Developing an evidence-based menstrual hygiene toolkit for humanitarian emergencies

Displaced women and girls face difficulties managing monthly menstruation safely and with dignity. Despite increasing interest in menstrual hygiene management (MHM) in emergencies, adequate guidance to support cross-sectoral, coordinated responses on this issue was unavailable. This study, conducted by Columbia University, USA, and the International Rescue Committee (IRC) between 2015 and 2018, sought to understand the needs of displaced women and girls and barriers to MHM delivery, and to evaluate existing MHM guidance. From these insights, a pilot 'Menstrual Hygiene Management in Emergencies Toolkit' was launched and tested in three refugee camps in Tanzania.

The study found a need for guidance on MHM in humanitarian responses. It improved awareness among key humanitarian stakeholders of the 'three pillars' of MHM (supplies, facilities, information) and promoted coordinated responses across sectors. It also influenced updates to global guidelines such as the Sphere Standards and shifted the policies and practices of the United Nations High Commissioner for Refugees (UNHCR) and IRC. In Nigeria, IRC MHM programming in camps was strengthened, with improved provision of materials and facilities and 300 partners and staff trained, reaching up to 1,000 women.

Title: Building a Cross-Sectoral Toolkit and Research Foundation for the Integration of Menstrual Hygiene Management into Emergency Response

Location: Lebanon, Myanmar and Tanzania

Study type: Mixed-method process evaluation

IMPACTS

- Awareness and use of toolkit among the WASH sector in several settings;
 changes to humanitarian policies and operational guidelines
- Informed development of a new 'Sphere Standard' in the 2018 Sphere Handbook
- Changes to IRC programmes and facilities in Nigeria

LESSONS LEARNT

- Early and continual engagement with humanitarian organisations and networks increases buy-in and awareness
- Tailoring research outputs to identified end-user needs enables operational application of findings

BACKGROUND



Many millions of displaced girls and women are estimated to be menstruating around the world. They face difficulties managing their monthly menstruation privately, safely, comfortably and with dignity. They often live in crowded environments and lack access to even the most basic materials, disposal facilities, washing areas and privacy. These issues are often intensified by cultural beliefs and taboos surrounding menstruation, which can restrict the movements and behaviours of women and girls (such as attending school).

This issue has received increasing attention in recent years, but prior to the study there was little systematic guidance available for humanitarian response organisations on how to plan, design and implement MHM within emergency responses. There was also limited evidence to inform the development of such guidance. Existing approaches were ad hoc, not evidence-based, and composed of siloed responses that failed to consider that MHM requires inputs across humanitarian sectors.

Without MHM support, existing health challenges faced by displaced woman and girls are exacerbated, their safety is at risk, they find it harder to go about their daily activities, they experience shame and can become increasingly marginalised from others in society.

THE STUDY



The study team first conducted a global desk review of literature and guidelines on MHM in emergencies to understand existing resources. Humanitarian agencies in Myanmar and Lebanon were then consulted to understand women and girls' priority needs in emergency responses and to gain further insights into existing programme approaches, best practices, gaps and lessons learned. This process included 17 key informant interviews with both emergency response and MHM stakeholders. The study team also conducted qualitative assessments with women and girls in Myanmar and Lebanon via focus group discussions and participatory activities.

From these insights, the team developed a draft 'Menstrual Hygiene Management in Emergencies Toolkit'. This included indicators for assessing the meeting of MHM needs, and was aimed at equipping humanitarian actors across relevant sectors with guidance to deliver MHM in emergency contexts. It was presented at a workshop in New York, gathering feedback from 28 participants from across sectors.

After refining the draft toolkit and indicators, feasibility and acceptability were assessed in a 'mixed-method pilot test' (comprising observation and qualitative assessments along with analysis of existing quantitative monitoring data) in three refugee camps run by UNHCR in Tanzania. Training workshops were provided alongside the toolkit, which allowed learnings from humanitarian actors in a protracted setting to be incorporated into the final toolkit. The final toolkit content was reviewed and approved by over 50 emergency response peers across humanitarian sectors and launched in 2017.



FINDINGS



The study revealed consensus among humanitarian stakeholders consulted about the need for structured guidance on MHM in emergency response approaches. It also identified that MHM is more effective when integrated into existing activities, rather than implemented as a separate intervention.

Evaluation of the toolkit found it to be valued by humanitarian staff. It improved their basic understanding of the issue and promoted coordination across sectors. Training helped to break down barriers, clarify roles and responsibilities, and reduce staff discomfort when discussing menstrual hygiene. Feedback from the training workshops indicated an increase in participants' knowledge and professional effectiveness. The study also provided evidence that MHM can be mainstreamed into existing programming if carefully framed and well designed.

However, the study found limited buy-in to the importance of MHM at senior levels, and that learnings from the training were not cascaded to other members of staff.

COMMUNICATIONS AND ENGAGEMENT



The study team drew on their existing strong relationships with organisations and networks to create an effective consultative process. Engagement and collaboration with these stakeholders continued after the study. The increasing interest in MHM issues across humanitarian sectors facilitated this consultative process.

'Launch and learn' events and training workshops in New York, London and Nairobi were held to introduce the toolkit to humanitarian stakeholders. Designed as peer learning events, they encouraged collaborations and conversations among organisations such as the IRC, Oxfam International, Plan International and Save the Children.

