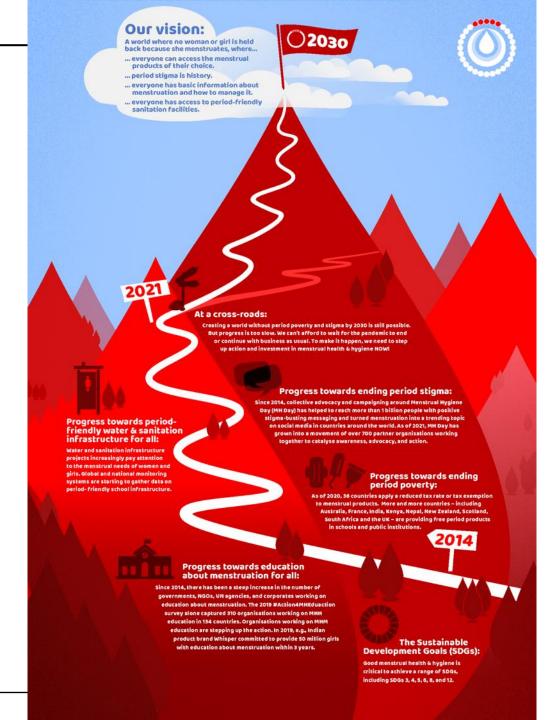
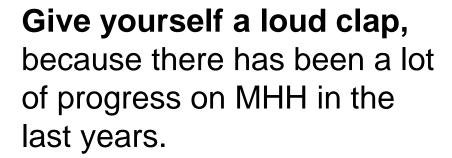
Progress on Menstrual Health and Hygiene in Africa

Progrès en matière de santé et d'hygiène menstruelles en Afrique









Applaudissez-vous bien fort

parce qu'il y a eu beaucoup de progrès au cours des dernières années.









By 2030, #WeAreCommitted to making periods a normal fact of life for all people who menstruate

D'ici 2030, #NousNousEngageons à faire des règles un fait de vie normal pour toutes les personnes qui ont leurs règles.





Context / contexte

162 million women and girls menstruate in West and Central Africa.

57% of primary school-age girls and approximately53 % of secondary-age girls are out of school

Menstruation is a key reason for girls not to attend school (around 1-4 days every month): pain, lack of menstrual products, WASH facilities and family.

She is at risk falling behind, and there is an increased risk of early pregnancies, child marriages, and cycle of poverty.

Good MHH can keep girls in school and improve health and wellbeing

- -> Better educational outcomes -> better health for them and families -
- > better financial opportunities -> benefit the entire country Contribute to gender equality!

162 millions de femmes et de filles ont leurs règles en Afrique de l'Ouest et Centrale.

57% des filles en âge d'aller à l'école primaire et environ53% des filles en âge d'aller à l'école secondaire ne sont pas scolarisées.

Les menstruations sont une des principales raisons pour lesquelles les filles ne vont pas à l'école (environ 1 à 4 jours par mois) : douleur, manque de produits menstruels, d'installations EHA et de famille.

Elles risquent de prendre du retard, et sont face au risque de grossesses précoces, de mariages d'enfants et le cycle de pauvreté est accru.

Une bonne SHM peuvent permettre aux filles de rester à l'école et améliorer leur santé et leur bien-être

-> ce qui se traduit par de meilleurs résultats scolaires -> une meilleure santé pour elles et leurs familles -> de meilleures opportunités financières -> un bénéfice pour le pays tout entier Contribuer à la réalisation de l'égalité entre les hommes et les femmes



Awareness / sensibilitation





Progress

- More attention globally and nationally
- Especially through Menstrual Hygiene Day
- Social media is increasingly strong in Africa



Progrès

- Plus d'attention au niveau mondial et national
- En particulier, lors de la Journée de l'hygiène menstruelle
- Les réseaux sociaux sont de plus en plus puissants en Afrique

10

Challenges / gaps

- Sustaining and increasing the momentum
- Turning awareness into action and substantial funding
- Move beyond products as the only solution
- Make it "everyone's business"

Défis et lacunes

- Soutenir et renforcer l'élan
- Transformer la prise de conscience en action et en financement substantiels
- Ne plus considérer les produits comme la seule solution
- En faire "l'affaire de toutes et tous









Ghana



- We are developing a National Menstrual Hygiene Management (MHM) Strategic Plan to address the gaps in MHM programming in the country. The Ministry sent out Guidelines on management of menstruation in school and institutions in
- We have strengthened the capacity of education stakeholders to support menstrual health programs in schools We have developed information and communication materials on menstrual health and hygiene targeting teachers, learners and
- We have developed message booklets for adolescents on their sexual and reproductive

17 2

0

- Eliminate the negative cultural norms, beliefs and practices that perpetuate poor Menstrual Hygiene Management among girls and women
- Increase knowledge of access to, and utilization of safe and hydienic menstrual materials, products, improved facilities, infrastructure and services for effective Menstrual Hygiene Management for girls and women of menstrual age.
- Increase the knowledge and institutional capacity of partners/ stakeholders and key sectors to effectively deliver on MHM interventions in the Country.
- Influence and support the development of a more effective enabling Policy and Legal



