

# **Ending Period Poverty for South Asian Women & Girls**

**CSW68 Parallel Event Proceedings** 

Date: March 18, 2024

Venue: Church Center for the United Nations, New York

Photo Gallery: <a href="https://photos.app.goo.gl/mXB2hCbnVphF6B7YA">https://photos.app.goo.gl/mXB2hCbnVphF6B7YA</a>

Livestream: https://www.instagram.com/bacharlorai

## **Opening Remarks**

#### **Farhim Zaman**

- Emphasized the operations and impact of BacharLorai in empowering Bangladeshis globally.
- Highlighted their multifaceted approach involving community building, policy research, and initiatives in the US, Canada, and Bangladesh.

#### **Mehmet Kilic**

- Stressed the global nature of period poverty and the urgency of addressing women's empowerment.
- Highlighted the role of collaborative efforts in tackling menstruation-related challenges.

### **Panel Discussion**

**Madhuri Kibria,** as the moderator, played a pivotal role in guiding the discussion and emphasizing the session's themes. Madhuri introduced the panel and set the context for the discussion. She particularly stressed the importance of addressing poverty and strengthening institutions, in line with the CSW68 priority theme, with a focus on promoting sexual and reproductive health rights (SRHR) and menstrual hygiene management (MHM). Madhuri set the stage for the panelists to share their experiences and insights, particularly in the context of South Asia.

Hira Amjad, representing Pakistan and DASTAK Foundation, brought attention to the critical challenges faced by menstruating individuals in the country. She provided compelling statistics to illustrate the magnitude of the issue in Pakistan: 44% of girls do not have access to basic MHM facilities at home, workplaces, and schools; up to 80% of young girls either drop out or are at risk of dropping out of schools because of a lack of proper water, sanitation, and hygiene (WASH) facilities at educational institutions; and 40% of women did not have access to any menstrual products at all during the 2022

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floods. She stressed the need to consider the added vulnerability that women and girls face during conflict and climate-related disasters, and how her organization developed a gender-inclusive climate action toolkit for the Government of Pakistan. Hira highlighted societal and cultural biases, including deep-rooted taboos and misconceptions surrounding menstruation, that impede women and girls' right to menstruate with dignity. Her contribution also delved into the importance of facilitating intergenerational dialogue between parents and children to break down the stigma around menstruation, and elevating grassroots knowledge in global advocacy spaces. She implored relevant stakeholders, policymakers, and state governments to reflect on the impact that lack of adequate MHM can have on women and girls' education and overall wellbeing.

Hafsah Muheed, representing Sri Lanka, emphasized the crucial role of grassroots organizations in effectively addressing menstrual health management. Her focus was on the unique challenges faced in different communities, such as those experienced by menstruating individuals with disabilities, LGBTQ+ individuals, and those in urban-poor and rural areas. She stated that grassroots organizations plays a crucial role in programming due to their proximity and deep understanding of the communities they operate in. She cited Sri Lanka's 51% tax on menstrual products as a result of the lack of cross-sectoral collaboration between the state and civil society organizations. She highlighted the value that a strong and collaborative multisectoral network can have, as it can facilitate knowledge sharing, effective resource mobilization, monitoring and accountability, transparent communication, and promote inclusive and intersectional programming.

Ananya Chhaochharia, representing India, stressed the importance of intersectionality in addressing period poverty and the language we use to frame discourse around menstruation. She called on international stakeholders to recognize and consider the unique needs and experiences of most marginalized groups, such as sex workers, survivors of sexual violence, trans men, non-binary individuals, and people with disabilities. She also iterated that religious actors and community leaders need to be engaged as part of a movement to create wide-spread behavior change at the grassroots level. She advocated for the need to resist existing patriarchal structures and systems that undermine women and girls' role in policy advocacy and decision-making, and to employ a more holistic approach to addressing period poverty.

**Sharmin Kabir** shared insights from her extensive work designing and implementing educational programs on menstrual health in Bangladesh with her organization, Wreetu. She focused on innovative strategies to engage men and boys in menstrual health discussions such as creating accessible, inclusive educational toolkits and comic books for children, teenagers, teachers, and fathers, including books translated to Indigenous languages. She emphasized the importance of engaging young girls and boys in conversations on MHM from a young age and employing a human-centered approach to design programs and materials. She underscored the importance of multisectoral collaboration between government actors, CSOs, donors, policymakers, and beneficiaries to address period poverty in the region, and to ensure the inclusion of women and girls in leadership positions and key decision-making processes.



