## Piloting Menstrual Hygiene Management in School WASH in rural Timor-Leste







## MHM issues in rural Timor-Leste



### Knowledge, attitudes, practices:

- High use of disposable pads; little knowledge prior to menarche
- Behaviour restrictions (bathing, physical activity, interacting with others)

### **Institutional barriers:**

- Lack of accountability for WASH in schools at all levels
- No formal school WASH guidelines: Still in draft form waiting for approval.
- No MHM education in primary schools

### **WASH barriers:**

- There are no MHM disposal facilities / services at school,
- WASH facilities are inadequate for menstrual hygiene.

## **Piloting MHM in School WASH**

Piloting MHM in School WASH in two districts:

Manufahi: 4 schools

Liquica: 3 schools

### The aim of the pilot is to:

- Demonstrate to the sector the **needs** around MHM;
- Identify approaches to best address MHM in schools;
   and
- Improve accountability for School WASH (and MHM)







# Breaking the Taboo: Developing IEC materials

First step: Established an MOU with the Ministry of Education.

A critical gap in Timor-Leste: lack of information and education materials for girls in schools.

Developed IEC materials in collaboration with MoE.

#### **Cultural barriers & taboo's on MHM in Timor-Leste**

- Not to be showered with cold water & not washing hair
- No cooking or eating acidic foods
- Not being near or interacting with boys or men

Developed IEC materials which specifically addressed these taboos. Pictures were locally designed to Timor-Leste context







## Breaking the taboo: Key achievements & learning



Collaborating with Government has been critical Extensive coordination with Government from the outset

Men and boys are key change agents in MHM

**Teachers** play a critical role in supporting students to manage MHM

### **Key Challenges**

- No lesson time allocated, so facilitators did series of short education sessions during break time with students.
- Time lag in constructing toilets meant girls were learning about MHM without access to adequate facilities.



"There used to be more rubbish around. We would fall behind because of missed classes...Now we learnt how to use sanitary products, how to dispose of waste, how we can eat everything, and that we can bathe...."

- Filomena 18 yrs old

"It is great for us. Now we happy. We don't go to the forest [anymore]. We don't need to be absent when we get our periods."

- Cartika 16 yrs old





### **Emerging areas**

- Collaboration with adolescent sexual reproductive health sector
- Strengthen integration of MHM into community WASH
- Potential of male & female students as change agents
- Reaching vulnerable populations, such as girls with disabilities



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