Synthesis of Menstrual Hygiene Management (MHM) implemented through WASH in Schools (WinS) across the East Asia and Pacific Region (EAPR)

EAPR Country MHM Mapping Questionnaire

Background:

As the body of research on the importance of menstrual hygiene management (MHM) for girls expands, there is growing interest in exploring and addressing it, especially through WASH in Schools (WinS) programmes. However, MHM is still a relatively recent programming area with relatively few countries addressing it in a comprehensive way. UNICEF through its global programmes and in the East Asia and Pacific Region (EAPR) has now amassed a range of experience of developing effective WinS Programmes, which includes increasing understanding of how girls accommodate their menses in school, as well as the perceptions of women and girls, men and boys about this sensitive topic. UNICEF therefore would like to synthesise and document the current situation in the region, identifying examples of good practice and recommendations on the way forward.

Purpose of the analysis and synthesis:

To provide a concise overview of the current status of MHM implemented through WinS programmes in the East Asia and Pacific region. The synthesis will document experiences and lessons learned for the use of governments, UNICEF supported programmes, implementing partners and other stakeholders, with the ultimate aim of strengthening commitment and action across the region and beyond.

Purpose of the questionnaire:

To gather information from each country in the UNICEF East Asia and Pacific Region on the current MHM context, good practices, useful documentation and recommendations for interviewees for the research process. It is hoped that the responses will provide one means of comparing progress across the countries and to assist to identify any strategic gaps that the UNICEF EAPR office can assist the countries within the region to respond to in the future.

Linkages with global MHM mapping process:

As you will hopefully be aware, there is also a global MHM mapping process started relatively recently by UNICEF HQ through the WinS Yammer site. The process of analysis and synthesis being undertaken in the EAPR region aims to compliment the global process and produce documents that will be of practical use for the EAP region. There is a degree of lap-over between the information requested globally and the information requested in this EAP questionnaire; but there are also some differences, including an attempt to get an overview on the scale of progress.

- If you have already submitted your global MHM survey form and would prefer to share this, rather than respond to the questions in Section C below, then this is also welcome. But for the purpose of comparison across the countries in the EAP region, we would request that part B is completed by all countries.

- If you have not already completed the global MHM survey form and would like the information you provide as part of this EAP questionnaire to be reformatted to submit to the global survey, please let me know. I can take the information you provide here and reformat it into the global survey format and send it back to you for checking / completion before submission.

Who should complete this questionnaire:

a) It would be much appreciated if at least one questionnaire is completed from each country; and that as a minimum, inputs are provided from colleagues from the Education and WASH sectors. Inputs from colleagues from other sectors, such as those working in adolescence, sexual and reproductive health or HIV prevention would also be welcomed.

b) The preference would be for each country to complete and submit one questionnaire with inputs from different stakeholders; but alternatively a number of separate questionnaires can also be submitted by individuals, if this makes the process simpler in country.

c) As a minimum it would be appreciated if the UNICEF Education Section and the staff responsible for WASH in Schools could complete the questionnaire. But where possible it would also be positive if other sector actors active in MHM in the country, for example representing Government, other UN agencies or NGOs, would also be prepared to also complete questionnaires. This would add a wider perspective to the analysis and also encourage a range of key actors to take part in the analysis process and is also an opportunity to promote dialogue on MHM in country.

Time to complete the questionnaire:

It is hoped that it would be possible to complete the questionnaire in 45 minutes or a maximum of one hour.

Date for submission of the questionnaire:

Please return the questionnaire to myself on: sjhouse.majisafi@gmail.com by COB on Weds 7 October 2015.

_____

Many thanks for your assistance on this exercise. If you have any questions please do not hesitate to contact me.

