Let’s Talk About Menstruation: Towards an Integrated Approach to MHM in Schools and Communities

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Presented by:
Shahrukh Mirza, Programme Officer-Organisational Learning
WaterAid Bangladesh
Bangladesh

» Population: 156.6 million
» 98% Bengali, 2% ethnic minorities
» 87% Muslim, 12% Hindu, 1% Buddhist, 0.5% Christian
» No. of girls in primary school = 7,853,967 (compared to 7,699,007 boys)
» No. of girls in secondary school = 4,519,091 (compared to 3,982,351 boys)
» Achieved gender parity in primary and secondary education

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MHM context in Bangladesh

» Lack of knowledge about menstruation and menarche
» Poor hygienic practices
» Low usage and availability of sanitary napkins
» Lack of adequate facilities
» Myths and misconceptions
» School absenteeism
Description of interventions

» Community level:
  › Girls’ and mothers’ groups
  › Day observation and other events

» Schools:
  › MHM facilities and sessions
  › Orienting teachers

» National level:
  › Research on MHM
  › Advocacy and policy influencing

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Programmatic approach: Improving facilities

» Building MHM-friendly facilities: schools, slums and public places
  › Raised platform
  › Water and soap inside the chamber
  › Bar for drying cloth
  › Disposal bin
Programmatic approach: Building knowledge and awareness

» Orientation to school teachers
» Adolescent girls’ groups in schools and communities
» Courtyard meetings
Programmatic approach: Research and advocacy

- National level advocacy:
  - Overturning stigma: ICC Cricket World Cup sporting events
  - Youth engagement: Shorno Kishoree TV programme
Influencing policymakers: Roundtable on ‘Let’s Talk About Menstruation’

Generating evidence: National Hygiene Baseline Survey

Making MHM a part of the conversation around public sanitation
Successes and challenges

Successes:

› Government circular on sanitation and hygiene in schools – “separate toilets for girls with provision of Menstrual Hygiene Management facilities”

› Some evidence of reduced school absenteeism and increased enrolment

Challenges:

› Still a challenge to break the silence

› Disposal

› Involving men and boys

› Scaling up
Recommendations for adaptation

» Local context: Developing context-specific IEC/BCC material

» Designing with the community and partners

» Building a body of evidence

» Multi-pronged approach: Reach vulnerable groups directly, and evidence-based advocacy for policy level changes
Conclusion

» NHBS indicates widespread lack of knowledge and adequate facilities in schools – further work needed on both practical (sanitation facilities) and strategic dimensions (knowledge and norms).

» Research needed on context-specific disposal of used sanitary materials

» Men and boys are still not part of the conversation – need to bring in male peers (students, teachers, principals)

» Need for adolescent-friendly health services

» Generally, more integration needed between health, education and WASH sectors
Thank you!

Shahrukh Mirza, Programme Officer-Organisational Learning
ShahrukhMirza@wateraid.org

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