



Monitoring Menstrual Hygiene Management Programming in Emergencies

**A Rapid Assessment
Tool (M-RAT)**

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Integrating Menstruation within an Emergency Response

A Rapid Assessment Tool

Purpose

This Menstrual Hygiene Management (MHM) Rapid Assessment Tool (M-RAT) is designed to assist the humanitarian community in evaluating the status and reach of MHM programming within an ongoing humanitarian emergency. Optimally, it may be used by a small team of two or three people, over the course of 3 - 5 working days (more days may be necessary for a complex emergency). It can also be used as a self-assessment or diagnostic tool for agencies or organizations responding to the emergency, or by the cluster and coordination mechanisms. The M-RAT can be used in a range of settings, including camps, informal settlements, urban displacement or host communities.

This tool is not intended to be used for Initial Rapid Assessment – for designing these, we suggest referring to Chapter 6 of the [MHM In Emergencies toolkit](#). **The M-RAT is recommended for use once WASH and other services are already underway, in order to consider what is in place, and what gaps are most critical.** It should be used as early in the response as possible, to allow maximum opportunity for course-changes.

The tool is intended to be forward-looking, focused on identifying areas for future MHM program improvement, rather than critiquing current practices. It can be used periodically, to track progress as the response matures, and to prompt course-changes where appropriate.

Scope

The M-RAT is based upon the content of the [MHM in Emergencies toolkit](#), and aims to evaluate:

- **Access to Materials & Supplies**
- **Access to Supportive Facilities**
- **Access to Information**

The full spectrum of women's and girls' daily lives should be considered, including their experiences in:

- Households – sleeping accommodations, washing spaces, locations for changing materials and living arrangements;
- Household and residential toilets and washrooms – during daylight hours;
- Household and residential toilets and washrooms – after dark and night time;
- Schools, clinics, safe spaces and other public facilities;
- Public spaces such as markets, distribution sites and work spaces.

Team Composition

The rapid assessment team should ideally consist of 2–3 members. A translator/interpreter (who is not a part of any implementation team) may be needed. For the team, diverse backgrounds and sectoral experience is beneficial (WASH and Protection, for example). Both male and female actors can have important roles on the teams. Focus Group Discussions (FGDs), however, should only involve females, including for leading discussions, note-taking and interpretation.



Methodology

The key input of the tool is a questionnaire, with a series of multiple-choice questions. This questionnaire is to be filled out directly by the assessment team. To inform this task, the assessment team will need to conduct an information gathering exercise, in which a variety of methods can be utilized. Once the questionnaire is completed, the tool summarizes the information graphically to prompt ideas for program strengthening. In sequence, therefore, the Rapid Assessment Process follows these three steps:

1. Information gathering exercise

Much of the team's work on the Rapid Assessment will be the information gathering exercise. Various methods can be used, including:

- **Focus Group Discussions** (FGDs) with women and girls are the indispensable method for soliciting this information – it is not possible to complete the questionnaire without this consultation, and FGDs enable deeper understanding of girls' and women's lived experiences. Guidance on the scope and type of FGDs is provided below.
- A **desk review** of any existing data, documentation, reports and quantitative information available (e.g. Post Distribution Monitoring Reports).
- **Observations** of residential and institutional facilities, including walk-arounds and environmental inspections of toilets/washrooms.
- **Key Informant Interviews** (KII) with humanitarian responders who work directly with women and girls or on the planning or delivery of relevant programming.

- If feasible, a **workshop** can be helpful for soliciting the status of various sectoral programming. This can be combined with an MHM training and may be useful for determining different programming being delivered across organizations, agencies and sectors. In addition, it can provide an opportunity to build consensus and collective understanding on the topic amongst program staff.

2. Completing the questionnaire

The questionnaire is a series of key questions spanning a range of topical areas related to MHM, to be completed collectively by the team. If internal disagreements occur, additional discussions can enable consensus. The questionnaire may be completed separately for different contexts (e.g. camp, non-camp, urban) or for individual locations if time and resources allow for thorough assessments.

Although completing the questionnaire is subjective, the answers should be informed by information generated during the gathering process (FGDs, desk review, KIIs). Each question provides opportunities for additional commentary, and the team can use this space to add any information available that supports their answer, or to note doubt or information gaps, if needed.

The questionnaire is filled out within the Excel spreadsheet.