Les menstruations ne doivent pas être un obstacle pour l'éducation d'une fille. Au #Sénégal, #UNICEF explore des moyens nouveaux et créatifs de produire localeme fournitures menstruelles, afin que les filles ne ratent pas leur éducation. #MHDay2022 #MenstruationMatters

UNICEF Sénégal

28 mai, 12:12 · 🚱







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divinity brust

Advocacy



Social media contributions by region

Region	% of total 2022	no. of contributions 2022	
North America	19.29	43,397	
South America	1.54	3,461	
Europe	16.46	37,045	
Asia	19.79	44,535	
Africa	41.96	94,410	
Oceania	0.96	2,152	
Global total		225,000	



Reflecting on menstrual hygiene: Committing to action #WeAreCommitted

The Namibian The Weekender YouthPaper Back of the Book Supplements (

MEGA SmartBuy Page 1 Company 1 Compa

'No girl should miss school due to menstruation'
Next - National | 2022/9-31

Sport 1000 00 18
Namibia 'must grab' Unified Cup chance

NAMIBIAN youth should get involve sport to benefit for

the many opportunities the industry offers, says Special Olympics Namibia (SON) board chairperson Julien Garises.

Namibia all in for Unified Cup

by Charlose Nambudja

PAMBELELENI Matsi, the chief executive officer of Diagnostic Lab, says no child should miss school due to menstruation.

Matsi said this at a handing-over event of sanitary pads at State House last week.

Over 260 boxes of sanitary pads were donated to regional governors for further distribution among identified schools across the country.

Nambia joined the world in celebrating Memotrual Hygiene Day on Seturday.

The day aims to highlight the importance of memstrual care and the issues those who do not have access to sanitary pads are faced with.

The goal of awareness events is to make menstruation a mormal part of file by 2030.



CSOs Seek Suspension of Taxes, Import Duties On Pads, Petition Lawmakers

awn

31 MAY 2022

ociety organizations (CSOs) including Community Healthcare Initiative (CHI), Paramount Young we (PAYOWI) and others have called on President George Manneh Weah to issue an Executive ding taxes and import duties on sanitary pads.

hat this will impact women and girls' access to sanitary pads, making them more affordable and

n Chief, we ask you to publicly stand with the women and girls of Liberia like you have always Period Poverty to enable women and girls to live, learn, lead and contribute meaningfully in their head of communication and mobilization at Community Healthcare Initiative, Nusone Euphemia then she read a petition at the Legislature Tuesday, 31 May 2022.

The Cable

ts needed to in many parts The Nation

Busines

Policy Rada

Petrobaron

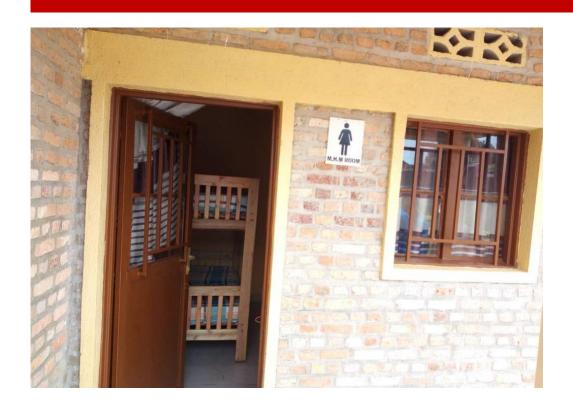
trobarometer I

Menstrual Hygiene Day: Enact law for free sanitary pads in schools, NGO tells n'assembly





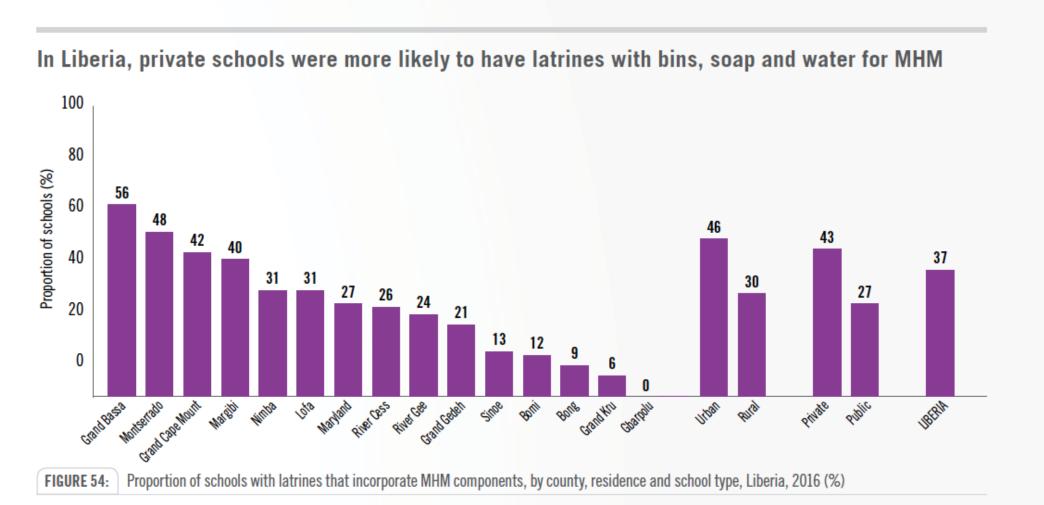
School infrastructure







Au Libéria, les écoles privées étaient plus susceptibles d'avoir des latrines avec des bacs, de l'eau et du savon pour la GHM





