youth centres. In addition to the development and adaptation of educational materials, UNICEF, together with the local department for school education, has trained teachers and provided MHM workshops for girls. Further, more than 1,500 women's group members have received training on how to raise awareness among students in 12 districts.

Moving forward, UNICEF will be working throughout India to improve girls' access to information and to sanitary materials for menstrual hygiene management. Increased advocacy targeted to reach state governments that are still disengaged from the MHM issue remains a top priority.

Tanzania Supporting schoolgirls with their menstrual hygiene management

In 2009, UNICEF conducted a mapping exercise of 2,697 schools, both public and private, in 16 districts across Tanzania. This revealed a startling picture: Only 11 per cent of schools had an acceptable number of toilets, only 9 per cent of those toilets were clean, and only 1 per cent of schools had soap available. Furthermore, water facilities were either non-existent in schools (38 per cent) or they existed but were non-functional (46 per cent). In addition, school sanitation facilities posed particular problems for adolescent girls. Fifty-two per cent of girls' latrines had no locks on the doors, and 63 per cent of all latrines had no place to dispose of sanitary pads.

UNICEF decided to take immediate action by making WASH in Schools one of its top priorities. This involved support for an increased number of toilets in selected primary schools and improving their cleanliness and the availability of soap and water. To support adolescent girls in particular, the work included installing incinerators and redesigning girls' latrines to include changing rooms.

These measures provided important insights for the Government of Tanzania's national WASH in Schools guidelines developed in 2010 and piloted in 2011 in collaboration with the Ministry of Education and Vocational Training, the non-governmental organization SNV and



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In Tanzania, UNICEF and partners approach menstrual hygiene management as a multifaceted issue. This involves the development of high-quality, age-appropriate educational tools for girls, boys and teachers, as well as improvements to WASH in Schools facilities.

others. The guidelines and its toolkits address MHM among female students, both in specific sections as well as mainstreamed in all relevant components.

From experience, UNICEF and its Tanzanian partners approach MHM as a multifaceted issue. Merely addressing the challenges and constraints posed by infrastructure is not sufficient – girls, boys and teachers must also be offered high-quality, age-appropriate educational tools.

One such tool is the booklet ‘Growth and Changes’, a girls’ guide to puberty written by Marni Sommer of Columbia University. ‘Growth and Changes’ teaches girls about their changing bodies and how to manage their menstruation confidently and comfortably. In collaboration with Sommer and the NGO Tanzania Water and Environmental Sanitation (TWESA), UNICEF disseminated 55,000 copies of the booklet to girls and then tested 1,000 girls on their knowledge of puberty and hygiene practices before and after reading the book. Girls who had read the booklet showed a greater awareness of menstruation and menstrual hygiene management.

Complementary materials for teachers were also developed to augment their efforts to teach students about puberty and address any challenges or insecurities they face. When evaluated, the materials for teachers were shown to enhance their comfort level, knowledge and confidence when teaching about these very sensitive topics. While MHM requires ‘good hardware’, that is, safe and functioning toilets, it cannot be achieved without changes in behaviours and attitudes. The dissemination of educational materials is a crucial step towards this end, helping to normalize puberty and make it a positive experience for all.

With the above in mind, UNICEF will expand distribution of ‘Growth and Changes’ to all girls in Grades 5–7 in its seven focus districts, with the ultimate goal of distributing the booklet to all schools and youth clubs throughout the country. In addition, UNICEF will systematically study the use of the new incinerators and changing rooms, and apply the findings as guidance for future hardware interventions.

Nigeria Menstrual hygiene management in schools and communities

In rural Nigeria, menstruation is often perceived as dirty and shameful, which influences how the issue is handled in the home. For example, men and women may maintain separate quarters while a woman is menstruating. Some women choose to not wash their pads daily or worry about how to dispose of them out of fear that they may be vulnerable to witchcraft attacks. Menstruation is treated with similar secrecy and shame at school, where the MHM challenges are compounded by limited sanitation infrastructure. In Nigeria, there is one toilet for every 600 students, and existing toilets are deemed far from adequate.