The questionnaire can be filled out multiple times if it is decided to disaggregate the information, and to provide a separate analysis of different situations, but it should not be filled out separately by different team-members for a single context or situation. **The aim is to discuss and reach consensus.**

3. Analysis of results and planning for the future

Upon completion of the questionnaire, the information is automatically summarized in the results pane.

The snapshot is divided vertically into two main elements:

- Girls' and women's ability to understand and manage their period, and their perception of whether the services provided are effectively meeting their needs;
- The structure and scope of the existing humanitarian response, including its current capacity to deliver effective MHM services

Within each of these elements, the snapshot examines Supplies & Materials, Information and Facilities separately, therefore evaluating six separate elements overall. The snapshot pane provides a rating of between 1 and 5 for sub-questions of each of these elements. This is depicted by a 'star rating' for each element.

The aim of providing a numerical rating for the response is to be able to track progress over time, and to more easily and graphically see the weakest areas of the response, and allocate resources as needed.

Delving deeper, the results pane shows the make-up of each of these ratings, drawing out specific elements. This allows the reader to see which elements of the response appear to warrant a lower rating, and to refer back to the assessment team's analysis and commentary to identify areas for improvement.

Example of Assessment Output

Women and Girls

WS	Women and girls have the menstrual materials and supplies they need		RATING
			2.8
WS1	Menstrual materials, and underwear, are available to women and girls		2.6
WS2	Quality of menstrual materials meets the needs of women and girls		4.0
WS3	Supplies are available for laundering and drying		3.0
WS4	Women and girls have choice in types of material, including for special needs		1.0

WI	Women and girls have the information they need		RATING
			4.1
WI1	Women and girls are confident in their knowledge of managing menstruation		4.0
WI2	Women and girls have understanding of menstruation and the reproductive cycle		4.5
WI3	Girls learn about puberty and menarche at an appropriate age		3.0
WI4	Harmful cultural perceptions do not affect women and girls' routine, choices and autonomy		5.0

WF	Women and girls have the facilities they need		RATING
			2.5
WF1	There are adequate WASH facilities for daytime use		3.7
WF2	Women and girls have safe access to bathroom facilities at night		1.0
WF3	Toilets for use by women and girls have female-friendly features		1.7
WF4	Suitable laundry and waste disposal facilities exist to support menstruation		4.0

The Humanitarian System

HS	Systems for the provision of menstrual supplies are in place		RATING
			4.3
HS1	There is clarity of roles among humanitarian organizations for supply of materials		5.0
HS2	Adequate budgets exist for the provision of MHM supplies, at the required interval		5.0
HS3	Provision covers the whole population, and on an individual, not household, basis		4.0
HS4	Selection of MHM materials and supplies is based upon consultation and feedback		2.2

HI	Systems for providing information on menstruation are in place		RATING
			4.1
HI1	Staff in organizations are comfortable and confident talking about menstruation		2.5
HI2	Organizations provide demonstrations on MHM materials and supplies		5.0
HI3	Organizations provide accurate, relevant information on menstruation		4.0
HI4	Information on puberty is designed to reach girls in educational and other settings		5.0

HF	Systems for providing access to facilities are in place		RATING
			2.3
HF1	The WASH Cluster (TWG) has clear agreement on what facilities are needed		2
HF2	Budget exists to provide toilet & washroom facilities to at least Sphere standard levels		2
HF3	Solid waste management systems are in place, and working		3
HF4	The WASH Cluster and actors have clear and representative feedback mechanisms		2

The team should aim to report the results within the humanitarian response community.

Practically, this may happen after they have left the site (if a visiting team).

If a workshop is conducted during the information gathering exercise, arrangements for future ownership, leadership and communication regarding MHM should be discussed, including identifying key contacts or focal points at the intervention sites. These contacts or focal points should take responsibility for presenting and co-analyzing the results of the assessment with involved parties, and planning the way forward, together.

Guidance for Information Gathering Exercise

Focus Group Discussions

Ideally, all FGDs (8-10 females per group) should be stratified by age, including separating adolescent girls (ages 15-18), young women (19-26) and older women (27-45) in order to enhance their comfort levels in sharing about MHM. Oftentimes it is useful to collaborate with Protection actors whom work closely with girls and women for organizing these sessions. We recommend that at least 4-6 FGDs are conducted to ensure saturation. See the attached survey guide for a suggested format for these FGDs.