Education / éducation







Progress

- Huge attention
- Education solutions available
- Attention to further menstrual needs in schools
- Digital solutions



- Une grande attention
- Solutions éducatives disponibles
- Attention aux besoins menstruels supplémentaires dans les écoles



Challenges / gaps

- Infrastructure progress is too slow, disposal remains a challenge
- Boys education
- Lack of hard evidence of impact of keeping girls in schools

Défis et lacunes

- Les progrès en matière d'infrastructures sont trop lents, l'élimination des déchets reste un défi
- Éducation des garçons
- Manque de preuves tangibles de l'impact du maintien des filles à l'école





Menstrual products / produits menstruels



The price of a packet of period pads had increased by 117% in Zimbabwe and by 50% in the Democratic Republic of Congo by April compared to January, found ActionAid International, which campaigns on women and girls' rights.



Progress

- Increased data and understanding around scale of menstrual poverty
- Nation-wide and local to provide menstrual products to schools and institutions
- Period -tax removal in many countries
- Innovation



Challenges / gaps

- Effective approaches and sustained financing to product distribution "The devil is in the details"
- Price increases
- Market is challenging for small to medium sized companies,
- Product standards for reusable



Progrès

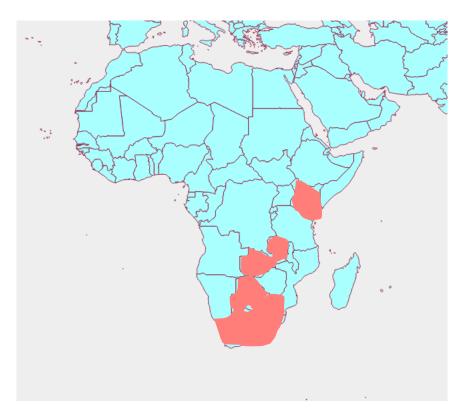
- Amélioration des données et de la compréhension de l'ampleur de la pauvreté menstruelle
- Fourniture, au niveau national et local, de produits menstruels aux écoles et aux institutions
- Suppression de la TVA dans de nombreux pays
- Innovation

Défis et lacunes

- Approches efficaces et financement durable pour la distribution des produits "Le diable se cache dans les détails"
- Inflation
- Le marché est difficile pour les petites et moyennes entreprises,
- Normes de produits pour les produits réutilisables

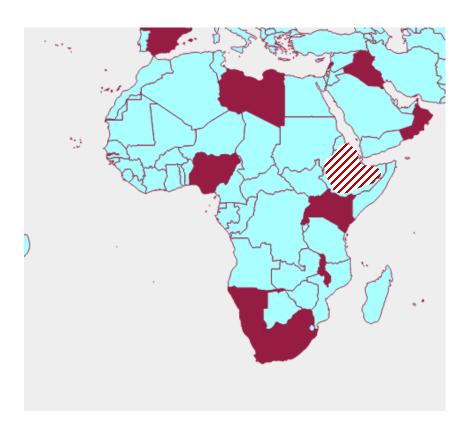


Products in schools



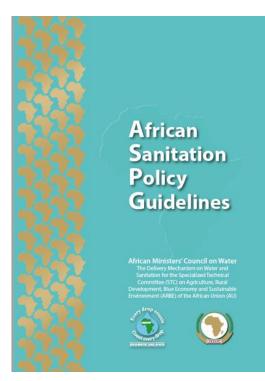
Kenya South Africa (2020) Botwana (2017) Zambia (Uganda presidents pledge didn't happen)

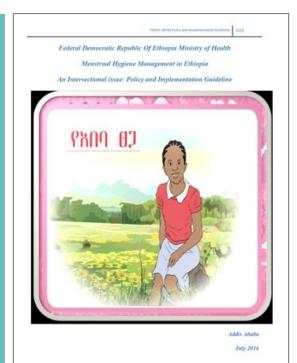
PeriodTax.org





Enabling environment / environnement favorable







Progress /

- More & more countries are having strategies
- More recognition in health and especially SRHR
- More integration of MHH indicators into national monitoring systems
- Coordinating mechanisms
- African Coalition for MH



Challenges / gaps

- Coordination with other sectors
- Localisation and financing of the strategies
- Monitoring and accountability



- De plus en plus de pays disposent de stratégies
- Plus de reconnaissance dans le domaine de la santé et en particulier de la santé et des droits sexuels et reproductifs
- Intégration des indicateurs de SHM dans les systèmes de suivi nationaux
- ACMHM (Coalition Africaine pour la GHM)

