Formative Research on Menstrual Hygiene Management in Afghanistan Knowledge, Perceptions, and Experiences of Adolescent Girls

August 2016
Kabul Afghanistan
ACKNOWLEDGEMENTS

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<td>Afghanistan Mortality Survey</td>
</tr>
<tr>
<td>ARI</td>
<td>Acute Respiratory Infection</td>
</tr>
<tr>
<td>CDC</td>
<td>Community Development Council</td>
</tr>
<tr>
<td>CHW</td>
<td>Community Health Worker</td>
</tr>
<tr>
<td>CSO</td>
<td>Central Statistics Office</td>
</tr>
<tr>
<td>Co-PI</td>
<td>Co-Principle Investigator</td>
</tr>
<tr>
<td>DO</td>
<td>Direct Observation</td>
</tr>
<tr>
<td>DOE</td>
<td>Director Of Education</td>
</tr>
<tr>
<td>ELCS</td>
<td>Emerging Leaders Consulting Services</td>
</tr>
<tr>
<td>FGD</td>
<td>Focus Group Discussion</td>
</tr>
<tr>
<td>FHAG</td>
<td>Family Health Action Group</td>
</tr>
<tr>
<td>GIS</td>
<td>Geographic Information System</td>
</tr>
<tr>
<td>GoIRA</td>
<td>Government Of Islamic Republic of Afghanistan</td>
</tr>
<tr>
<td>KMU</td>
<td>Kabul Medical University</td>
</tr>
<tr>
<td>IDI</td>
<td>In Depth Interview</td>
</tr>
<tr>
<td>IMR</td>
<td>Infant Mortality Rate</td>
</tr>
<tr>
<td>IRB</td>
<td>Institutional Review Committee</td>
</tr>
<tr>
<td>KII</td>
<td>Key Informant Interview</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-governmental organization</td>
</tr>
<tr>
<td>NRVA</td>
<td>National Resource and Vulnerability Assessment</td>
</tr>
<tr>
<td>MMR</td>
<td>Maternal Mortality Rate</td>
</tr>
<tr>
<td>MHM</td>
<td>Menstrual Hygiene and Management</td>
</tr>
<tr>
<td>MICS</td>
<td>Multiple Indicator Cluster Survey</td>
</tr>
<tr>
<td>MoE</td>
<td>Ministry of Education</td>
</tr>
<tr>
<td>MoPH</td>
<td>Ministry of Public Health</td>
</tr>
<tr>
<td>MRRD</td>
<td>Ministry of Rural Rehabilitation and Development</td>
</tr>
<tr>
<td>PI</td>
<td>Principle Investigator</td>
</tr>
<tr>
<td>RFP</td>
<td>Request For Proposal</td>
</tr>
<tr>
<td>SACOSAN</td>
<td>South Asian Conference on Sanitation</td>
</tr>
<tr>
<td>SWA</td>
<td>Sanitation and Water for All</td>
</tr>
<tr>
<td>WASH</td>
<td>Water, Sanitation and Hygiene</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations Children Fund</td>
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EXECUTIVE SUMMARY

Introduction

UNICEF Afghanistan commissioned this study within 12 girls’ schools in six provinces in Afghanistan. The purpose of this study was to understand adolescent girls’ (aged 12-16 years) knowledge, attitudes, perceptions and practices related to menstruation. This study identifies where adolescent girls learn about menstruation, what support systems are present at home and at schools, and what challenges they face at school and at home during menstruation.

Method

The study employed a mix of qualitative and quantitative design beginning with a comprehensive review of existing documents including previous research studies regarding menstruation conducted in Afghanistan. The primary data was collected via in depth interviews with adolescent school girls; focus group discussions with adolescent schools girls, out of school girls and mothers in the community; key informant interviews with school administrators, school teachers and health workers; and onsite observation of WASH facilities in sampled schools in six provinces. Twelve schools were identified using non-probability convenient sampling from a list provided by the Ministry of Education (MoE).