To better understand the specific MHM challenges female students face in Nigeria, UNICEF supported two studies in the country. The first was a qualitative study in south-eastern Nigeria that conducted focus group sessions with 163 adults and adolescents ranging in age from 13–45 years old. The findings confirmed that menstruation remains a very sensitive and secretive issue in rural areas. The second study focused on schools and consisted of administering a simple questionnaire to female students and students with physical disabilities. The goal was to better understand what could be done to help make toilet facilities more amenable to their needs. The students' recommendations for improvements to sanitation facilities became the basis for new solutions.

UNICEF's WASH-supported programmes in Nigeria had already focused on ensuring that many schools had separate toilet facilities for boys and girls. After the study, girls' facilities in 150 schools were redesigned to include a separate changing room with its own squat toilet, hand-washing facility, soap dispenser, waste bin and full-length mirror.



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Through research conducted in Nigerian schools, students' recommendations for improved sanitation facilities were fundamental to redesigning toilets and hand-washing stations.

The new designs ensure that water is always available for girls to attend to their menses in a safe, private place at school that enables proper disposal of sanitary napkins.

The redesign of the hand-washing facilities ensures the availability of water at all times. This allows girls to attend to their menses in a safe, private location where they can properly dispose of sanitary napkins, wash themselves and their clothes as needed, and check themselves in the mirror before returning to the classroom. Most importantly, the separate room is located in the same facility as the other girls' toilets, so girls can enter freely and privately without fear of stigmatization.

Preliminary evidence suggests the separate latrines are a welcome addition for girls and help minimize menstrual-related fear or stigma. The modified design of girls' sanitation facilities has now been accepted as a national guideline in Nigeria.

Advocacy efforts are under way to scale up the MHM intervention to reach all schools. The effort will include development of a manual outlining the purpose and benefits of the new facility design, and activities that sensitize teachers, parents, grandparents and other relevant parties to the MHM needs of girls. Steps are also being taken to ensure that pads are available for girls at schools on an emergency basis. In the future, UNICEF plans to support programming aimed at training for health promoters who work directly with communities to raise awareness about menstrual hygiene management.

Nepal Reaching adolescent girls

"Why feel shy? We are talking about our rights" is the message of an adolescent-friendly comic book that teaches young girls in Nepal about menstruation and MHM. This is one of the many strategies UNICEF has utilized during the past year to address the menstrual taboos in many parts of the country. A UNICEF-supported study found that menstruation is not openly discussed and that girls are often ostracized during menstruation. Many are even restricted from entering their own homes.

The comic book is designed to raise awareness, encourage girls to talk about menstruation with ease and confidence, and teach menstrual hygiene management. In addition, UNICEF supports an adolescent-focused radio programme, 'Sathi Sangha Man ko Kura' (Chatting with My Best Friend) as another venue for talking about MHM. The programme is very popular and reaches 6 million young people.

Many Nepalese girls also participate in UNICEF's Girls' Access to Education (GATE) programme, which consists of teaching life skills and holding informal classes for girls who do not regularly attend school. As numerous girls from poor families are unable to afford sanitary napkins – and instead use old pieces of torn cloth – the programme teaches girls how to produce low-cost, reusable pads from locally sourced materials.

More than 6,000 girls from seven districts have received training on how to produce the pads. Along with making a much-needed product more affordable and available, the training sessions are educational. As one of the participating girls reports: "This type of skill is very useful for us. This will help to improve our health and perception towards menstruation." The sessions utilize a peer-to-peer approach, which has been found to be an effective tool for MHM education in the



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The Government of Nepal is very supportive of female students' needs and has approved a nationwide design for girl-friendly school latrines.

UNICEF initiatives in Nepal include teaching girls how to produce low-cost sanitary pads and awareness raising that encourages girls to talk about menstruation with confidence.

Above, lower secondary school students discuss menstrual hygiene with their teacher.

Nepalese context. UNICEF also partners with the Women's Federation to produce the pads in the Bandipur and Tanahun Districts of western Nepal.