Défis et lacunes

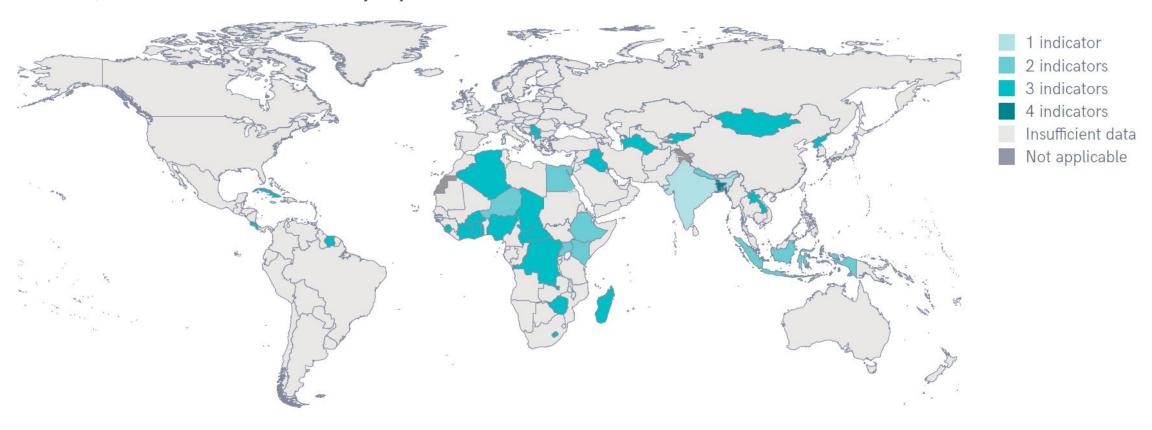
- Coordination avec d'autres secteurs
- Localisation et financement des stratégies
- Le suivi et responsabilisation





En 2020, 42 pays disposent de données au niveau national sur au moins un indicateur de santé menstruelle.

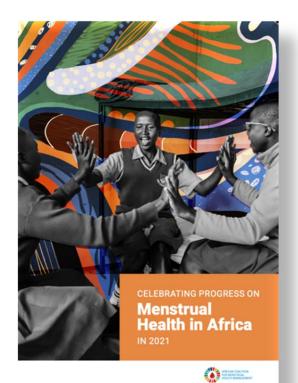
In 2020, 42 countries had nationally representative data on at least one menstrual health indicator





Ressources











www.menstrualhygieneday.org





Exercise

- ✓ Mark on the mountain path where you think your country is located (include name)
- ✓ Take 2 post-its. Write your country and organisation on top of each post-it

- ✓ Post-it 1: Write down 1 max 2 MHH successes from your country
- ✓ Post-it 2: Write down 1 max 2 MHH challenges or gaps from your country

(the focus will be on policy progress, which of course can include progress in education, products, etc.)

Kenia, MoH:. - Xyz - ABC

Kenia, MoH.

Exercice

- ✓ Indiquez dur le sentier de montagne où vous pensez que votre pays est situé (ecrire le nom des votre pays).
- ✓ Prenez 2 post-it . Inscrivez votre pays et votre organisation en haut de chaque post-it.
- ✓ Post-it 1 : Notez 1 max 2 succès SHM de votre pays
- ✓ Post-it 2 : Notez 1 max 2 défis our lacunes SHM de votre pays

(l'accent sera mis sur les progrès politiques, qui peuvent bien sûr inclure des progrès en matière d'éducation, de produits, etc.)





GOVERNMENT OF UGANDA LEADERSHIP ON MENSTRUAL HEALTH & HYGIENE MANAGEMENT

DR. CLEOPHUS MUGENYI
MINISTRY OF EDUCATION AND SPORTS
UGANDA

Uganda Population

- Currently estimated at 42 million (female 51% and men 49%)
- Population growth is 3% per annum
- Fertility rate is 5 children
- Life expectancy 64 years
- Learners in education system estimated at 15 m of which about 8.5 million in primary schools
- MHH is a key primary of government -National MHH Strategy



Population of women and girls who menstruate in Uganda

Age group	Male	Female	Total	%
10–14	2 842 000	2 ,705,000	5 547 000	13.34
15–19	2 503 000	2 ,478, 000	4 981 000	11.98
20–24	I 978 000	2 ,074 ,000	4 052 000	9.74
25–29	I 480 000	I ,764, 000	3 244 000	7.8
30–34	I 155 000	000, 378, ا	2 533 000	6.09
35–39	913 000	1,059,000	I 972 000	4.74
40–44	718 000	814 ,000	I 533 000	3.69
45–49	605 000	656 ,000	1 261 000	3.03



Background: Menstrual Health and Hygiene and Girls Education

- 25.3% of the girls who menstruate are in primary and secondary schools
- A study by IRC established that menstruation directly affects girls' participation, retention and performance
- On average, girls miss between four to five days every month
- Around 23% of adolescent girls in the age-group of 12-18 drop out of school when they begin menstruation.



Key Issues

- Generally limited knowledge of MHH among stakeholders in consideration of the comprehensive MHH framework(Situational analysis of MHH,2020)
- Inadequate preparedness of the girls by mainly the parents before menstruation
- Inadequate skills for menstrual health and management
- Inadequate knowledge on safe disposal of pads



MHH programming in Uganda

 A comprehensive and strategic advocacy started in 2012 by MoES and the MHH coalition.