Findings

Girls’ challenges with managing menstruation were related to stress, overcoming shame & fear, managing daily school activities in spite of physical discomforts, limited practical and correct guidance, access, management and disposal of sanitary waste. Girls found these challenges manageable if they are stationed at home instead of attending school. Challenges were determined by limited availability and functionality of school water, hand washing and sanitation facilities; limited access to education in addition to prevalent beliefs and practices within the society; and limited sources and choices of sanitary materials. Cultural norms and beliefs strongly influenced girl’s behavior. At school, girls were known to exhibit self-isolation, reduce school productivity and concentration, increase school absenteeism and stress as potential impact of various challenges faced by girls.

Conclusion

This was a small scale study involving 12 schools in 6 provinces in Afghanistan. The findings of the study suggest that overall adolescent girls face many challenges at schools during menstruation. Challenge associated with menstruation included feeling of shame, discomfort, stress, and self-isolation. This greatly impact adolescent girls’ health and education, resulting in including, stress, absenteeism, lack of concentration poor performance. Interventions to address issues associated with menstruation needs to take a holistic approach. Improving condition and functionality of wash infrastructure at schools coupled with educating girls on correct MHM practices will likely impact girls’ ability to effectively respond to stress and shame associated with menstruation. While designing MHM interventions, it is important that certain cultural norms and practices are taken into account so they produce desirable results.
Structure of the Report

This report on menstrual hygiene management (MHM) among adolescent girls summarizes current MHM practices in 12 purposively sampled schools in 6 provinces. The report is organized in four chapters. Chapter one provides an overview of the research topic and discusses the purpose and objectives of this research study. Chapter two discusses the research methodology, chapter three shares the study findings, and chapter four concludes recommendations from the research participants, government institutions, and other key informant representing different organizations.
CHAPTER ONE: 

Introduction

1.1 Background

UNICEF’s Water, Sanitation and Hygiene (WASH) program in Afghanistan focuses on improving access to clean water, household sanitation promotion, and raising awareness within communities on the importance of good hygiene and healthy behaviors. UNICEF has partnered with the government (The Ministry of Rural Rehabilitation and Development, Ministry of Education, and Ministry of Public Health), UN agencies, NGO’s and rural communities to address WASH issues such as shortage of potable water, poor sanitation and poor hygiene practices. UNICEF WASH programs cover a wide-range of activities, including advocacy and support to policy and decision makers (under Sanitation and Water for All and South Asian Conference on Sanitation). UNICEF work towards influencing policies such as National Rural Water Supply, Sanitation and Hygiene Policy; Afghanistan National Development Strategy (ANDS); Gender Equality and Female Empowerment policy, etc. that are fundamental to gain political will for improving access in communities and in schools.

UNICEF is also working with its partners in schools to bring potable water, sanitation facilities and hygiene education to schools across Afghanistan. UNICEF is also leading efforts to incorporate menstrual hygiene facilities and hygiene promotion for adolescent school girls to make schools more girl child friendly.
1.2 Country Context

Afghanistan’s turbulent history is characterized by three decades of war and armed conflict which led to devastation of all social and administrative infrastructure including education and WASH infrastructure. The education system was in shambles, particularly under the draconian regime of the Taliban which banned girls’ education. Since the Taliban regime was toppled in 2001 and the establishment of interim administration in 2002, Afghanistan has made great strides in revitalization of its broken infrastructure and social development.

The Afghanistan Ministry of Education estimates that there are presently over 8.5 million students in primary and secondary schools which is considered a remarkable growth compared with approximately 1 million students in 2001[5]. Youth literacy has improved: female literacy has gone up from 29 percent in 2005 to 48 percent in 2012 and male literacy from 43 percent in 2005 to 64 percent in 2012. The estimated years of schooling for all have grown from 2.5 to 8.1 during the last ten years [4].