In addition, a joint study by UNICEF and the Department of Education in 2012 found that female students face particular MHM challenges. Nearly three quarters of schools have at least one toilet, but only 36 per cent have a separate toilet for girls. Thirty per cent of girls in the upper levels of the school system reported missing class during menses due to a lack of sanitation facilities. Girls also do not view school as a place where they can seek information on or support for MHM. When asked with whom they feel comfortable talking about menstruation, most girls listed their peers, with only 3 per cent listing teachers.

The Government of Nepal is very supportive of young girls' needs and has approved a new design for girl-friendly latrines to be incorporated into schools across the country. In 2013 and beyond, the Government will work with 300 schools in 12 districts to offer training on how to address the MHM challenges that female students face. UNICEF will also continue teaching girls through its GATE programme as a way to enhance their menstrual health knowledge, foster empowerment and provide them with income-generating skills.

Malawi Menstrual hygiene management in schools

In partnership with UNICEF, the Ministry of Education in Malawi explored WinS challenges in the education system in 2008, and found that only 23 per cent of primary schools had sanitation facilities of acceptable quality and quantity, and 81 per cent of primary schools lacked hand-washing facilities. The inadequate toilet-to-student ratio in many schools was found to contribute to the overuse and filthy conditions of existing sanitation facilities, and led to a reported high absenteeism by female students, who prefer to use home toilets.

Recognizing the MHM-related barriers of the existing water and sanitation facilities in schools, UNICEF is working with WASH in Schools partners in Malawi to assure that schools at both the primary and secondary levels support girls during menstruation.

The major goal of the WinS response in Malawi has been to increase the number of latrines and hand-washing facilities in schools, while also assuring privacy for female students. UNICEF is currently supporting government partners in building separate sanitary facilities for girls and boys in schools. Doors are being installed in latrine cubicles and/or privacy walls are being added at the entrances of latrines so that girls feel more secure inside.

A long-term aim is to support the construction of at least one larger latrine stall in girls' sanitary facilities in each school, and equip that stall with a bucket of water or hand-washing station so that girls can privately wash their hands and any menstrual stains that may be on their clothes.

UNICEF is supporting local partners in piloting the provision of sanitary pads to girls in schools in Chikwawa and Mangochi Districts and in establishing 'mother groups' to make locally designed sanitary towels for girls. The product is a washable, reusable cotton towel that doubles as underwear, using attached waist ties. In rural communities in particular, the cost of commercial disposable sanitary pads sets them out of reach for most girls. This locally made solution is particularly appropriate, given its affordability and because it eliminates the need for disposal.

UNICEF and local partners are also working to make information about menstrual hygiene management – typically viewed as a 'strictly secret' topic – more widely available to girls. In the Malawian context, the responsibility for providing guidance to girls at the onset of menarche usually falls to aunts or grandmothers. The guidance often includes advice on how to make sanitary cloths and on the cultural norms associated with puberty, including strictures against talking to boys.

To improve girls' access to accurate MHM information, UNICEF is partnering with school-based volunteer mother groups that have emerged in at least 2,179 primary and some secondary schools as an important alternative resource for girls. In collaboration with local partners, UNICEF has supported MHM trainings of three to five days for these groups, and developed a manual covering a wide range of topics affecting girls' education.

Also under way is an effort to develop a locally adapted MHM booklet for distribution to girls in schools. Moving forward, UNICEF and local partners plan to work to raise awareness about menstrual hygiene management at various institutional levels, in schools and in the broader community, as well as among key civil society stakeholders, policymakers and donors.

Ethiopia **Developing washable sanitary pads and raising MHM awareness**

In Ethiopia, a needs assessment conducted by Tired Community Empowerment for Change Association (TCECA), a local NGO, indicates that school-aged girls face significant challenges with the onset of their menses, and receive little information or support from family or teachers since menstruation is often perceived as being polluting or shameful. Even health extension workers report that the issue is not covered in their trainings and that they do not talk freely about menstruation because of its taboo nature.

In response to these findings, TCECA has worked to raise awareness about the importance of menstrual hygiene management and its association with girls' school performance through the distribution of informational leaflets and posters. TCECA has also provided training on MHM to teachers and health extension workers, and conducted outreach to provide information on the issue in 30 girls' clubs.