Key stakeholders

- Ministry of Education and Line Ministries
- Education Development Partners
- Civil Society Organizations
- District Local Governments
- Community leaders
- Private sector



Results to Date

Increased attention of MHH at highest policy level

- MHH in the NRM-ruling Party Manifesto (2016)
- MHM integrated into the **NDP 2**, (2015-2020)
- MHH Charter with Parliament of Uganda (2015)
- Circular by MoES to all schools and institutions on the management of menstruation in schools(2015)
- Guidelines for construction of school facilities consider MHH responsive facilities such incinerators, washrooms (2020)
- MHH guidelines for schools(2021)
- MHH coalition established in 2014
- Capacity building of teachers and other stakeholders- ongoing(training manual in place)
- MHM integrated in some parts of national policy framework
 - Sexuality Education Framework (2018),
 - Lower Secondary Curriculum (2018),
 - Draft National School Health Policy
 - National Strategic Plan on Elimination of Child Marriage and Teenage Pregnancy(2022)





Construction of menstrual health and hygiene responsive facilities





National MHH Strategy Key highlights of the findings



- Limited knowledge about MHM among respondents-None of respondents reached could clearly articulate all the components of the MHM framework.
- Limited role of parents in passing on basic MHM knowledge and information
- Women and girls interviewed experienced menstrual pain as their main challenge for which they expressed limited knowledge to manage.
- Cultural perceptions still consider menstruation is a women's preserve and is supposed to be kept secret from men.



National MHH Strategy Key highlights of the findings



- Limited access to the right and adequate MHM information
- The major source of information was by Senior Women teachers
- Children with Special Needs rarely accessed MHM information
- Senior Men teachers rarely prepared boys for puberty changes.



National MHH Strategy Key highlights of the findings



- Disposal pads was the most commonly used material among school girls and career women
- Rural women and girls commonly used pieces of cloth for padding.
- 75 of the 152 girls indicated having lacked pads at one point in time



Focus Areas of the MHH Strategy

- Strategic Focus Area I: Creating an objective understanding and appreciation of Menstrual Health Hygiene from the social and health perspective
- 2. Strategic Focus Area 2: Breaking Cultural Barriers for Improved Menstrual Hygiene Management by women and girls of menstrual age



Focus Areas of the MHH strategy

- 3. Strategic Focus Area 3: Providing adequate, safe and hygienic Materials& products, infrastructure, facilities and services for Menstrual Hygiene Management for girls and women of menstrual age
- 4. Strategic Focus Area 4: Build the capacity of different actors, sectors and stakeholders at all levels to deliver improved outcomes for MHH:
- 5. Strategic Focus Area 5: Creating a more effective and enabling Policy and Legal Framework for MHM



KEY LESSONS LEARNT IN MHH PROGRAMMING IN UGANDA

Strengthen

Strengthen the multi-stakeholder approach towards Menstrual Health and Hygiene Management interventions and service provision.

Need

Need for improvements in MHH information sharingstrategies/ mediums, packaging for the different categories of people, age groups etc

Adopt

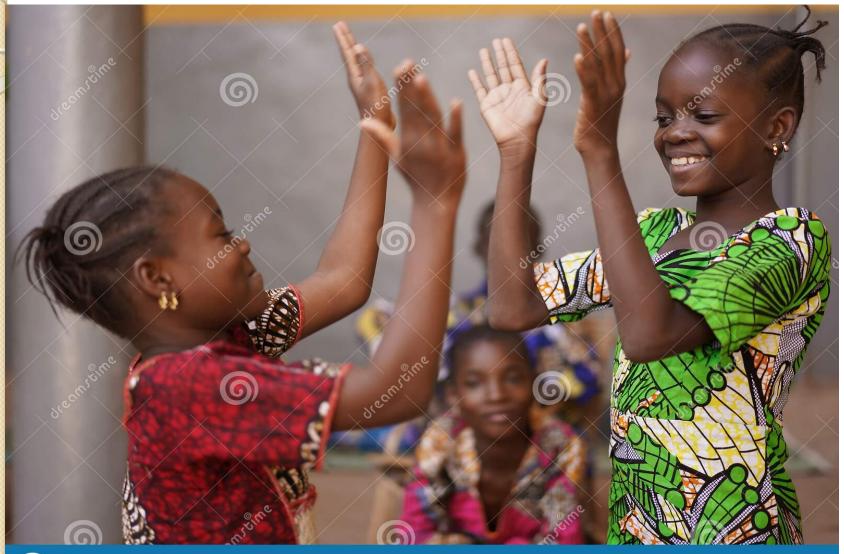
Adopt an all-inclusive approach to MHH by involving men and boys in the promotion of menstrual hygiene management for girls and women.

Break

Break the cultural barriers to effective MHH through change of negative attitudes and perceptions by stakeholders.