Despite great stride in improvements in social indicators, the country is still lagging behind some neighboring countries in South Asia. Afghanistan has one of the highest fertility rates in the world (6.3 births /woman), highest maternal mortality rates in the world (327 per 100,000) along with highest infant mortality rate (74 deaths per 1000 live births) [1]. Under-nutrition among children under the age of five is prevalent, 40.9 percent of Afghan children are moderately or severely stunted [2]. The Education Sector Analysis report reveal that an estimated 3.5 million children, the majority of which are girls, remain out of school. 79 percent of girls didn’t complete primary education, largely due to cultural barriers, such as early marriage and a lack of female teachers. There are also major differences in enrollment between rural and urban areas; with girls from rural poor families are the most affected [6]. Overall net primary school attendance in rural areas is 54 percent but 78 percent in urban areas [7]. Low access to education institutions coupled with social isolation, discrimination, low awareness on health and hygiene, put girls in a precarious situation.

In the turbulent years (1995-2010), the Afghanistan government provided almost half of its population (more than 15 million people) with access to improved water sources [8]. Like health and education status, WASH indicators are also lowest among women and girls in Afghanistan. Poor WASH significantly contributes to diarrhea, acute respiratory infections (ARIs), and under-nutrition and worm infestations. It contributes to infections in health care settings and can lead to increased morbidity and mortality of children under five and with increased risk of maternal and newborn mortality. Many times it results in both boys and girls missing school due to sickness which in turn reduces cognitive attention due to worm infestations [9]. Nonetheless it can also pose additional challenges for girls due to concern over the use of toilets, how to manage their menstrual hygiene and can also pose protection risks.

A lot of progress has been made in the area of school WASH over the past few years in Afghanistan. The MoE now has standard latrine designs and senior management in the

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1In this study it is defined by complex set of emotions girls face during menstruation and at the same unique practices girls had to adopt for varied reasons during this defined period.
Education sector have increased understanding of how WASH is important for schools across Afghanistan. A 'Call to Action' on WASH in schools was also undertaken in 2010, for which a useful practical document on good practices on WASH in schools was prepared, but many challenges still exists including the limited funding being allocated to school WASH against the significant needs and on the operation and maintenance and sustainability of the facilities [10]. In 2010, the Ministry of Education, with support from UNICEF, conducted an assessment of school water and sanitation facilities. The assessment found that only 40 per cent of schools in Afghanistan had toilets, the majority of which were provided by UNICEF during the past few years. However, the schools lack maintenance resources and the toilets are often dirty or non-functional.

Another study conducted by UNICEF in 2012 focused on knowledge, attitudes and practices related to menstrual health and hygiene in Afghanistan. The study found that 30 per cent of female students stay home and do not go to school on days they are menstruating. Girls also reported menstrual-related restrictions including food items not to be consumed, reduced participation in sports and limited opportunities to bathe. The majority of girls, 62 per cent, were found to manage their periods using old pieces of cloth; 30 per cent of the girls used new pieces of cloth and 8 per cent used sanitary pads. All girls reported knowing the importance of washing their hands after changing used materials, but only 20 per cent reported having access to soap.

For girls who attend school during menses, the school environment made it difficult for girls to manage their periods comfortably. Many girls brought their own water to school. In addition, an absence of female teachers and counselors in schools made many girls reluctant to seek sanitary pads when they needed. This limited adolescent girls’ ability to voice concerns about school sanitation facilities and inquire about menstrual hygiene management [11].

In Afghanistan, social taboos and many cultural practices exists around menstrual hygiene such as misconception of washing genitals while menstruating will result in “gazak” which means inflammation of different body parts [12]. Study on good practices related to menstruation was undertaken in 2010 in Kabul and Parwan province on menstrual hygiene by GoIRA, MoE and MoPH which identified the need for providing girls with information on good practices related to menstruation and training the teachers in the same. The study highlighted that 29 percent of girls miss some school time due to their menses. Over 70 percent of the girls did not shower during their menstrual period, and 50 percent were not aware of menses until it started [13] [14].