SNV Ethiopia, another local NGO, identified insufficient access to affordable sanitary pads as a crucial concern for female students after discussions with key stakeholders. This is particularly a problem in rural areas, where many families are unable to afford sanitary pads or underwear. In these contexts, girls have traditionally used old cloths and rags to manage menses. These materials, however, do not provide sufficient protection from menstrual leakage throughout the school day. In addition, due to poor washing and drying facilities, these materials are often not adequately cleaned.

In response to this challenge, SNV Ethiopia designed and is now testing sample reusable sanitary pads in four schools. These pads are sewn by women in the community and reasonably priced for local standards. Together with UNICEF, SNV is analysing student feedback from the pilot programme. The demand for the reusable pads already far exceeds production. As a result, SNV is investigating options for scaling up production across the country.

Moving forward, UNICEF aims to support the revision of the Ethiopian National Sanitation and Hygiene Strategy to include menstrual hygiene management. It also aims to include MHM in the national school WASH programme for scale-up of successful interventions. Facilitating access to water is a key concern, given that only 34 per cent of primary schools in Ethiopia have access to a water supply, and that schoolgirls overwhelmingly lack facilities for cleaning themselves or hand washing.

UNICEF plans to focus future MHM efforts on improving advocacy, encouraging funding for systematic MHM-related research and evidence-based interventions, and raising awareness in order to capitalize on emerging opportunities to bring about improvements in menstrual hygiene management for school-aged girls.



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SNV Ethiopia designed and is testing reusable sanitary pads in four schools. The pads, sewn by women in the community, are reasonably priced for local standards.

With support from UNICEF, SNV is analysing student feedback on the initiative. Demand for the pads far exceeds production, and the pilot is being considered for scale-up nationwide.

Session III.

MHM in Humanitarian Emergencies

The third thematic session of the MHM in Schools Virtual Conference included both country-specific presentations and coverage of key global issues. Topics included findings from UNICEF research in post-disaster and post-conflict settings to explore if the MHM needs of adolescent girls and women are being adequately addressed. The addition of MHM supplies to the hygiene kit distributed by UNICEF in humanitarian emergency responses was also discussed.

Specific recommendations originating from this session on humanitarian emergencies include:

- It is necessary to better understand the MHM-related challenges faced by girls and women in varying humanitarian contexts.
- Criteria and minimum standard guidelines should be developed for implementing, monitoring and evaluating menstrual hygiene management in humanitarian emergency contexts.
- It is also necessary to identify systems for assuring better coordination and minimal overlap in the multi-sectoral MHM-related humanitarian emergency responses.

Summaries of the conference presentations from Somalia, Afghanistan, Pakistan, UNICEF Supply Division (Copenhagen) and UNICEF Headquarters (New York) are provided in the following subsections.

Somalia Case study – The Management of Maturation Project

As the case of Somalia illustrates, the MHM challenges of female students can be addressed even in times of drought, famine and ongoing civil war. In Puntland State, for example, UNICEF and partners are responding to the MHM challenges that schoolgirls face through the Management of Maturation Project (MMP), which aims to promote healthy maturation for girls and boys through advocacy and education.

The decision to embed issues of menstruation within the framework of maturation was a creative solution to the local challenge of openly talking about the body and changes associated with maturation. MMP also challenges common misperceptions that equate menstruation with illness and a girl's readiness to marry.



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The Management of Maturation Project in Somalia promotes healthy maturation for girls and boys through education and advocacy in schools and the community, including camps for internally displaced people. The intervention includes engaging girls and boys in producing sanitary kits with MHM materials.

Above, a girl and her teacher review homework at a primary school in Hargeisa District.

Many youth in Somalia reside in camps for internally displaced people and cannot attend school. Youth who are not in school are unable to access the same information and resources as their school-going peers. MMP thus works with boys' and girls' clubs, in addition to schools and parent groups. The project has also supported the establishment of clubs in areas that do not have any.

Through radio programmes and the dissemination of educational materials, the MMP teaches boys, girls and parents about healthy maturation, including menstruation. The radio programmes are hosted by influential members of society, such as religious leaders, teachers and clan elders, and help break the silence surrounding menstruation.