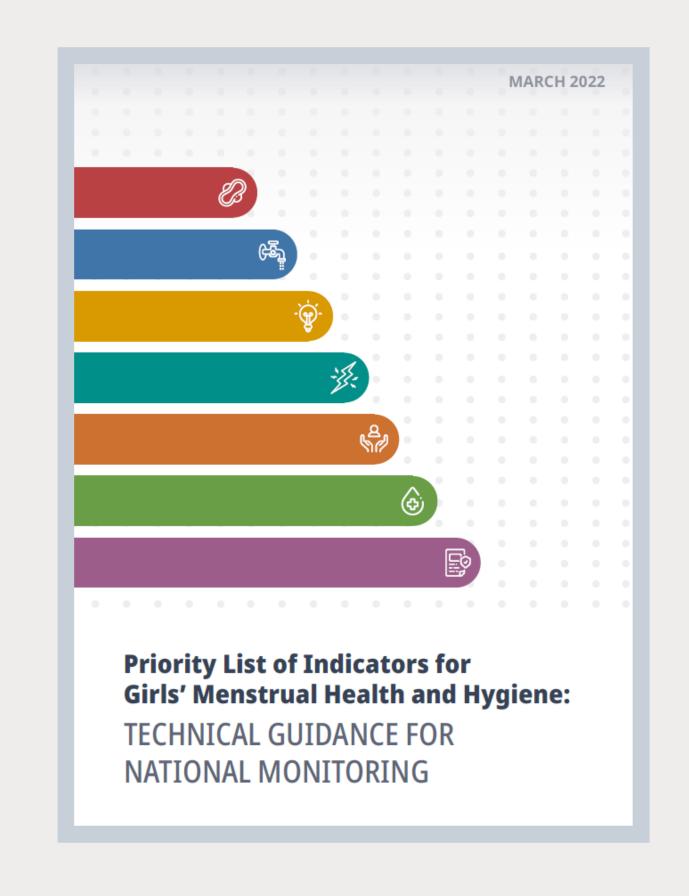
THANK YOU, MERCI, ASANTE



INTRODUCTION TO THE

PRIORITY LIST OF INDICATORS FOR GIRLS' MHH: TECHNICAL GUIDANCE FOR NATIONAL MONITORING

WASH in Schools International Learning Exchange Ina Jurga, WASH United on behalf of the Global MHH Monitoring Group

















Making menstrual health and hygiene count. Why a global indicator shortlist?

What we measure is what we pay attention to

To provide targets for action and facilitate accountability among stakeholders

To track progress towards improving MHH as policies and programs are implemented

Evidence of MHH at the national and subnational levels can spur action and investment

To monitor MHH progress across priority domains and enable comparability across countries and over time



MHH is relevant across all 17 SDGs















What This Is

01

A short list of indicators and related measures, based on evidence, for countries to get started

02

Intended for adolescent girls, but some indicators and measures can be adapted and tested with adult women

03

Aligned to existing national monitoring tools such as JMP/ DHS/ MICS where possible

What This Is Not

01

A comprehensive list of MHH indicators and measures

02

Detailed technical guidance on data collection methodology

03

A fully validated, definitive list of indicators; testing is required to assess validity and adaptation may be needed based on context















Table 1: Short List / Priority MHH Indicators^a

MHH Domain

Data Collection Level Indicators



1 % of girls who reported having enough menstrual materials during

2 % of schools with menstrual materials available to girls in case of



- 3 % of girls who reported changing their menstrual materials during their last menstrual period at school.
- 4 % of girls who changed their menstrual materials at school in a space that was clean, private, and safe during their last

- 5 % of schools (primary/secondary) with improved sanitation facilities that are single-sex and usable (available, functional, and private) at the time of the survey.
- 6 % of (primary/secondary) schools with improved sanitation facilities that are single-sex, usable (available, functional, and private), lockable from the inside, have covered disposal bins, and have discreet disposal mechanisms at the time of the survey.
- % of (primary/secondary) schools that have water and soap available in a private space for girls to manage menstruation



- 8 % of students (male/female) who have received education abou menstruation in primary and secondary school.
- 9 % of females who know about menstruation prior to menarche.
- 10 % of females with correct knowledge of the fertile period during the ovulatory cycle.

- 11 % of schools where education about menstruation is provided for students from age 9.
- 12 Existence of pre-service or in-service teacher training about menstruation at the primary or secondary level.
- 13 % of schools that have at least one teacher trained to educate primary/secondary students about menstruation.

Government / National

14 % of countries where national policy mandates education about menstruation at primary and secondary level.



- 15 % of girls who report that they were able to reduce their menstrual (abdominal/back/cramping) pain when they needed to during their
- 16 % of girls who would feel comfortable seeking help for menstr problems from a health care provider.



SUPPORTIVE SOCIAL

for support (advice, resources, emotional support) regarding



POLICY

- 18 % of girls who report a period does not impact their day
- 19 % of girls whose class participation was not impacted by their

- 20 % of countries with policies or plans that include menstrual health
- 21 National budget is allocated to menstrual health and hygiene; funds are dispersed to the schools in a timely and efficient manner.

See Annex 2 for explanation of indicator levels.

Data Collection Level Indicators

Individual

% of girls who reported having enough menstrual materials during their last period.

School

2 % of schools with menstrual materials available to girls in case of an emergency.

Individual

- 3 % of girls who reported changing their menstrual materials during their last menstrual period at school.
- 4 % of girls who changed their menstrual materials at school in a space that was clean, private, and safe during their last menstrual period.

School

- % of schools (primary/secondary) with improved sanitation facilities that are single-sex and usable (available, functional, and private) at the time of the survey.
- % of (primary/secondary) schools with improved sanitation facilities that are single-sex, usable (available, functional, and private), lockable from the inside, have covered disposal bins, and have discreet disposal mechanisms at the time of the survey.
- % of (primary/secondary) schools that have water and soap available in a private space for girls to manage menstruation.

