This report highlights the findings from the ‘WASH in Schools for Girls: Advocacy and Capacity Building for MHM through WASH in Schools Programs’ (Wins4Girls Project). This project focused on strengthening capacity of national research partners, WASH practitioners and policymakers to carry out rigorous research on MHM.

1.3. Purpose and Objectives of the study

The purpose of this research study is to understand the knowledge, attitudes, perceptions and practices of menstruation among adolescent girls in selected locations of Afghanistan.

The objectives of the study are as follows:
- To assess the knowledge, the behavior and the practice of adolescent girls (12-16 years of age) regarding menstruation
- To identify sources from which adolescent girls get information regarding menstruation
- To assess availability of type of Sanitation facilities, materials and quality of those facilities in target schools
- To identify menstrual hygiene barriers and challenges adolescent girls face in schools, home and the community
- To identify type of support services girls receive from different people during menstruation

1.4 Study Setting

The formative research was conducted in six provinces including Balkh, Ghor, Herat, Kabul, Kandahar and Laghman. These provinces were selected based on representation from different parts of the country. In each province, two schools were selected representing one urban and one rural district (Figure 1). A detailed description of each province is presented as annex 1 to this report. Figure 1: Map showing study sites in different districts in 6 provinces.
CHAPTER TWO: Methods

2.1 Study Design

The study followed Guideline on Promotion of Menstruation Health and Management for trainers and supervisors by UNICEF Afghanistan [15]. The study is designed on ecological framework about societal, environmental, individual and physiological factors influencing menstrual hygiene management among adolescent girls (figure 2).

Figure 2: Ecological Framework for MHM study and thematic areas

**Societal factors: Tradition, cultural beliefs, practices**
- Desk review: KAP studies on MNH, WASH policies; school curriculum
- KIIs: Teachers; DoE officials; School administrators and school teachers, MoPH Officials; Health workers
- FGDs and IDIs: Prevailing taboo’s, traditions, practices adopted at household level by both in and out of school girls, and mothers

**Environmental factors Water, sanitation and resource availability**
- Observations in schools: WASH conditions; availability of MHM supplies
- KIIs with DoE officials: Availability of resources and support for WASH; teachers’ role in educating girls
- FGDs with girls: Perception about school environment; availability and use of WASH facilities

**Personal factors: Knowledge, skills, beliefs**
- FGDs with girls in school and out of school: Biological knowledge about menstruation and practical knowledge about menstrual hygiene management; coping mechanisms and behavioral adaptations; needs; attitudes and beliefs about menstruation; self-efficacy regarding management

**Biological factors: Age, onset of menarche, intensity of menstruation, cycle**
- FGD with girls: experience of pain, including headaches and cramps, and influence on behavior and school experience: intensity of flow and ability to manage menstruation in school setting; weakness, ability to concentrate, fatigue, productivity etc.
2.2 Selection of Schools

Twelve schools were identified in consultation with UNICEF Afghanistan within the six study provinces. The schools were selected using simple random sampling from list of qualifying schools. The MoE provided the list of government supported schools in the country. Using this list of schools in each province, the Steering Committee randomly selected two schools in each province, one school from an urban district and another school from a rural district. Among the 12 schools, 50 percent were located in rural districts and 50 percent were located in urban districts. Schools were selected using the following set of criteria (Table 1).