Jesselina Rana spoke about her initiatives with Pad2Go in Nepal, particularly in relation to government policy and youth-led actions, such as the landmark introduction of 400 sanitary napkin vending machines across the country and her successful advocacy efforts for tax removal on period products. She stated that while 'chhaupadi' (a traditional practice of banishing menstruating women and girls to huts and small spaces outside of the home) was criminalized in 2017, about 89% of people who menstruate in Nepal face restrictions on movement during their periods and there are still challenges in terms of implementation of the law. She talked about the power of collective action and youth-led community organizing to push for legislative reform, and the importance of bolstering civil society and grassroots organizations to drive change. She called on key international bodies to explicitly include menstrual health and hygiene management in global development frameworks such as the UN SDGs and to introduce international legislation to protect menstrual health rights.

The panelists' contributions provided a rich and diverse understanding of menstrual health challenges in South Asia. Their insights highlighted the need for inclusive, culturally sensitive approaches, the importance of breaking societal taboos, and the role of policy advocacy and grassroots activism in improving menstrual health management. The panel served as an important forum for sharing best practices and lessons learned, with a view toward empowering menstruating individuals across the region.

## **Key Themes:**

#### 1. Regional Challenges in Menstrual Health Management (MHM):

- o Prevalence of period poverty and lack of menstrual hygiene facilities.
- Societal and cultural stigmas surrounding menstruation.
- Lack of equitable access to sustainable, affordable menstrual health products.

#### 2. Importance of Grassroots Organizations and Community Engagement:

- The critical role of grassroots organizations in understanding and meeting community and context-specific needs.
- Engaging key community stakeholders and decision-makers such as religious leaders, parents, teachers, and men in positive and open discourse on menstruation.

#### 3. Inclusivity and Intersectionality:

- The need for inclusive conversations around menstruation, considering the experiences of LGBTQ+ individuals, those with disabilities, non-gender conforming individuals.
- Broadening the scope of menstruation discussions beyond women and girls, and upholding the principle of "leaving no one behind", particularly the most marginalized and vulnerable people such as people in conflict zones, in climate-vulnerable places, in prisons, and survivors of sexual violence.

#### 4. Policy and Public Health Perspective:

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- Recognizing menstruation as a global public health issue.
- Advocating for policy changes at both national and international levels.
- The inclusion of menstrual health and hygiene indicators in global development frameworks such as the UN SDGs.

#### 5. Education, Awareness, and Advocacy:

- Developing innovative and accessible educational materials and programs to promote menstrual health awareness, break down gender unequal norms, and create lasting behavior change
- Develop and implement global advocacy and media engagement strategies and campaigns to raise awareness of period poverty and disseminate knowledge on menstrual health and hygiene products and practices.

## Recommendations

#### 1. Comprehensive Education Programs and Inclusive Dialogue:

- a. Create and disseminate inclusive and accessible educational materials that addresses the diversity of menstruating individuals, proper hygiene practices, and dispels misinformation and gender unequal norms and social taboos.
- b. Engage men and boys, religious leaders, parents, and teachers in meaningful dialogue around menstruation to shift mindsets and create behavior change.
- c. Advocating for and ensuring the use of inclusive language and positive framing of narratives pertaining to menstruation.

#### 2. Support Grassroots Organizations and Women-Led Organizations:

- a. Provide sustainable, flexible, and long-term funding to grassroots organizations and women-led organizations, which often understands the target beneficiaries and the community's needs most closely.
- Collaborate with grassroots organizations to advocate for changes at the community level such as inclusive workplace policies, safe sanitation facilities and school environments, and tax reform.

#### 3. Strengthen Collaborative Networks:

- a. Foster stronger collaborations among practitioners, government and legal actors, policymakers, religious and community leaders, CSOs, and women's rights organizations to ensure effective and inclusive programming and policy.
- Enhance multisectoral coordination and share best practices for more impactful, contextually tailored, intersectional solutions.

#### 4. Advocate for Policy Changes:

- a. Lobby for policy and legislative reforms that recognize and address menstruation as essential public health care.
- b. Lobby for the widespread availability of sustainable, subsidized menstrual products and clean and safe sanitation facilities across schools, workplaces, and public spaces

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c. Ensure menstrual health and hygiene management is included in national and international development frameworks such as the UN SDGs

#### 5. Inclusion of Women in Decision-Making and Media Engagement:

- a. Women, girls, and other menstruators must be included in organizational and government leadership, consultations, and decision-making processes.
- b. Develop and implement inclusive traditional media and social media campaigns to spread knowledge and awareness on menstrual health and hygiene management, advocate for policy reform, and eliminate discriminatory social norms.