

ADDRESSING THE MENSTRUAL HEALTH GAP: An entry point to SRH and HIV/AIDS prevention, body literacy and MH markets creation

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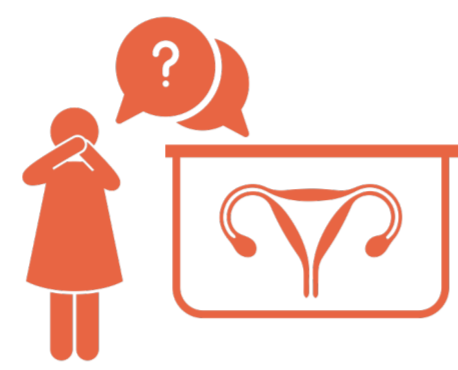
AT A GLANCE/KEY FACTS



Right now, there are 1.9 billion women and girls globally who menstruate.¹



Yet, 61% - over half - of those living in Low- and Middle-Income Countries (LMIC), lack the resources needed to manage their menstruation.²



Further, many lack information to understand their bodies. 55% of adolescent girls in LMICs have limited knowledge about menstruation before menarche.³



The result is an urgent market gap and an opportunity for Africa, given 65% of its population under 25 and the region is expected see 50% of the total global population growth by 2050.



MH EDUCATION FOR MARKET CREATION

Menstrual Health is not only the gateway to offer adolescents youth friendly SRH and HIV/AIDS prevention education, is an opportunity to teach “Body Literacy” in a way is relevant, practical and accessible.⁴

Equipping adolescents with the information and tools to understand the menstrual cycle and human reproduction is necessary to dismantle stigma, create awareness and generate demand for menstrual health services and products for a thriving MH market.

INTRODUCTION/BACKGROUND



Providing menstrual health information at scale is a difficult and elusive goal to everyone working in this space. Our work in Mozambique provides important insights to deliver high impact - and in a cost-effective way - when it comes to providing vulnerable populations accesses to MH and SRH information.

In 2021-2022, amidst the COVID-19 pandemic, Be Girl partnered with USAID/PEPFAR/DREAMS in Mozambique to utilize menstrual education as an age-appropriate gateway to Sexual and Reproductive Health (SRH), thereby increasing access to Menstrual Health (MH) education. We customized our own SmartCycle® curriculum, initially funded by UNFPA and designed for SRH professionals to be youth-driven. This newly adapted curriculum and educational package can be effectively delivered by high school graduates. It features highly visual content, is easily transportable, and offers flexibility for teaching both in and outside of school settings. It employs a storytelling approach, making it accessible for learners of all literacy levels, including those with limited literacy, enabling them to acquire and share MH information and enhance their understanding of SRH.

MAIN NARRATIVE



PHASE 0: PRELIMINARY WORK



In 2018, Be Girl launched operations in Mozambique with support from Grand Challenges Canada and PSI Mozambique.

With a UNFPA grant, Be Girl developed its SmartCycle® training manual and conducted a rigorous mixed-methods learning study to test its efficacy. Implementation of the study was possible thanks to the Global Fund and FDC Mozambique.

PHASE 1: CURRICULUM ADAPTATION



In 2021, Be Girl became a PEPFAR/DREAMS implementing partner, and in collaboration with Friends in Global Health Mozambique and the Government of Mozambique, we used the SmartCycle® methodology to develop Mozambique's National Menstrual Health and Hygiene Curriculum for the Ministry of Education and Human Development.

PHASE 2: CURRICULUM DEPLOYMENT



In 2022, after receiving approval from all stakeholders for the curriculum, a dissemination system was implemented using a Train of Trainers (ToT) approach. This involved identifying, training, and equipping 178 community educators across the country. These community educators operated within a cascade model, with regional team leaders providing support and coordination. Additionally, there was a central team based in Maputo that focused on monitoring and data collection.

PHASE 3: KNOWLEDGE TRANSFER, REPLICATION & SCALE



At the conclusion of the curriculum deployment phase, all community educators were hired by DREAMS implementing partners, and more ToTs were conducted. Currently, this National Menstrual Health and Hygiene Curriculum for the Ministry of Education and Human Development is being implemented nationwide, with Be Girl providing ongoing monitoring support to the Ministry of Education.

Furthermore, Be Girl is presently collaborating with UNFPA Angola to replicate a similar intervention. This involves adapting the existing material that was originally customized for Mozambique and tailoring it for deployment in Angola, in partnership with the Ministry of Education and funding from the World Bank.



RESULTS



178
Community educators

178 young women have been trained to facilitate MH education in 8 provinces and 32 DREAMS-supported districts.



340
Entry points

340 points equipped with MH materials (schools, health facilities, community centers & government facilities).



17,000
Adults

17,000 adults reached with MH workshops and 3,000 adults trained in MH education (parents/guardians, teachers & community health workers).



250,000
Adolescents

250,000 adolescents reached nationwide with MH workshops.

CONCLUSION



1. Collaboration among the private sector, government, NGOs, and UN organizations is essential to leverage their collective experience and expertise, fostering innovation, creativity, youth engagement, and entrepreneurship. To develop sustainable, long-term solutions we must establish flexible funding and partnership models that facilitate such collaboration.
2. With 65% of Africa's population below the age of 25, any solution to address current development challenges must prioritize this demographic. They should not merely be beneficiaries but also the leaders driving the change they want to see.
3. Gathering evidence and data is crucial for measuring and understanding the impact of an intervention and necessary to advocate for funding.
4. Mass marketing of menstrual health through education is of utmost importance to create widespread awareness and generate the demand necessary for menstrual health products to flourish. **Without education, there is no demand, and without demand, there is no market.**