- a. Secondary and high schools for girls
- b. The schools are run by the government
- c. The schools are located in urban or rural areas
- d. The schools with and without MHM program interventions
- e. The schools are located in secure areas and are accessible to the research team

Table 1: characteristics of the sampled schools

<table>
<thead>
<tr>
<th>Province</th>
<th>Level</th>
<th>Type</th>
<th>District</th>
<th>MHM Intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balkh</td>
<td>High School</td>
<td>Urban</td>
<td>Mazar City</td>
<td>√</td>
</tr>
<tr>
<td></td>
<td>Secondary</td>
<td>Rural</td>
<td>Balkh</td>
<td></td>
</tr>
<tr>
<td>Ghor</td>
<td>High School</td>
<td>Urban</td>
<td>Chaghcharan</td>
<td>√</td>
</tr>
<tr>
<td></td>
<td>High School</td>
<td>Rural</td>
<td>Chaghcharan</td>
<td></td>
</tr>
<tr>
<td>Hirat</td>
<td>High School</td>
<td>Urban</td>
<td>Hiram City</td>
<td></td>
</tr>
<tr>
<td></td>
<td>High School</td>
<td>Rural</td>
<td>Injil</td>
<td></td>
</tr>
<tr>
<td>Kabul</td>
<td>High School</td>
<td>Urban</td>
<td>District 7</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Secondary</td>
<td>Rural</td>
<td>Dehsabz</td>
<td></td>
</tr>
<tr>
<td>Kandahar</td>
<td>Secondary</td>
<td>Urban</td>
<td>Kandahar City</td>
<td>√</td>
</tr>
<tr>
<td></td>
<td>High School</td>
<td>Rural</td>
<td>Kandahar City</td>
<td></td>
</tr>
<tr>
<td>Laghman</td>
<td>High School</td>
<td>Urban</td>
<td>Mehtarlam Baba</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Secondary</td>
<td>Rural</td>
<td>Qarghaye</td>
<td></td>
</tr>
</tbody>
</table>

Total: 12

Table: characteristics of the sampled schools

---

2 Urban
3 Rural
4 High school
5 Schools with MHM interventions are those which have been targeted in past few years for a number of MHM interventions that include:
- Construction of a wash room where the girls would have opportunity to change their pads and clean themselves.
- Installing incinerator attached to the wash room where girls can dispose of their used pads
- Training of teachers on MHM and distribution of guidelines and picture cards (in some schools)
2.3 Selection of Respondents

Prior to selecting adolescent girls to participate in the study, the research assistants visited all 12 schools and introduced the research study to the school principals or administrator. All school principals provided in loco parentis, and the schools teachers selected girls based on the selection criteria. These criteria included: girls must have reached menarche, be between the ages 12-16, be between grades 9-12 and are willing to participate in the study. Once the girls were selected, the research assistants verified that the girls met the selection criteria prior to each interview and discussion. All girls verbally consented to participating in this study. For selection of the out-of-school adolescent girls at the community level, researchers sought assistance from school administration and local councils, or shuras. The research assistants shared the criteria with local council members and sought their support to identify girls that met the selection criteria. Using their connections in the community, the council members contacted community leaders and requested them to introduce adolescent girls from the community to participate in the FGD. In some provinces, the school authorities facilitated introduction of research team with council members to ease the process of identifying eligible girls for the research study. Likewise, with support from local council/shura members, mothers were also selected from the same communities. In Kabul, the research team sought assistance from community based educators to identify out of school girls and mothers for the study. Like other provinces, the research team had to contact local council/shura members so they could facilitate their entry to the local communities and corresponding households in each province.

As for Director of Education, since there is only one designated post in each province, the research team had to select and interview DOE officials in study provinces except for Kabul7. Likewise, the researchers interviewed the school administrators from target schools. As for the teachers, the researchers mostly interviewed science teachers from the study sites. All female teachers who taught science were selected for the interview in each study site. Health workers were selected from the health clinic located close to the target schools. The team also interviewed the Child and Adolescent Health Director from the Ministry of Public Health. Detailed selection criteria for all research participants are presented in Annex 2.