Sarah House, Independent Consultant

Email: sjhouse.majisafi@gmail.com - **Mobile:** +44-743-211 3939 - **Skype:** sjhouse.majisafi

_____

Structure of the questionnaire:

The questionnaire has three sections:

Section A - Details of the person completing the form

Section B - Scoring against country progress

Section C - Descriptive questions

_____

Section A	Details of person(s) completing the form

Name	Brooke Yamakoshi	Country	Pacific
Position	WASH Specialist	Email	byamakoshi@unicef.org
Organisation	UNICEF Pacific	Phone number	+6793236170
Sector/Section/Department	WASH	Skype address	brookeyamakoshi
Name	Andrew Dow	Country	Vanuatu
Position	WASH Officer	Email	adow@unicef.org
Organisation	UNICEF Pacific	Phone number	
Sector/Section/Department	WASH	Skype address	
Name		Country	
Position		Email	
Organisation		Phone number	
Sector/Section/Department		Skype address	

For UNICEF offices, please also indicate below who is currently acting as the main lead for MHM in your office:

_____

Section B	Scoring against country progress

How to use the form:

1. There are five points on the scale - with red being equal to '1' or 'no progress'; orange being equal to '3' or 'reasonable progress' and green being equal to '5' or 'significant progress'.

2. Intermediary scores have also been allowed (scores 2 and 4).

3. There is also an option to indicate 'Don't know' indicated as '0'.

4. Examples of how to interpret the scores for different types of questions have been provided below.

5. In response to each question please indicate an **X in the box** which most fits your country's situation.

6. Please do not worry too much about the accuracy of the scores. This is not an exact science but aims to provide a general picture of progress in the different areas of action across the region.

7. It is expected that the responses to this section will be mostly based on the judgements and perceptions of those completing the questionnaire based on experiences of the realities in country.

8. A space has been left on the right hand side for additional comments if you have time to add them. In a few instances a small request for additional clarification has also been made.

Please be as honest as possible in your responses. This is a positive exercise to find out where the countries in the region are against a series of milestones. Having a realistic picture across the region will help in establishing what support may be useful for the different countries across the region. Please note that as work on MHM in still a relatively new area for many countries, it is expected that most countries will be scoring in the lower, or as a maximum the middle parts of the scale for many of the questions. It is also expected that there will be quite a variation across the countries. In the global context even a score of 2 i.e. 'a start has been made' is positive progress over what was happening in many countries a few years ago.

Scoring system and examples of interpretation:

Traffic light indicator	Red		Orange		Green
	1	**2**	**3**	**4**	**5**
Description	No progress	A start has been made	Reasonable progress	Good progress	Significant progress
Interpretation of scoring for different types of question					
Related to enabling environment	No action has been taken	Some discussions have been held	Changes are in process to respond to this issue at national level (for example draft policies, strategies or curriculum materials have been developed)	Changes are in late stages / clear increases in commitment	Fully implemented / this is now a national requirement
Relating to school practices	No schools have started to engage in this issue	A few schools have started to engage in this issue	The practice is spreading to new schools	Many schools nationally are now engaging in this issue	Most schools nationally are already engaged in this issue
Relating to UNICEF commitment and action	No discussions have been held on this issue	Some discussions have been held on this issue but no specific action to-date	Some UNICEF supported WinS related activities/ proposals/ strategies etc have integrated MHM	Most WinS related activities / proposals / strategies now include MHM as a core component	MHM is clearly identified as a core component of WinS and all staff and partners are expected to engage in the issue

No	Component	Indicator		0	1	2	3	4	5	Comments
				Don't know	No progress	A start has been made	Reasonable progress	Good progress	Significant progress	
				Don't know	No action has been taken	Some discussions have been held	Changes are in process to respond to this issue at national level	Changes are in late stages / clear increases in commitment	Fully implemented / this is now a national requirement	

Enabling environment

This section aims to establish milestones to progress in establishing an enabling environment which supports the consideration of MHM in schools.

Example of interpretation of scoring

No	Component	Indicator		0	1	2	3	4	5	Comments
1	Leadership and commitment of government to MHM (at national or regional levels)	1.1	The Ministry of Education shows clear leadership for and is engaged in the area of MHM in schools		X					
		1.2	The Ministry responsible for sanitation and hygiene is engaged in MHM		X					
		1.3	The Ministry departments responsible for adolescence, reproductive and sexual health and HIV/AIDs prevention incorporate MHM into their work		X					
		1.4	National education policy, strategies and / or guidelines include MHM		X					Please note which ones:
		1.5	National WASH policy, strategies and / or guidelines include MHM		X					Please note which ones:
		1.6	National health policy, strategies and or / guidelines include MHM		X					Please note which ones:
		1.7	3 star approach to WASH in Schools is being implemented - but so far without MHM		X					
		1.8	3 star approach to WASH in Schools is being implemented - including the MHM component		X					
		1.9	Sector budgets include an allocation to support MHM		X					
2	Teaching and learning	2.1	Standard teacher training includes MHM		X					
		2.2	Training is available on MHM for teachers through stand-alone professional development short courses		X					
		2.3	School curriculum includes MHM (integrated into subjects such as biology, life-skills, health, HIV)		X					Please note under which subjects:

No	Component	Indicator		0 Don't know	1 No progress	2 A start has been made	3 Reasonable progress	4 Good progress	5 Significant progress	Comments
		2.4	National guidance is provided that school health clubs or other out-of-classroom activities are expected to incorporate MHM		X					
		2.5	Learning and teaching materials on MHM are available in country (for example girls books, videos, posters or interactive aids)		X					
3	Sectoral and cross-sectoral advocacy and engagement in MHM	3.1	Co-ordination mechanisms for WinS advocates for, and communicates across sectors on MHM		X					
		3.2	Some form of working group on MHM exists in country		X					Please note the name of the group:
		3.3	A number of organisations (other than government and UNICEF) are advocating for and supporting MHM in country		X					Please also see Section C, question 6.
		3.4	Specific MHM related advocacy events have been held (such as participating in Menstrual Hygiene Day)		X					
		3.5	Opportunities exist for professionals in country to learn about and gain confidence in supporting MHM		X					
4	Availability of sanitary protection materials	4.1	Affordable sanitary protection products are available in the local market (re-usable and disposable options)		X					
		4.2	Knowledge commonly exists on how to make home-made re-usable sanitary pads		X					
5	Research, monitoring and evaluation	5.1	Formative research or other studies have been undertaken to establish MHM taboos, norms and practices and the priorities of girls and women		X					Please also see Section C, question 9.
		5.2	A monitoring mechanism exists for tracking progress of good MHM practice at the different levels		X					Please also see Section C, question 2.
		5.3	Evaluations of WinS programmes consider MHM		X					Please also see Section C, question 9.

No	Component	Indicator			0	1	2	3	4	5	Comments
					Don't know	No progress	A start has been made	Reasonable progress	Good progress	Significant progress	
School practices This section aims to establish the current scale of action on MHM in schools.						**Example of interpretation of scoring**					
					Don't know	No schools have started to engage in this issue	A few schools have started to engage in this issue	The practice is spreading to new schools	Many schools nationally are now engaging in this issue	Most schools nationally are already engaged in this issue	
6	School leadership, teachers and parents are knowledgeable on MHM	6.1	Teachers have been trained on MHM and how to support female students in MHM			X					
		6.2	MHM is discussed at the Parents and Teachers Association meetings			X					
		6.3	Parents have the opportunity to learn about MHM and how to support their children			X					
7	Girls and boys have opportunities for learning and dialogue on MHM	7.1	MHM learning and teaching materials are available in the school			X					
		7.2	MHM is taught in the school curriculum to girls and boys			X					
		7.3	School health clubs or other out-of-classroom activities for girls and boys incorporate MHM			X					
8	Access to WASH facilities	8.1	Girls and female teachers, staff and visitors have a private place to change and bathe in appropriate, accessible and well-maintained WASH facilities			X					
		8.2	Girls and female teachers, staff and visitors have access to safe, hygienic and discrete locations to wash, dry and / or dispose of sanitary protection materials			X					
		8.3	A sustainable and safe waste disposal chain exists for the collection and end disposal of sanitary protection materials			X					

No	Component	Indicator			0	1	2	3	4	5	Comments
					Don't know	No progress	A start has been made	Reasonable progress	Good progress	Significant progress	
9	Access to sanitary protection materials	9.1	Poorer girls and women commonly have access to easily available, culturally appropriate and affordable sanitary protection materials and associated items (such as soap and a container for soaking reusable pads or cloth)			X					
		9.2	Schools keep a supply of sanitary protection materials for emergencies when girls periods start when they do not expect and girls know where they can access them			X					

No	Component	Indicator		0	1	2	3	4	5	Comments
				0	**1**	**2**	**3**	**4**	**5**	
				Don't know	No progress	A start has been made	Reasonable progress	Good progress	Significant progress	

UNICEF commitment and action on MHM

This section aims to establish the current coherence of commitment and action of MHM across country offices. This section is mainly for completion by the UNICEF country offices; but we would also be interested to hear the perspectives on these questions from other partners where they feel able to complete them.