Communication materials, such as presentations and training workshops, were tailored to different audiences. The toolkit was designed with relevant chapters for each sector, while encouraging coordination across sectors. The final version was co-branded with the logos of the 27 humanitarian agencies that provided inputs.

The study team also engaged with water, sanitation and hygiene (WASH) professionals throughout the study via key platforms and technical networks, identifying champions from whom they sought substantive feedback to inform the research and the toolkit.



UPTAKE AND IMPACT



There is evidence of six humanitarian agencies implementing the toolkit, with significant changes to policies and practices demonstrated for three agencies: International Federation of Red Cross and Red Crescent Societies (IFRC), IRC and UNHCR.

All consulted agencies stated that the study, the study team and the toolkit substantially influenced their attitudes and knowledge on MHM and their work on WASH. They all highlighted that the clarity of the 'three pillars of MHM in emergency response' (supplies, facilities, information) is a critical contribution to policy dialogue helping to push MHM up the humanitarian agenda. The pillars helped them to broaden the conception of MHM as "more than just the distribution of pads".

"The [toolkit] is amazing. It has been an entry point for us doing so much work." – Key Informant Interview, IFRC

The study informed development of a new 'Sphere Standard' in the 2018 Sphere Handbook – Hygiene promotion standard 1.3: Menstrual hygiene management and incontinence. The toolkit was also cited in Inter-Agency Minimum Standards for Gender Based Violence in Humanitarian Emergencies in 2019, which advises consulting women and girls on menstrual hygiene supplies and facilities.

Impacts were evidenced for IRC MHM programming in refugee camps in northeast Nigeria. Programme design adaptations were made, and female-friendly toilets with MHM chutes were built in camps for internally displaced people, reaching up to 1,000 women. Over 300 staff were trained on MHM. A new person was appointed to lead MHM in their programming, and there is now emphasis on community engagement to inform approaches. The IRC now also engages men, as recommended by the toolkit guidance. Insight from their engagement activities have led to better provision of facilities, information and materials tailored to the needs of the community.

"The toolkit gave us the impetus and framing [to kick-start a] transformational year for MHM [and] support a cross-sectoral conversation within UNHCR"

— Key Informant Interview, UNHCR

UNHCR and IRC have also reportedly made changes to their policies and practices as a result of the toolkit, and the IFRC has rendered the toolkit contents into its own operational guidance, *Addressing menstrual hygiene management (MHM) needs. Guide and Tools for Red Cross and Red Crescent Societies*, now in its second edition. These have been translated into French, Bahasa and Arabic for use in different IFRC country settings, and are also influential in the humanitarian WASH sector.



UPTAKE AND IMPACT



UNHCR also cites the toolkit and its recommendations in their WASH manual and their handbooks for WASH staff working in camps. At least three more humanitarian agencies have used the toolkit to inform their operational manuals and policies. The toolkit was cobranded and endorsed by 27 organisations and is now hosted on various humanitarian agency websites, including Oxfam, Plan International and Save the Children.

While many agencies have gone on to develop their own MHM materials, the toolkit remains a useful and relevant resource for the sector. For example, the 'Female Friendly Toilets' graphic from the toolkit was included in the Compendium of Sanitation Technologies in Emergencies, and the one-page section on challenges and responses for MHM in emergencies was translated into Ukrainian for use in internally displaced people centres as part of a broader effort by the WASH cluster's Gender and Inclusion Technical Working Group in 2023.





LESSONS LEARNED



EARLY AND CONTINUAL ENGAGEMENT WITH HUMANITARIAN **ORGANISATIONS**

As well as the direct involvement of IRC in the study team, the early consultations with humanitarian stakeholders and continually incorporating feedback into study design, analysis and output development, particularly in the production of toolkits/quidance intended for operational audience, was instrumental in the impacts of the study.

RESPONDING TO IDENTIFIED NEEDS

The study was, from the outset, a co-designed piece of research intended to be translated into operational use. This not only enabled it to be informed by operational realities, but also gave the study a strategic rational and framing that provided an enabling environment for IRC to allocate time, energy and resource to uptake and translation of research into use. Organisational ownership of research findings and outputs ensured broader commitment to their use. However, stakeholders interviewed noted that implementation of research recommendations relies on scarce humanitarian funding, which may limit further uptake.

PARTNERS

International Rescue Committee; Mailman School of Public Health, Columbia University

ABOUT FIRHA

Elrha is a global organisation that finds solutions to complex humanitarian problems through research and innovation. This study was funded by Elrha's Research for Health in Humanitarian Crises (R2HC) Programme which aims to improve health outcomes by strengthening the evidence base for public health interventions in humanitarian crises.

R2HC is funded by the UK Foreign Commonwealth and Development Office (FCDO), Wellcome, and the Department of Health and Social Care (DHSC) through the National Institute of Health Research (NIHR).

R2HC captures detailed case studies through a process that triangulates and validates evidence on uptake and impact. The case study methodology and full version of this summary case study including references are available on request.



in humanitarian crises eitha Research for health





www.elrha.org



www.twitter.com/Elrha



www.linkedin.com/company/elrha/