2.4. Data Collection

The qualitative and quantitative research tools (annex3) developed for this study was adapted from the WASH in School Empowers Girls’ Education: Tools for Assessing MHM in Schools Toolkit [16]. ELCS Researchers conducted a comprehensive review of published and available research and reports on MHM. The primary data was collected through in depth interviews (IDIs), focus group discussions (FGDs), key informant interviews (KII) and onsite observation of school WASH facilities. Interviews and FGD’s were voice recorded in all the provinces except few interviews in Ghor and all the interviews in Laghman provinces. In Laghman and Ghor provinces, the study respondents did not agree to allow the research team tape record the interviews. Cultural barriers and

7In Kabul, the study coordinator tried different options to contact the Director of Education, but she was not able to establish contact. After three attempts, the research team counted this interview as non-responsive.
sensitive nature of the topic was mentioned as reasons for not recording the interviews. All research activities were conducted in the local languages such as Dari and Pashto.

2.4.1 Data collection methods

Detailed Data collection table is described below (table 3).

Table 3 Data collection sample and tools

<table>
<thead>
<tr>
<th>Type of Interview</th>
<th>Participants</th>
<th>Total Number of Activities Completed</th>
<th>Total Number of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>In-depth Interviews</td>
<td>School Adolescent Girls</td>
<td>24</td>
<td>24</td>
</tr>
<tr>
<td>Focus Group Discussions</td>
<td>School Adolescent Girls</td>
<td>12</td>
<td>132</td>
</tr>
<tr>
<td></td>
<td>Out of School Girls</td>
<td>9</td>
<td>81</td>
</tr>
<tr>
<td></td>
<td>Mothers</td>
<td>10</td>
<td>97</td>
</tr>
<tr>
<td>Key Informant Interviews</td>
<td>School Administrator</td>
<td>12</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>Teacher</td>
<td>12</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>Directorate of Education</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td></td>
<td>CAHD&lt;sup&gt;8&lt;/sup&gt;</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Health worker</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>Observations</td>
<td>School WASH facilities</td>
<td>12</td>
<td>12</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>106</td>
<td>385</td>
</tr>
</tbody>
</table>

2.4.1.1 In-Depth Interviews

The researchers conducted 24 IDIs with adolescent girls in 12 schools, two IDIs at each school. Girls were asked about their knowledge, beliefs and attitude regarding menstruation. They were asked about their experiences and challenges managing menstruation in different settings including at home and at school. Additionally, researchers investigated the sources where adolescent girls learn about menstruation and if they find the information adequate and useful. Research assistants also inquired about presence and functionality of wash facilities at school. Additional insight was sought from adolescent girls on the strategies including materials they use to manage menstrual period at school and at home.

2.4.1.2 Key Informant Interviews

<sup>8</sup>Child and Adolescent Health Director, Ministry of Public Health
Using semi structured interview guides, the researchers conducted KIIs with school administrators, teachers, and female health care workers and DoE officials. One administrator and one teacher at every school were interviewed. Particular emphasis was given to science teachers but their availability was limited in some schools. Additional KIIs were conducted with health workers and officials from departments of education (DOE) in each province. Female health worker were selected who were working in the same community where the school was located.

The KIIs with school administrators and teachers focused on the availability and functionality of school WASH facilities, menstrual related challenges girls faced while using the WASH facilities, and availability of menstrual hygiene education in school curriculum. The KII with the DoE representative focused on policy issues related to WASH at the national level and resource allocation from the MoE to support WASH activities at schools. The KII with health workers focused on the overall awareness of clients (in particularly adolescent girls) approaching health facility for different health conditions including menstruation related illnesses. Additional insight was sought from health workers on the strategies women and adolescent girls use to manage menstrual period and if health education and counseling is provided to clients on effective menstrual hygiene management practices at the health facility.

2.4.1.3 Focus Group Discussion (FGD)

Researchers conducted several FGDs with different respondent groups. Separate FGDs were conducted with adolescent school girls, out-of-school adolescent girls, and mothers. The FGDs with adolescent girls focused on their knowledge and experience of menstruation including personal beliefs and attitude towards menstruation. The FGD with mothers focused on their awareness, attitude and practices they adopt during menstruation. Mothers were also asked about how they support their daughters and their understanding of their daughter experiences managing menstruation in and out of school.