No	Component	Indicator		Not known	No discussions have been held on this issue	Some discussions have been held on this issue but no specific action to-date	Some UNICEF supported activities/ proposals/ strategies have integrated MHM	Most WinS related activities / proposals / strategies include MHM as a core component	MHM is a core component of WinS and all staff and partners are expected to engage in this issue	Comments
						Example of interpretation of scoring				
10	UNICEF country commitment to MHM	10.1	The UNICEF Country Office recognizes MHM as an important issue in its country context and programmes				X			
		10.2	UNICEF Country Programme Document and / or UNDAP specifically mentions MHM in WinS		X					
		10.3	MHM is reflected in the Country Office results				X			
		10.4	UNICEF section strategies mention MHM (Education, WASH, Health, Protection)				X			Please note which ones: UNICEF Pacific WASH Strategy
		10.5	UNICEF communicates across sections on the issue of MHM				X			
11	UNICEF funded programmes include MHM	11.1	UNICEF has prepared WinS funding proposals which include MHM, or specifically on MHM		X					Please also see Section C, question 9.
		11.2	UNICEF requires partners working on WinS to integrate MHM into their programmes				X			
		11.3	MHM studies / research have been undertaken with UNICEF funding or inputs		X					Please also see Section C, question 9.
12	UNICEF support to enabling environment	12.1	UNICEF has provided support (resources, advice, encouragement) to Government to strengthen the enabling environment related to MHM		X					
		12.2	UNICEF has supported the use of the WinS bottleneck analysis tool in country		X					
		12.3	UNICEF advocates for the inclusion of MHM in WinS coordination mechanisms in country		X					

Section C	Descriptive questions

1.	**Please describe any examples of progress or good practice related to MHM that has occurred in your country or programmes**
	Vanuatu: GESI is incorporated in a PCA to work closely with NGO that is active as the gender and protection cluster lead.
2	**If monitoring has been undertaken on progress related to MHM please describe where this monitoring has taken place (for example in EMIS, project specific, for annual sector reviews etc) and if possible identify what indicators have been used.**
	None
3	**Whilst this research is mainly focussing on MHM linked to WASH in Schools, we are also interested to learn about what has been happening in other contexts (such as in humanitarian contexts, at community level, or related to the workplace). If you are aware of any positive efforts that have been undertaken related to these contexts in your country, please provide a brief description here.**
	None
4.	**Please describe the main challenges faced of integrating MHM into WinS in your country or programmes**
	No WinS programme to date.
5.	**What do you think will be needed to be able to improve the scale / quality of progress on MHM in your country?**
	Work through IP that are active with the current stakeholders associated with MHM. Strengthen our support directly where we have comparative advantage.
6.	**Please identify the key institutions and organisations working on MHM in your country** (government at different levels, non-governmental, research institutions, private sector, donors who support MHM).
	NGO: Oxfam, Care, Live and Learn. Govt: Department of Women Health Promoting Schools (group formed by MoH and MoET)
7.	**Please provide contact details for people you feel it might be useful to interview in relation to MHM progress or activities in your country** (please provide: name; position; organisation; email; phone number; a note if a translator would be needed if the interview is in English; and a small note on why you have recommended that they would be useful to speak to). It would be positive to be able to speak to a few Government staff who have been engaging in this issue within the region. The stakeholders you recommend do not however have to be limited to WASH or Education sector. They could also be other partners such as sanitary pad producers, researchers, leading MHM advocates, particularly engaged teachers, etc.
	TBC. Contact directly to through Directors of appropriate ministries and Country Directors of NGOs.
8.	**What specific opportunities do you think could be used for disseminating the findings of this analysis a) in-country; b) regionally or globally?**
	Share printed report and pen drive with power point and short clips explaining the outcomes to UNICEF field office to disseminate in person.
9.	**Accompanying this questionnaire is a listing of documentation sought from each country - if possible please could you look down this list and send as many of these documents by email as possible, or indicate where they can be accessed. We are interested in documentation in English and also in the local languages.**

	This is particularly if research or case studies have been undertaken and documented in the local language but not translated into English. Please note below any particularly useful documentation which can be drawn on for interesting case studies .
	TBC
10.	**Any other comments?**