Key Informant Interviews

Key Informant Interviews should be conducted with a range of actors from a variety of sectors and organizations. This should include a range of roles and levels, drawing in perspectives of those who work day to day with affected populations, as well as those with a broader view of the coordination and design of the response. Even if actors do not indicate that they are currently doing any specific 'MHM programming,' they often have valuable information about the response, types of services being provided, critical constraints, and other elements that are crucial to understanding the situation relative to MHM. While information gathering will vary per the role and knowledge of the person, sample interview guides are provided.

Workshop Format

Holding a workshop with WASH, Protection, Education, Health, Shelter and Camp Coordination actors is encouraged, especially if little or no prior training has been done on MHM. While this workshop will be used to elicit information for the M-RAT, it also has important value in terms of getting people to start thinking about MHM, training them in the key concepts, and learning what other organizations are doing in the humanitarian space. This learning process is often a good basis for improving coordination and leadership mechanisms. Ideally, the workshop should occur following the completion of the FGDs and KIIs as key findings and contextual learning can be presented and guide discussions. Example workshop materials have been provided.



ANNEX 1: MHM Rapid Assessment Tool

Focus Group Discussion Guide

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tool



Instructions

The focus group sessions must be adapted to the local context. The introduction and means of building comfort and rapport should be adapted to the culture and the facilitator's style. Some questions will be more relevant than others depending on context; while the facilitator should be careful in making assumptions, it is also important to focus on questions that are relevant to the group, and that will generate discussion, while also delivering to the facilitator the information needed to inform the Rapid Assessment Tool.

Logistics

Select groups of 15-18 year olds, 19-26 year olds and 27-45 year olds.

Materials Needed

Paper and pens for note-takers.

Introduction

Moderator: Hello everyone! Thank you for coming to be with us here today. My name is _____ and I am working with _____. [Let team introduce themselves.]

We are here today as we are trying to learn about some of the issues that are important to adolescent girls and women living here.

If you agree to be a part of this discussion, you will be asked questions about your life here, and your previous experience, and very specific questions about young women's development experience.

The discussion will last 1 and 1/2 hours. If you would rather not answer any question, you do not have to. Also, if you decide that you would rather not participate, you do not have to. You can leave

at any time, and there is no problem with that. Notes will be taken during the interview, but we will not include your full name or other identifying information in our notes.

Do you understand what we have just told you, and do you have any questions about that?

Today we want to talk about a topic that we know is usually kept secret in countries around the world. The topic is menstruation. As women and girls, we are sometimes shy of talking about it. But I menstruate, [point to team members] they menstruate, we all menstruate. So we hope that you will feel comfortable sharing your experiences and ideas with us. We are trying to learn more about how girls and women manage their menstruation in communities like this one, and if they face challenges to feeling comfortable and safe. We will use the information we learn from you to feed back to organizations that are helping girls and women here. We hope that the information will help them make sure that girls and women can manage their menstruation comfortably and safely each month.

For our discussion today, there are no right or wrong answers. We hope you will feel free to answer openly and honestly. We are going to take notes, but we are not going to collect any names – either out loud or on paper – so everything that you say and write will be anonymous. As girls and women in this community, we know that you are the “expert” on the issues we will be discussing, and so we appreciate anything that you can share. Please know that none of the information you share today will impact the services you receive. It is important for us to know what challenges you face, so that we can best advise organizations responding to the challenges that girls and

women face with menstruation. Do you have any questions? Great, let's get started! To start off today, we'd like to learn a little bit about you. I'd like to go around the room and have you tell me your age, and your favorite color. I will start us off. [Take time to go around the room]

[Note: The first two questions do not need in-depth discussion]

Questions

1a) In your culture or community, who do girls talk to about changes in their body as they grow up? (For example, when their breasts and hips are changing) We know that they may not talk to anyone and that is ok too.

1b) How do girls in your community first learn about menstruation? [Suggestion: facilitator share own personal story if participants are shy]

Probe:

- Who are a girl's usual sources of information about what menstruation is and how to manage it?

2) In different cultures, girls and women manage their menstruation in different ways. Some use materials to catch the blood, while others just let their menstruation flow on their clothes. Can you please describe how girls and women manage their menstruation here? (For example, do they use cloths, toilet paper, towels, pads, or other things?)

Probe:

- For those girls and women who use materials, what kind of materials do they use?
- Where do girls and women receive or purchase these materials?