2.4.1.4 Observation of school WASH facilities

To get a more objective insight about WASH facilities at study sites, researchers conducted direct observation of WASH facilities in each school. The focus of direct observation was an assessment of water, hygiene and sanitation facilities at schools including their functionality. The researchers conducted direct observation of toilets, hand washing facilities, water points and presence and management of sanitary waste disposal sites in study schools.

2.5 Adaptation/development and translation of study tools

The ELCS team with technical support from UNICEF Afghanistan and Emory University adopted the global MHM study tools (the WASH in School Empowers Girls’ Education: Tools for Assessing MHM in Schools Toolkit). The study tools were then adapted to Afghan cultural and religious context. All study tools and corresponding consent forms were translated in the two national languages, Dari and Pashto.

2.6 Ethical Clearance
Prior initiating the research study, the protocol and study tools were presented to MoPH Institutional Review Board (IRB) for review and they were approved by the IRB. The study team obtained approval from the Ministry of Education in Kabul and Department of Education at the provincial levels. At each school, the school administrators also consented to having their school participate in the study. Prior to each interview or discussion, all participants verbally consented to participate in the study.

2.7 Training

2.7.1 Training sessions

Given the sensitive nature of menstruation, female research assistants were recruited and trained. One week training was organized in Kabul and was facilitated by the research team. All research assistants were trained on WASH and MHM topics; in addition, they participated in an intensive training on qualitative methods and data collection techniques. Research assistants also learned about research ethics and the consent and assent process and strategies. The schedule for the training is attached as annex 4 to the study report.

The picture shown above is from training session of research assistants at ELCS Training Center Kabul: Photo credit: © Mursal

2.7.2 Pilot Testing of Study Tools

After completion of the training, the research team, with support from MOE and UNICEF Afghanistan, field tested the research tools in two schools: one private school and one public school in Kabul province. During the field test, research assistants were able to practice conducting IDIs, KIIs and FGDs with adolescent girls and school staff. The field
supervisors conducted direct observation of WASH facilities in each school, and they also monitored the entire interview process. The field test plan is attached as annex 5 to the report.

As a follow-up of the field test, the research team organized a debriefing session with all data collectors to discuss issues such as repetition of questions, experiences of research assistants using study tools in a simulated environment and others. The research team provided insight on the strategy of selecting respondents, their rapport building skills and ability to obtaining consent from respondents. They also discussed proper use of voice recorders and organization of interviews including effective facilitation, and note taking skills.
CHAPTER THREE: Findings

The findings present the challenges adolescent girls face when managing their menstruation at school and factors that determine these challenges. The findings also discuss the health and educational impact and risks associated with those challenges. The findings are situated within the social and cultural context of Afghanistan. Figure 3 provides a snapshot on key determinants, challenges, impacts and risk discussed and voiced by the research participants.

Figure 3: Schematic presentation of MHM Study Findings

1. School WASH Facilities
   - Availability of WASH Facilities
   - Condition of Latrines
   - Availability of Sanitary Waste Disposal Facilities
   - Functional WASH Facility including Hand Washing
   - Maintenance of WASH

2. Education
   - Limited education and knowledge of menstruation
   - Knowledge of Menstruation before Menarche
   - Type of Information Regarding Menstruation
   - MHM in School Curricula
   - Traditional and cultural norms and practices
   - Trusted Source of Information and Support

3. Management of Materials
   - Preferred menstrual management materials
   - Sources of menstrual management Materials

- Stress, anxiety, fear and shame
- Physical Discomfort
- Limited practical and correct guidance
- Access, Management and disposal of sanitary waste

Self-Isolation
Participation in activities
Distraction & Lack of Concentration
School Absenteeism
Stress