Each domain laid out with same information:

- Indicator
- Purpose
- Survey question(s)
- Evidence and Considerations



MHH DOMAIN: WASH

Indicator 4 % of girls who changed their menstrual materials at school in a space that was clean, private, and safe during their last menstrual period.

Purpose

MHH requires access to supportive facilities for caring for the body during menstruation, including having access to clean, private and safe spaces to change menstrual materials. Access to supportive spaces in the school environment is a priority for ensuring girls' MHH at school. Indicators #3 and #4 work together to describe the girls' access to supportive spaces at school. Indicator #3 captures the proportion of girls who change their materials at school, while Indicator #4 shows if the space they used met their needs. They are relevant for girls who are post-menarche (those who have started menstruating), with "menarche" being the onset of menstruation in a given individual.

INDICATOR #3		
DEFINITION	The proportion of post-menarcheal girls who report they changed their menstrual materials at school during their last period, based on girls' self-report.	
NUMERATOR	Number of post-menarcheal girls surveyed who reported that they changed their menstrual materials at school during their last menstrual period.	
DENOMINATOR	Total number of post-menarcheal girls surveyed who attend school	

Survey Question/s

3 a) The last time you attended school during your menstrual period, did you change your menstrual materials at school?		
YES		
NO		

INDICATOR #4		
DEFINITION	The proportion of post-menarcheal girls who reported that the location where they changed their menstrual materials at school was clean, private and safe during their last period, based on girls' self-report.	
NUMERATOR	Number of post-menarcheal girls surveyed who reported that they changed their menstrual materials at school in a space that was clean, private, and safe during their last menstrual period.	
DENOMINATOR	Total number of post-menarcheal girls surveyed who reported changing their menstrual materials at school during their last menstrual period.	

Priority List of Indicators for Girls' Menstrual Health and Hygiene: TECHNICAL GUIDANCE FOR NATIONAL MONITORING 11

Survey Question/s

4 a) If yes (to changing at school); Was the place that you changed your menstrual materials clean?

4 b) If yes (to changing at school); Did you worry [translation note: were you concerned] that neone would see you while you were changin

YES

4 c) If yes (to changing at school); Did you feel safe while you were changing your menstruation

YES

INDICATORS #3 AND #4	
PREFERRED DATA SOURCE /ALTERNATIVE DATA SOURCE	Nationally representative school-based survey. (alternative: household survey of girls)*
INDICATOR TYPE	Outcome
METHOD OF MEASUREMENT	Individual self-report.
	To capture individuals' own perspectives requires responses from the target population.

Evidence and considerations

Indicator #3 was developed by the core group based on experiences implementing questions capturing the quality of school facilities. This indicator serves to outline the denominator for Indicator #4. Further, it highlights the proportion of girls who may not need, or are unwilling, to change materials at school or are without a facility to change at school. This indicator captures the last menstrual period experienced at school to avoid issues in the timing of survey data collections, where surveys undertaken immediately following school holidays may mean many respondents would not be at school during their last menstrual period. Girls who never attend school during their period may require a further 'Not applicable' response option.

Indicator #4 is drawn from the Performance Monitoring and Accountability (PMA)¹⁵ 2020 survey program and JMP^{16,17} which included the cleanliness, privacy and safety of locations used to change menstrual materials. However, questions used to construct this indicator have been drawn from the Menstrual Practice Needs Scale (MPNS).¹¹ The questions modify those originally used in PMA and JMP to avoid the use of terms such as "privacy" which can be difficult to translate consistently 18,19, and focus on the respondent's experience of the environment used to change their menstrual materials.

* School going girls should be defined within the country context, example eligibility questions are provided in Annex 3

Priority List of Indicators for Girls' Menstrual Health and Hygiene: TECHNICAL GUIDANCE FOR NATIONAL MONITORING

















Indicators focused on WASH facilities in schools



Individual

- 3 % of girls who reported changing their menstrual materials during their last menstrual period when at school.
- 4 % of girls who changed their menstrual materials at school in a space that was clean, private, and safe during their last menstrual period.

School

- 5 % of schools (primary/secondary) with improved sanitation facilities that are single-sex and usable (available, functional, and private) at the time of the survey.
- 6 % of schools (primary/secondary) with improved sanitation facilities that are single-sex, usable (available, functional, and private), lockable from the inside, have covered disposal bins, and have discreet disposal mechanisms at the time of the survey.
- 7 % of schools (primary/secondary) that have water and soap available in a private space for girls to manage menstruation.















Indicators focused on delivery of education



Individual

- 8 % of students (male/female) who have ever received education about menstruation in primary and secondary school.
- **9** % of females who know about menstruation prior to menarche.
- 10 % of females with correct knowledge of the fertile period during the ovulatory cycle.

School

- 11 % of schools where education about menstruation is provided for students from age 9.
- **12** Existence of pre-service or in-service teacher training about menstruation at the primary or secondary level.
- 13 % of schools that have at least one teacher trained to educate primary/secondary students about menstruation.

Government / National

14 % of countries where national policy mandates education about menstruation at primary and secondary level.















Donors and Policy Makers

01

Support governments to integrate and implement the indicators.

Align fund and programme monitoring with the indicators.

02

Support initiatives to pilot, test and validate and improve the indicators – and other areas of MHH monitoring.

