



What happens when we leave?

Lessons on sustainability learned from a menstrual health programme in Bangladesh

This paper presents key findings and recommendations from a qualitative study on the sustainability of school interventions that were part of the Ritu programme in Bangladesh.

Improved menstrual health

The Ritu programme aimed to improve the menstrual health of girls between 10 and 15 years old in Bangladesh. The programme combined a set of direct interventions in schools and communities in Netrokona district, with national level advocacy and (social) media campaigns. Reaching a total of 25,844 girls, the direct interventions had a positive impact on their menstrual health. Girls reported to feel less ashamed and more confident during their menstruation and to have the skills, knowledge, support, and necessary products and service to perform menstrual practices (Ritu RCT, 2019, Ritu Final Report, 2020).

67%

of girls in the Ritu programme feel confident to manage their menstruation at school, compared to 43% in the control group (RCT data).

Time line:

November 2015 - June 2016
Inception phase

July 2016 - July 2019
Implementation

August 2019 - March 2020
Hand-over of activities to stakeholders

Programme design

The two main interventions in schools were 1) training of teachers to provide menstrual health education as part of their lesson plans and 2) working with schools to access Government budget to realise female-friendly toilets. Head masters, teachers, School Management Committees, students and Government Education Officers were all engaged in the implementation of the school activities and training organised, tools, and hand-over sessions were organised for them to continue the activities beyond the programme.

**Md. Shamsul Islam, Head Teacher,
Lakshmpur Adarsha High School**

'We made a plan for the year 2020 to conduct the menstrual health sessions regularly in our school for all of the students.'

Study design

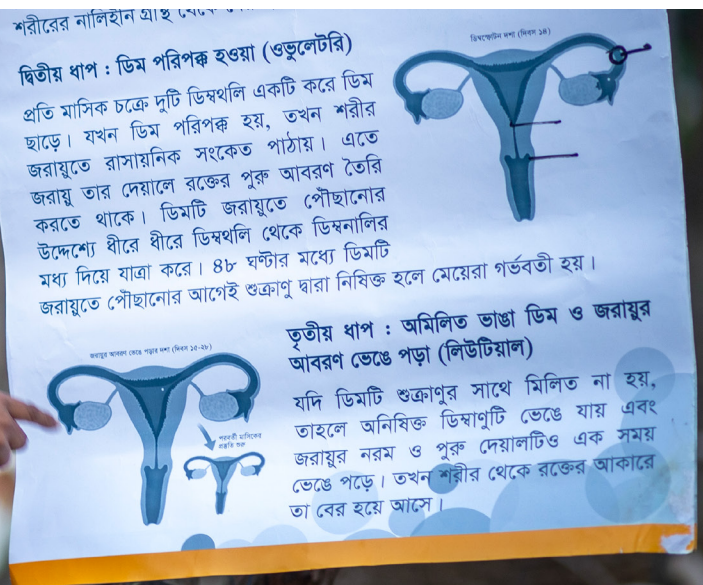
With the support of Simavi and BNPS, Dhaka University conducted a qualitative study in 6 schools that were part of the Ritu programme. A total of 55 female and 57 male students, 52 teachers and 19 School Management Committee (SMC) members from the 6 schools participated in focused group discussions. An additional 47 key informant interviews were conducted with students, teachers, SMC members, and Government Officials.

Findings and recommendations

It is important to note that schools had been in lock-down since the programme ended in March 2020, which strongly affected the sustainability of the programme and the research itself. However, we were still able to draw some conclusions, and we believe it is also worth to draw attention to the disrupting impact that COVID-19 had on the intended continuation of activities.

Programme design

Using an evidence informed and impact-oriented programme design, the number of interventions of the Ritu programme were kept to a minimum. However, from the study we can conclude that in addition to the two main interventions, there were still too many smaller activities, such as wall-paintings and suggestion boxes, that we had hoped to sustain. In hindsight, focusing on sustaining only the most impactful activities, whilst minimising the required time, effort and budget, would have increased the likeliness of continuation.



Behavioural change

Both the quantitative (RCT, 2019) as qualitative evaluations that were administered during the programme showed a positive (significant) change in knowledge, beliefs and behaviour amongst students, (head) teachers, and parents. Seeing the positive impact on girls well-being and school attendance, most schools expressed their commitment to continue the lessons on menstrual health and to maintain the toilets. We did find that during the handing-over period, teachers of all six schools delivered menstrual health lessons at least once a month. The maintenance of the toilets was also continued in schools. Unfortunately, all activities stopped at the start of the lock-down. From the interviews 6 months later, we found a drop in motivation. Some teachers mentioned that their knowledge on menstrual health had decreased, or that they now felt less comfortable to talk about the topic. They also missed being able to call programme

staff to help them with difficult questions. Moreover, teacher felt that students showed less interest in the topic. The lock-downs were mentioned as an important factor in this.

External factors

Several national policies mention and provide guidance for menstrual health education and female-friendly toilets in schools. However, for a variety of reasons these are not widely known or fully implemented. For example, we had envisioned that the monitoring visits that are part of the mandate of local Government Education Officers (EO) would provide an external motivation for schools to continue activities. The EOs were provided with monitoring checklists and training during the hand-over period, but the visits did not happen during lock-down. EOs also mentioned lack of knowledge and ownership, and high work load as reasons for not taking up the monitoring visits.

Md. Monjurul Haque, Head Teacher, Shimulati High School (March, 2020)

‘We are changed now. We have created a wave of change in our school. So, it is not possible for us to go back or to stop. Already I have discussed with the SMC and am taking all the necessary steps to maintain the female-friendly toilets for the girl students in my school.’



Before the first training **12%** of the teachers could explain what menstruation is;

after the refresher training this rose to **96%** (pre- and post-tests)

Budget

To maintain the toilets, it is key that schools have access to a sustainable source of funding. The Ritu programme supported and capacitated schools to access available government budgets. However, we found that this process is too complex and time consuming for schools to continue on their own. In some cases, schools initiated a saving mechanism to buy pads or individual stakeholders donated money. However, in most schools lack of budget was mentioned as the main barrier to continuing the maintenance of the female-friendly toilets and provide soap and menstrual products.

Recommendations

Summing up, we come to the following recommendations for NGOs working in schools to increase the likelihood that programme activities on menstrual health will be sustained: 1) dare to prioritise and select a small number of impactful activities to be sustained after the programme, 2) engage stakeholders in the selection of these activities and in designing the strategies to sustain them, 3) include time within the programme to test the feasibility of the sustainability plan.

Whilst acknowledging the limited scope of this study and paper, it touches on a need for better understanding of the sustainability of development programmes. We therefore call for an increased focus on and (budget for) research on this topic and encourage others to share their successes and lessons learned.



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