- How do they feel about the quality and comfort of these materials?
- If materials are distributed, how well managed and equitable are the distributions? Do they reach everyone in your community or just some families? Do the distributions include other helpful supplies (e.g. soap, bucket) needed to maintain and properly use the materials?
- How frequent are the distributions? Is there a sufficient amount of materials and helpful supplies (e.g. soap) provided each month?
- If materials are purchased directly by girls and women, where are they obtained? Are there barriers to purchasing these materials and other supplies needed to manage menstruation?
- Are there types of materials that girls and women would like to have that they don't have? Please explain.

3) While living here in [insert context], what information have you received about menstruation, and the materials used to manage menstruation?

Probe:

- What types of MHM information were provided by NGOs or other sources? Please describe.
- Was any guidance provided on how to use menstrual materials distributed? Was there a chance to ask questions?
- Is menstruation information provided to adolescent girls in school? What types of information do they learn?
- Has menstruation information ever been provided during hygiene promotion sessions?

(If yes, hygiene sessions were provided, ask following up questions; if no, skip to 4)

- Were there any opportunities to ask questions and receive answers during these sessions?
- Was the information provided clear and sufficient?
- Have your perceptions of menstruation changed through these sessions? How, if at all?

4) Where do girls and women go to manage their menstruation? For example, do they manage their menstrual blood in the house, in the latrine or toilet, in a washroom, or someplace else? Are these spaces comfortable for managing menstruation? Why or why not?

Probe:

- If they do not manage at home, how far do girls/women need to walk to manage their menstruation? If there are water and sanitation facilities, how far must they go to access the facilities?
- Where do girls and women manage their menstruation during the daytime hours? How about during the nighttime hours?
- Are there separate male/female toilets? Are they considered safe to access?

5) How do girls and women living here usually dispose of used menstrual materials when they are done with them? This may be different for cloths or pads, so we would like to hear about all of your experiences.

Probe:

- Are there dustbins for menstrual waste in the bathroom/latrine? If yes, do they use them? Why or why not? What happens to the contents of the dustbins?
- Beyond dustbins, are there any other options for disposing of menstrual waste here in the camp? For example, do girls and women ever take waste back from the toilets or their homes in order to drop it elsewhere? Is this waste ever burned or buried?
- What kind of education or instructions (if any) was provided to girls and women on how they should dispose of menstrual waste?

6) Some girls and women use reusable menstrual materials such as pieces of cloth, reusable pads, underwear or towels. Can you describe for us the process of how different girls and women clean these cloths?

Probe:

- Where do girls and women go to wash their reusable menstrual materials? How do they dry those materials?
- Are there any other places that girls and women may go to wash reusable materials?
- Are girls and women comfortable washing their menstrual materials in these locations? Where is the closest water source?
- Are there any difficulties involved with washing and drying of menstrual materials and underwear? Are there things that could be done to make this easier?

7) While at school [or health clinic/visiting the market] are you able to manage your menstruation? Where do you go to change your materials? Do you feel confident in the type of menstrual material you are using? Are emergency materials ever available in case you are surprised by a period and do not have supplies with you?

8) (Optional exercise) If you were going to design a new toilet facility which better supports girls and women when managing their periods, what would it look like?

Probe:

- Where would this facility be located?
- What design aspects would this toilet include? [Explore location of water, lighting, security and building materials].
- What methods for disposal would you recommend are constructed for girls and women in your community? Can you describe what it would be like?

9) Is there anything else that you want to share with us about this issue before we leave? Anything that we forgot to ask?

Thank you for your help! You have provided us with so much important and useful information.

ANNEX 2: MHM Rapid Assessment Tool Key Informant Interview (KII) Interview Guide

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editable
tool



Instructions

KIIs are conducted with local implementers, such as NGO program staff, camp managers, engineers, UN agencies, etc. We recommend asking questions of staff working directly with female beneficiaries, and also of managers, and those who are active at a coordination and response design and monitoring level. Consider programming at household levels, but also at institutions such as schools and health centers. The interviewer should adapt the questions below to reflect the role and knowledge of the interviewee - and to meet the information gathering needs for completing the M-RAT - while not making pre-judgements about what they will and will not be able to speak about.

Materials Needed

Paper and pens for note-takers. Recording is recommended where feasible.