In 2008, UNICEF conducted research in 20 schools to understand the issues that would need to be addressed by the project. Surveys, interviews and focus groups were completed with teachers, religious leaders, girls, boys and community education committee members.

The study found that less than 5 per cent of girls in Somalia could afford sanitary materials. It also found that girls in Grades 6–8 would miss up to five days of school each month due to menses.

The Management of Maturation Project has responded to these challenges with a targeted intervention that engages girls and boys in primary schools in the production of sanitary kits. Each kit includes two pairs of underwear, six sanitary pads, soap and instructions for use. To date, 60,000 kits have been produced. The intervention supplies girls with much-needed materials at a low cost – which allows them to stay in school during the days when they are menstruating – and provides an income-generating opportunity for youth. The latter is especially beneficial to girls living in camps for internally displaced people.

The project is implemented by a women’s organization that has developed a training package consisting of a fact sheet and an information guide about the role of parents in supporting children during maturation. Representatives of the women’s organization received training on how to instruct others in the use of these materials, thus expanding the reach of activities.

Work in Somalia, however, is far from complete. Girls are still reluctant to talk about their bodies and physical changes. They also report feeling ashamed when using toilets in school because the facilities do not provide privacy or proper waste receptacles. Furthermore, the reusable sanitary kits produced by boys’ and girls’ clubs are not enough to meet the demand.

In response to this reality, UNICEF is lobbying the Ministry of Education to address the management of maturation through school curricula and teacher training throughout the state of Puntland. UNICEF will also continue to disseminate information on maturation through school clubs and encourage inclusion of related topics in the school curriculum.

Afghanistan Menstrual hygiene management in schools

Many girls in Afghanistan are not enrolled in school. For the 37 per cent who are, managing their menstruation at school is not easy.

In 2010, the Ministry of Education, with support from UNICEF, conducted an assessment of school water and sanitation facilities. The assessment found that that only 40 per cent of schools in Afghanistan have toilets, the majority of which were provided by UNICEF during the past few years. These facilities are generally single-sex, which eases some of the discomfort for girls associated with using a co-ed toilet. However, the schools lack maintenance resources and the toilets are often dirty or non-functional.

Following the assessment of WASH in Schools facilities, UNICEF conducted a study of knowledge, attitudes and practices related to menstrual health and hygiene in Afghanistan.

The study revealed that 30 per cent of female students stay home on days they are menstruating. Girls also reported menstrual-related restrictions regarding food, reduced participation in sports and limited opportunities to bathe.

The majority of girls, 62 per cent, were found to manage their periods using old pieces of cloth; 30 per cent of the girls used new pieces of cloth and 8 per cent used sanitary pads. All girls reported knowing the importance of washing their hands after changing used materials, but only 20 per cent reported having access to soap.

For girls who attend school during menses, the environment presents challenges to managing their periods comfortably, such as shortages of water and the location of incinerators for disposing of used materials. Many girls resort to bringing their own water to school. In addition, an absence of female teachers and counsellors in schools makes many girls reluctant to seek sanitary pads when they need them, as well as to voice concern about school sanitation facilities and inquire about MHM.

The Ministries of Education, Health and Rural Development are heeding the call to address the sanitation needs of all students and of school-going girls in particular. A new National Rural WASH Policy recommends that WASH become a priority in all schools by 2015, and the Afghanistan National Development Strategy emphasizes the need to improve hygiene and sanitation in schools to support the Millennium Development Goals. A priority is to implement changes that will enable female students to practise menstrual hygiene management privately, comfortably and hygienically.

The Ministries of Education, Health and Rural Development are addressing sanitation needs for all students, and girls particularly, with national policy making WASH a priority in all schools by 2015.

Drawing on models from other countries, the strategy in Afghanistan includes construction of facilities that have a separate washroom for girls with a toilet, hand-washing station, incinerator and mirror. Efforts are also being made by UNICEF, the Ministry of Education and an NGO partner from Bangladesh to meet the need for more sanitary napkins and consider different designs and marketing strategies for the production of pads using locally available materials. In addition, sanitary napkins are now being included in hygiene kits that are distributed during humanitarian emergencies.

