

Operationalizing choice for resilience in menstrual health supplies provision

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AT A GLANCE/KEY FACTS

- The importance of **Choice in Menstrual Health (MH) Supplies** is being recognized, but guidance on *how* remains limited.
- We present the framework of **full, free, and informed choice** for operationalizing menstrual choice, inspired by lessons from the work on Family Planning (FP)

How does this contribute to the MnH Workstream's focus areas of markets, standards, and menstrual health/SRHR integration?

- A framework for menstrual choice can
- offer practical approaches for integrating MH, FP and other SRHR supplies as part of the same basket of products and services
 - enhance knowledge and product uptake amongst users, contributing to market proliferation and offer guidance for investments in market-shaping

WHY CHOICE IN MENSTRUAL HEALTH SUPPLIES?

For FP, expanding the range of options has led to increased uptake and user satisfaction (1), while pressuring people to use specific products has backfired over time (2). There is no single best option; people may use multiple options concurrently, and preferred options vary over time and circumstance (3). Expanding menstrual choice can make supply chains more resilient by decreasing pressures on specific products and lessen the environmental burden of single-use products.

Menstrual choice is complicated by information and product flow asymmetries due to stigma, taboos, and information provision often led by product suppliers (4,5). And despite calls for menstrual choice, program designers still ask, What is the best product to provide? Rather than, how can we offer a range of options to best meet people's needs?

OPERATIONALIZING CHOICE FOR MENSTRUAL HEALTH SUPPLIES

MH programs can adopt **full, free, and informed choice** used in FP (6) by providing **information, products, and referrals**:

- Unbiased **information** on the full range of options for managing menstruation, and information on how to hygienically maintain, use, and dispose of products.
- Widest range of **product options** possible (types, brands, price points, place of access etc.) with freedom for participants to choose their preferred option(s) without pressure or shame and addressing stigma associated with any options e.g. insertion products.
- **Referrals** to options not available directly from the program, e.g., collaborations for subsidized access, referrals to clinics and pharmacies for contraception, pain management, and diagnosis and care of menstrual disorders.

There is limited documentation about referrals within MH programs, but anecdotal evidence indicates this is happening (7) and that participants are using the information provided to obtain their preferred products.

Some **examples of MH programs** that have built-in these principles while offering choice:

- Integrated retail models, including e-commerce platforms like Kasha (retail only) and Sirona (direct-to-consumer) (8,9)
- Models building on existing FP and RH programs, such as in the CHIEDZA study (10), and those using technology for integration such as by Triggerise using their TIKO platform (7,11)
- Programs that offer unbiased information and multiple products, such as by Tata Trusts, Aga Khan Development Network (5)

The extent to which these programs align to the framework presented here has not been established, but are indicative of the ways through which a framework for choice could be put into practice.

FRAMEWORK OF FULL, FREE AND INFORMED CHOICE

Programs and information should cover the **full** range of options, including homemade, commercial, disposable, reusable, internally and externally used products, as well as linkages with contraception and pain management strategies.

Program outreach should be **free** from pressure and barriers. Participants should not feel ashamed or embarrassed for choosing to use or not use a specific product. Programs should remove access barriers to the extent possible.

Informed choice requires that information be evidence-based, unbiased, and sufficient, even if all products are not made available through the program. A neutral third-party review can ensure information is fair and balanced.