Introduction

Moderator: Thank you for taking time to meet with me/us today. My name is _____ and I am working with _____. [Team members introduce selves]

We are trying to learn how program staff are responding to needs around menstrual health and hygiene. We are asking you about this topic because we are interviewing people with experience advising, implementing or conducting humanitarian programs here.

Your participation is your choice: If you agree to be in this study, you will be talked to once, unless you give us permission to contact you for

follow-up questions, in which case you may be contacted more than once. We are asking for you to allow us to audiotape you as part of the research study. The recording will be used to ensure that we are able to document all of the valuable insights you are sharing with us today. We will listen to this recording and type it up as a transcript immediately following this interview so that we can analyze and reflect on what you have shared. The recording will not include your name but will include information about your sector and your role in the response. The recordings will be destroyed upon completion of typing up the transcripts (immediately following the interviews).

In using the information that you share with us today, we will not use your name or organization. We hope that you will feel free to talk honestly and frankly with us. And please note, if you would rather not answer any question, you do not have to. Also, if you decide that you would rather not finish the interview, you do not have to, and we can end the interview at any point.

Thank you very much for agreeing to answer our questions and for sharing your valuable time and expertise with us.

We are hoping to better understand the challenges adolescent girls and women may be facing in managing menstruation in humanitarian emergencies, and the solutions that might help them to be comfortable and safe.

Our overall purpose is to use the information we gather to assess collectively what the progress is on responding to women's and girls' needs in this context. We very much appreciate your insights into these questions. As a reminder,

your responses will be kept confidential. Do you have any questions before we begin? Great, we will go through the questions now.

Questions

1. In your experience, is the topic of girls' and women's menstrual hygiene management needs (or the needs of girls and women around managing their monthly menstruation) one that has been included in your humanitarian response? If yes, please describe for us what your organization and other organizations have done. If no, can you please describe for us why you think it has not been included?

2. From what you know of the local culture, how do girls and women manage menstruation?

Probe:

- For example, what types of materials do they use? Is there variation in the types of materials used?
- Where do girls and women go to change their menstrual materials? What about at night?
- Where and how do they dispose of or launder their used menstrual materials?
- What are some of the taboos and beliefs around menstruation, and how do these affect women's and girls' ability to manage menstruation?

3. How has your organization or other humanitarian organizations in this community responded to adolescent girls' and women's menstrual needs during the emergencies here?

Probe:

- What have these responses included (e.g. provision of pads, cloth, underwear, information, education and communication (IEC) materials, adequate latrines, water, menstrual disposal and waste management systems, etc.)? Please describe the range of activities and what sectors were involved.
- Who has been targeted by these activities? (Blanket coverage? Vulnerable groups? Adolescent girls?)

4. From what you have learned or heard, can you describe to us how girls and women here are provided with (or obtain) menstrual materials and supportive supplies such as underwear, soap, a bucket, etc?

Probe:

- Which organization(s) is responsible for distributions? To whom do they distribute?
- How often have MHM related materials and supplies been provided to girls and women here?
- Were girls and women consulted about their preferences for menstrual materials or supplies? How did you know what to provide? Have the menstrual materials and supplies being provided changed at all over time? (If yes) How and why were these changes made?

5. From what you have learned or heard, what approaches are used to talk with women and girls about menstruation, menarche and reproductive health?

Probe:

- How extensive has been the reach of these programs? How effective do you think they were in conveying key messages?
- Where did these sessions take place? (For example at households, schools, protection centers, public gatherings, etc.)

- How effective were these approaches in overcoming stigma and negative feelings and beliefs around menstruation?
- How (if at all) did these approaches involve men or boys? If they did, what was the effect of this outreach?

6. From what you have learned or heard, can you describe to us how WASH facilities have been designed to be female-friendly, and to support girls and women with managing their menstruation? What process was followed, and who led this process?

Probe:

- Are there a variety of approaches that you have heard of, or just one?
- Does this approach (these approaches) meet the needs of girls and women in terms of dignity and privacy?
- Has there been discussion with women and girls to understand how well these facilities meet their needs? Have results been shared with other WASH/humanitarian actors?

7. What types of measures or programs been introduced to deal with disposal of menstrual waste? Do existing waste management programs integrate menstrual waste into their operations? Please explain.

Probe:

- Were girls and women engaged at any point of the development process of the waste management system operating?
- Are women and girls able to dispose of menstrual waste with privacy and dignity? What are the challenges they may face?
- Who is responsible for dealing with menstrual waste? For example, emptying menstrual waste bins? Transporting waste collected in latrine bins? Burning menstrual waste?
- Why was your waste management set up this way? What influenced this design?