As a way forward, UNICEF and its partners are seeking guidance from other countries on how to integrate education about girls' hygiene into the national school curriculum.

Pakistan Menstrual hygiene management for schoolgirls

In Pakistan, approximately 30 per cent of children are not enrolled in primary school, and enrolment and retention rates are lower among girls than boys. Many reasons exist for this gender gap, including diverse religious and cultural practices that restrict the demand for girls' education.

Although important steps have been taken to improve WASH facilities in schools – which is a priority for enabling girls to stay in school – significant gaps remain in assuring that girls can comfortably and successfully manage their menstruation while in school. Results from a recent study in areas affected by the 2005 Kashmir earthquake near the city of Muzaffarabad indicate that almost 50 per cent of girls miss school during menstruation, and about 40 per cent of girls do not have access to protective materials to manage their menses.

In this context, the vast majority of girls report using cloths or rags, with only about 20 per cent of girls having access to sanitary pads, due to the high cost or insufficient availability in local markets. Girls also report a lack of adequate facilities in schools for keeping clean and disposing of used menstrual materials. The study also confirms that menstruation remains a



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Ongoing research in Pakistan indicates that cultural expectations regarding menstruation can be very burdensome for girls who are living in emergency situations.

UNICEF and partners are developing strategies for providing girls with more MHM knowledge and for improving sanitation facilities in temporary learning centres and schools.

taboo topic. While close family members – usually mothers and sisters – do provide information to girls, teachers are generally unwilling to discuss the topic.

Research involving 1,094 girls is exploring UNICEF Pakistan’s response in emergency contexts. UNICEF aims to further clarify how MHM-related barriers affect girls in school and to identify how to better support the needs of girls during menstruation through WASH interventions. The study’s preliminary findings suggest that cultural expectations related to menstruation are very burdensome for girls in emergency contexts. Often, access to even cloths and rags is difficult, and girls may be separated from their mothers and sisters, who would normally provide support.

WASH specialists envision a response in camps for internally displaced persons that includes at least three elements: (1) construction of separate and protected sanitation facilities for women; (2) provision of sanitary towels with hygiene kits; and (3) educational interventions targeted to support girls’ successful menstrual hygiene management in camps.

As UNICEF and local partners move forward, key goals include the clarification of basic MHM requirements for female students and, more broadly, in the context of emergency response. In addition to improving sanitation infrastructure, objectives include adapting school and teacher training curricula to include menstrual hygiene management; producing additional educational materials; promoting the development of low-cost sanitary pads; partnering with health sector leaders to develop a pain relief medication strategy; and investigating the potential to involve female health workers in MHM efforts.

Copenhagen UNICEF Supply Division: Supporting MHM in emergencies – A supply chain challenge

Humanitarian emergencies represent a supply chain challenge for UNICEF in its efforts to support menstrual hygiene management for girls and women. The Supply Division for UNICEF’s emergency response is based in Copenhagen, where staffers continuously search for innovative products that can better meet the needs of individuals in humanitarian crises. These supplies are positioned at packing hubs around the world so they can be deployed rapidly in the context of emergency response. Within 72 hours of an emergency, the division is prepared to provide health kits, water and sanitation products (such as purification tablets), and hygiene kits.

The standard hygiene kit for emergency situations typically includes an MHM component with sanitary towels and underwear for females. More recently, the division launched a reusable menstrual hygiene pack that includes a cotton or flannel pad holder, four underwear liners in two sizes, and a storage pouch that contains use and care instructions.

While these provisions are essential, research has demonstrated the need to better tailor MHM provisions to culturally specific needs, while still prioritizing rapid distribution, timely replenishment of MHM supplies and issues of affordability. Additional challenges include the proper disposal and environmental impact of menstrual hygiene products in emergency settings, the availability of water, and the accessibility of private and secure spaces for self-cleansing and the washing and drying of used menstrual cloths.

With these challenges in mind, the development of regionally tailored MHM kits is being considered. Towards this end, the Supply Division has requested a review of local MHM products by all country offices, and it is supporting other humanitarian agencies and private-sector initiatives to better understand the range of potential products that might meet MHM needs in emergency situations. A range of products are under consideration, including commercially produced sanitary napkins, cloth towels, a collection of locally produced and sustainable pads (including ones produced by Afripads, Makapads, Padback and SHE), and even a menstrual cup.