03

Establish linkages between indicators and national priorities for adolescent health and gender equality; and SDG monitoring















Linkages to global level monitoring

UNICEF/JMP will aim to progressively incorporate into their own guidance

MHH Indicators will be helpful in building consensus and going beyond WASH

Integration will take time, consensus and ownership per topics

Essential to bring together diverse stakeholders from the start

Sharing examples from country utilization will facilitate usage

Countries will need clarity on roles, responsibilities, and how data will be analyzed and used

Explore how UN and others can support feedback process of ever-improving indicators















Plan for coming months/year

Series of dissemination webinars

Supporting uptake in exemplar and new countries

Developing & sharing training materials for country uptake















Download



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Thank you!

















Getting ready for

Menstrual Hygiene Day 2023

Journée Mondiale de l'hygiène menstruelle 2023







THEME / THÈME (2022-2024)

COMMITMENT

#WeAreCommitted #MHDay2023

ENGAGEMENT

#NousNousEngageons #MHDay2023





THEME / THÈME (2022-2024)



Sub-THEMES / SOUS-THÈMES (2022-2024)

STIGMA: "#WeAreCommitted to making periods a normal fact of life

PERIOD POVERTY: #WeAreCommitted that everyone has access to menstrual products

EDUCATION: #WeAreCommitted that everyone is educated about menstruaton

WASH: #WeAreCommitted that everyone has access to period-friendly toilets

NEW:

GENDER EQUALITY (slogan tbd)

STIGMA: '

PAUVRÉTÉ MENSTRUELLE

ÉDUCATION:

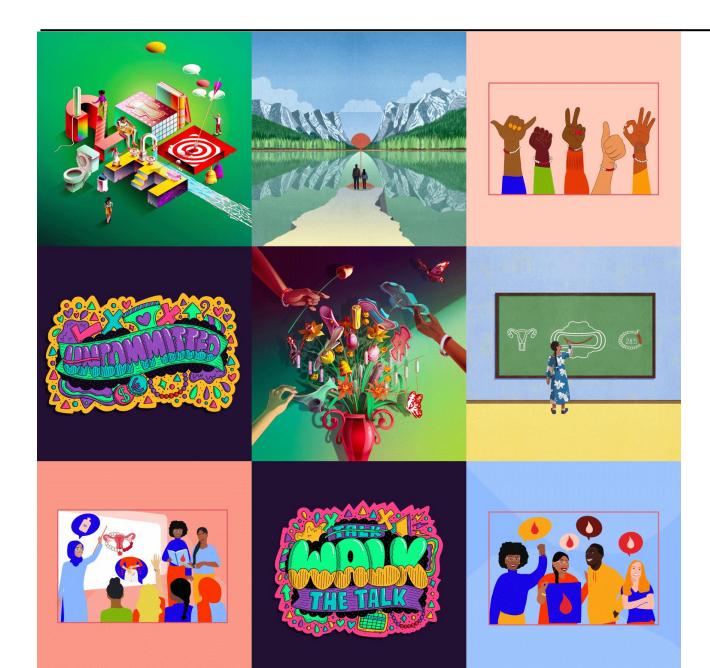
EAH:

NOUVEAU:

EQUALITÉ DU GENRE







Free campaign materials/ Matériel de campagne gratuit

Ready by mid April / Prêt à la mi-avril

MH Day Logo



Include it in your own campaign materials/
Intégrer dans votre matériel de campagne





MENSTRUATION BRACELET

Politicians





Minister & State Secretary of Development Cooperation, Germany



Minister of Economy, Planning, Statistics and Regional Integration, R Congo



Minister of Youth, Sports and Education; R Congo

Influencer



Colleagues / collègues



GIZ Uganda

- Use any type of local beads23+5 = 28
- Or the digital bracelet



- utiliser n'importe quel type de perles locales: 23+5 = 28
- Ou le bracelet numérique

Use / Utilisez: #MHDay2023 #WeAreCommitted



EVENTS









Please share with us your events! Partagez avec nous vos événements!

- · Event form on website
- Email ina@menstrualhygieneday.org info@menstrualhygieneday.org
- Use / Utilisez: #MHDay2023 #WeAreCommitted





ACTION CYCLE



In 2022

- 1. Share your goals for MHH in the year 2023
- 2. Report in early 2024
- 3. Submit new commitments in 2024

- 1. Partagez vos objectifs pour le GHM en 2023
- 2. Rapport au début de l'année 2024
- 3. Soumettre de nouveaux engagements en 2024





NEW: MH DAY ACADEMY

Free capacity building for all to help you with campaigning and advocacy

Featuring MH Day partners for partners ©

Starting in April, but will continue beyond MH Day

Themes for April/ May:

- 1. Political engagement
- 2. TikTok
- 3. Media tips

Renforcement des capacités pour tous afin de vous aider à mener des campagnes et des actions de plaidoyer. Gratuit!

Présentation des partenaires pour les partenaires!

Début en avril, mais se poursuivra au-delà de la Journée GHM

Thèmes Avril/mai

- 1. Engagement politique
- 2. TikTok
- 3. Conseils pour le travail avec les médias

Join via / Accès via www.menstrualhygieneday.org



Watch out: African Coalition for MH – Symposium 2023





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