- Were the actors responsible for managing menstrual waste trained about this task? Can you please describe this?

8. How are girls/women supported with the washing and drying of reusable menstrual materials and supplies?

Probe:

- What types of facilities are provided to support them with washing menstrual materials? Drying? What did that look like?
- Which supplies (if any) were provided to support girls and women with washing or maintaining their reusable materials? Drying? What were these supplies?
- In what ways were girls and women consulted when designing the washing/bathing and drying solutions? What concerns (if any) did they share?
- From your knowledge, do girls and women utilize the facilities/infrastructure provided as intended?
- What types of challenges do girls and women continue to experience drying reusable menstrual materials and underwear?

9. How were the MHM responses monitored to determine whether they met the needs of girls and women in the community/camp/facility? (Note: Not all staff may have answers to all of the below questions).

Probe:

- How were the distributions introduced? How are they monitored? How frequently? Who was responsible for this monitoring? What types of concerns do girls and women convey concerning materials and supplies?
- Are there ways for you to monitor girls' and women's knowledge and understanding of menstruation? How are these findings incorporated back into the program?

- Were girls and women consulted about WASH facility designs and layouts? How did that process work?
- How were washing/bathing facilities monitored? How frequently? Who was responsible for this monitoring?
- Were girls and women consulted about the disposal systems after they were introduced? What did you learn from them about the disposal options, regarding menstruation?
- Were girls and women consulted about the washing and drying facilities ever? What did this process look like? What types of concerns did girls and women convey?

10. What guidelines or tools did your organization use when planning this response for MHM? What influenced your plan or design?

Probe:

- Were there any trainings or workshops conducted? Please describe.

11. Do you have any IEC materials, assessment reports, evaluations, studies or surveys that capture any information on MHM programming or other conditions in the camp or community related to MHM?

Probe:

- If so, would you be willing to share them with us?
- What were the main findings from these studies? Did they lead to any changes in the way you program?

12. In your opinion, how effective were the responses to girls' and women's menstrual hygiene management needs in this emergency? What changes would you recommend for future responses?

Probe:

- Was there cross-sectoral coordination on the MHM response? (Describe, or if no, why not?)
- What were the successes, challenges and lessons learned from the response?

13. Is there anything else that you would like to tell us about this topic?

Thank you for your help today!

ANNEX 3: MHM Rapid Assessment Tool

Workshop Planning – Sample Agenda for a One Day Workshop

Download
sample
agenda



Workshop Objectives

Familiarize participants on:

1. Key Concepts for providing an MHM in Emergencies Response
2. Learning from the M-RAT assessment conducted to date
3. Brainstorm ideas for collaboration and stronger future programming
4. Introduce resources and tools, particularly the MHM in Emergencies toolkit

Workshop Agenda

1. Opening Remarks

- a. Introduction and overview
- b. Key objectives

2. MHM during emergencies – Review of Key Concepts

- a. Challenges faced by Girls and Women
- b. Review of 3 key components
- c. Review roles of all relevant sectors involved
3. What are the experiences of girls and women living in [insert] context: findings from the M-RAT
 - a. Findings from [insert] contexts
 - b. Learning from KIIs
 - c. Presentations from NGO partners currently delivering MHM programming

4. Breakout session: generating ideas for increasing effectiveness of future programming Adjust topics to fit the local context, but examples may be:

- a. How to improve disposal options (hardware & software)?
- b. How to improve cross-sectoral coordination on MHM?
- c. How to better engage women and girls when designing MHM programs?
- d. How to improve the washing and drying of reusable materials
- e. Opportunities for menstrual hygiene and health education
- f. How can we make existing (or planned) toilets more female-friendly?

5. Review Guidance Resources Available:

When possible, distribute copies of resources, infographics, reports and other documentation.

- a. Share relevant research, cluster reports and context-specific documentation that may support MHM program design.
- b. Share the MHM in Emergencies toolkit, the Compendium on Menstrual Disposal, Waste Management & Laundering in Emergencies and other relevant guidance resources.

6. Develop an MHM specific email listserv following the workshop

- a. Obtain contact information for various organization and recipients to build a learning community on MHM
- b. Periodically share programming updates, reports, recommendations/learning from the M-RAT exercise and practical learning on challenges and best practices from implementation efforts.