In addition to field surveys and focus groups in emergency settings, the division has taken advantage of UNICEF's 'Innovation' website, opening the search to feedback from interested parties around the globe. Moving forward, the division will look to stock its packing hubs with the most locally appropriate products that are amenable to the constraints of emergency settings.

New York UNICEF Headquarters: **Taking stock of support from UNICEF and partners**

How do emergencies affect normal processes for menstrual hygiene management? What are the needs of menstruating girls and women during emergencies, and how can UNICEF support these needs? These are the questions that UNICEF Headquarters staff, in collaboration with specialists from WASH, Child Protection and the Supply Division, undertook to answer in a recent research initiative focused on MHM in emergency settings in Somalia, Haiti and the Philippines.

Utilizing focus group discussions with beneficiaries and key informant interviews with WASH and Child Protection staff, the team took stock of MHM needs in emergencies. Underpinning the research was the recognition that good menstrual hygiene management is closely tied to girls' and women's dignity and empowerment in emergency contexts. Moreover, safe and MHM-friendly sanitation facilities enable girls' participation in temporary learning spaces and can reduce the risk of sexual abuse in camps for internally displaced people.

In Somalia, the study population was primarily Muslim and mostly nomadic prior to displacement. Before arriving in the camps, girls and women commonly did not use any absorbent material during menstruation. Once in the camp, however, the confined environment motivated their use of old cloths or rags. Participants discussed the lack of private and appropriately equipped washing and drying facilities in the camps, as well as the lack of information about how to conduct MHM in a crowded environment. Related concerns included the expense of water provision and the cost for construction and maintenance of adequate sanitation facilities.

In Haiti, beneficiaries in the camps for internally displaced people were primarily drawn from an urban population. Girls and women in the camps had access to sanitary napkins, but they reported very poor conditions in the existing sanitation facilities. Water was not immediately accessible, and facilities were not adequately maintained. No washing or drying facilities for reusable menstrual materials were available, and women also reported a lack of information about menstrual hygiene management.

In the Philippines, the research focused on individuals displaced from flood-affected areas who were residing in relocation centres. Before arriving at these centres, girls and women relied on



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Sanitation conditions for girls and women in emergency camps in Haiti make menstrual hygiene management difficult. Water is not readily accessible, and it was reported that no facilities were available for washing or drying used MHM materials.

Above, a 16-year-old girl looks out at a camp in Port-au-Prince, in 2011.

various menstrual hygiene products and displayed good knowledge of MHM. However, a lack of clean water to wash and insufficient private facilities in the relocation centres created MHM-related challenges.

Across these settings, the team's findings underscored the need for an informed approach to menstrual hygiene management. Although beneficiary consultation is a fundamental principle, all focus group participants suggested that this was the first time anyone had spoken with them about MHM-related issues. The research team concluded that a more coordinated, cross-sectoral approach to MHM is essential. The research revealed that MHM-related activities are largely conducted autonomously and that there is significant confusion regarding sectoral responsibilities relevant to the issue.

Looking to the future, the team's recommendations for improving MHM-related responses in emergencies include:

- During preparatory stages, define roles and responsibilities, identify cultural norms of menstrual hygiene management, and determine a distribution system and pre-positioning of supplies.
- During response and early recovery stages, coordinated activities should include an initial rapid assessment regarding gender-appropriate water sanitation and disposal facility requirements, as well as gender-specific beneficiary communication and opportunities for feedback.
- During recovery stages, the team recommends ongoing beneficiary communication and, where appropriate, partnering with community and religious leaders for MHM messaging.

Conclusions and Recommendations

WASH in Schools programmes have a fundamental role in creating school environments that make it easier for girls and female teachers to manage menstrual hygiene. As emphasized in discussions during the Menstrual Hygiene Management in Schools Virtual Conference, these programmes should assure that girls' experiences in school are more comfortable and conducive to learning by providing appropriate facilities and enriched hygiene promotion activities that include MHM topics.

Additional conclusions and recommendations drawn from the conference include the fundamental importance – both in development and humanitarian contexts – of multi-sectoral involvement to address the MHM needs of girls and female teachers through WASH in Schools. Suggested sector involvement includes the water and sanitation community; researchers and practitioners focused on behavioural change and social norms to assure appropriateness of design and uptake and usage of MHM-adapted facilities; and the education community, both in schools and at the policy level.

To assure that menstrual hygiene management is adequately addressed in future WASH in Schools programming, it is recommended that these multi-sectoral partnerships collaborate on synthesizing the available evidence and identifying the gaps in the knowledge needed for effective and efficient response. MHM-related activities should be focused and designed with a view towards going to scale. In addition, attention must be given to the communities surrounding the school system, as their engagement will help foster an enabling environment for girls.

Another overarching conclusion from the conference was the recognition of the many benefits to be gained from undertaking collaborative approaches between academics, practitioners and global organizations. Such approaches can effectively assist experts in the field to better understand the MHM-related barriers facing girls, and the most effective approaches for addressing menstrual hygiene management as part of WASH in Schools programmes. Many such collaborations and partnerships are already under way and are serving an essential role in advancing the agenda for menstrual hygiene management within WASH in Schools.

WASH in Schools programmes should assure that girls' experiences are more conducive to learning by providing appropriate sanitation facilities and hygiene education that includes MHM.

In conclusion, three key recommendations for moving the MHM agenda forward were identified during the conference:

Recommendation One

Document current menstrual hygiene management practices and the barriers girls face in various contexts. Strengthen the evidence base, both within and across countries, by carrying out studies to understand the relation between inadequate MHM programmes and girls' school performance and attendance. Conduct research that enables individual countries to better understand the MHM-related barriers facing girls and female teachers in their own school systems. Consolidate and share experiences on the most efficient and cost-effective interventions that are simple, innovative, and can be used in WASH in Schools programmes across a range of contexts.

Recommendation Two

Develop guidelines for integration of a minimum package for menstrual hygiene management into existing WASH in Schools programmes. Guidelines may include policy guidance on implementation, facility designs, and monitoring and evaluation of MHM programmes.

Recommendation Three

Engage with national governments from the very beginning when initiating menstrual hygiene management activities to ensure buy-in and additional support for multi-sectoral involvement. Menstrual hygiene management is a social issue that cannot be addressed by working in schools alone. It is necessary to explore additional avenues and expand existing programmes targeted to reach girls and communities. Such activities should include MHM guidance and encourage girls' self-efficacy and confidence when managing menstruation en route to and in the school setting. Moreover, communities should be aware of the barriers to menstrual hygiene management that girls face in school, as well as their role in enabling girls to successfully manage menses in school and at home.



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This primary-school student in Somalia was full of excitement on the first day of school. WASH in Schools programmes that include menstrual hygiene management are a vital way to help girls complete their education.





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THEMATIC SESSIONS AND PRESENTATIONS

Session I. Exploring the MHM Barriers Faced by Girls

Emory University-UNICEF research collaboration: Menstrual hygiene management among girls in school – Getting to a model of an enabling environment

Rwanda: MHM in schools – An assessment for applied learning and improved practice in Gicumbi District

Bolivia: National context and preliminary findings in Cochabamba Department

The Philippines: National context and preliminary findings in Masbate Province

Sierra Leone: Baseline study on MHM for schoolgirls

Session II. Approaches to Addressing MHM for Girls

India: Menstrual hygiene – Manage it well

Tanzania: Supporting schoolgirls with their menstrual hygiene management

Nigeria: Menstrual hygiene management in schools and communities

Nepal: Reaching adolescent girls

Malawi: Menstrual hygiene management in schools

Ethiopia: Developing washable sanitary pads and raising MHM awareness

Session III. MHM in Humanitarian Emergencies

Somalia: Case study – The Management of Maturation Project

Afghanistan: Menstrual hygiene management in schools

Pakistan: Menstrual hygiene management for schoolgirls

UNICEF Supply Division (Copenhagen): Supporting MHM in emergencies – A supply chain challenge

UNICEF Headquarters (New York): Taking stock of support from UNICEF and partners

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