Infection
Prolong stress
School drop out
3.1 Characteristics of Households

In terms of household characteristics, Adolescent girls in this study reported living in large families with an average family size of 8.22 (Std. 2.89; CI: 3.82-4.29). Living space was basically limited to an average room 4.07 (std.1.96; 95% 4.07-4.74). Almost all of the participants reported at least one toilet at their house. 76.18% of participants had access to television. Laghman was found to be the only province where respondents had the lowest access rate to television (22%) while access to radio in this province was found to be higher than other five provinces (93%). Access to mass-media varied across the provinces. On average access to radio were 68.18%. Access to internet was limited to 24.24 % where students from Laghman reported zero access to internet at home. Almost all the student girls reported having at least one toilet facility at their homes (94%) while 63% of reported toilets were in the form of traditional pit (table 2).

3.2 Characteristics of Study Respondents

From the six participating provinces, a total of 237 adolescent girls participated in research activities; including in-depth interviews and focus group discussion. 50.6 percent of them were from rural settings. Across 12 schools in six provinces, 132 adolescent girls attended in FGD in school and 81 out of school attended in separate sessions. The mean age of respondent girls was 14.7. Average reported age at menarche for these adolescent girls was 13.1. The Level of parental education was found low by the responded girls. The findings also showed that 49.2 percent of respondent girls were the fourth or higher child among their siblings. Parent’s education level was at lowest level as one third of parents were high school graduates. Data on mother’s education level was limited while about one third of respondents reported fathers were illiterate. Table 2 summarizes characteristics of study respondents

Context:
- Point that some boys are being temporarily being taught in the all-girls schools

Under the MHM Program since 2012 following initiatives were undertaken:
- Menstrual Hygiene Management (MHM) provisions included in the new constructions of latrine design within schools
- A total of 200 washrooms (separate for girls and boys) were constructed
- Incinerators were constructed in schools
- Constructed or rehabilitated water points and boundary walls in girls’ schools
**Table 2: Study Respondent Characteristics**

<table>
<thead>
<tr>
<th></th>
<th>Balkh (No.=18)</th>
<th>Ghor (No.=17)</th>
<th>Hirat (No.=30)</th>
<th>Kabul (No.=24)</th>
<th>Kandahar (No.=16)</th>
<th>Laghman (No.=27)</th>
<th>Total (No.=132)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>14.8</td>
<td>14.9</td>
<td>14.9</td>
<td>14.2</td>
<td>13.7</td>
<td>14.0</td>
<td>14.4</td>
</tr>
<tr>
<td>Age at menarche</td>
<td>13.44</td>
<td>13.2</td>
<td>13.2</td>
<td>13</td>
<td>Missing*</td>
<td>12.7</td>
<td>13.1</td>
</tr>
<tr>
<td>Place of residence</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Rural</td>
<td>44 %</td>
<td>53 %</td>
<td>47 %</td>
<td>50 %</td>
<td>50 %</td>
<td>56 %</td>
<td>53.3</td>
</tr>
<tr>
<td>2. Urban</td>
<td>56 %</td>
<td>47 %</td>
<td>53 %</td>
<td>50 %</td>
<td>50 %</td>
<td>44 %</td>
<td>46.7</td>
</tr>
<tr>
<td>Birth order of respondents</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1- First</td>
<td>6 %</td>
<td>12 %</td>
<td>13 %</td>
<td>21 %</td>
<td>25 %</td>
<td>7 %</td>
<td>15.25 %</td>
</tr>
<tr>
<td>2- Second</td>
<td>0 %</td>
<td>6 %</td>
<td>27 %</td>
<td>4 %</td>
<td>25 %</td>
<td>22 %</td>
<td>16.9 %</td>
</tr>
<tr>
<td>3- Third</td>
<td>22 %</td>
<td>18 %</td>
<td>13 %</td>
<td>17 %</td>
<td>12 %</td>
<td>19 %</td>
<td>18.64 %</td>
</tr>
<tr>
<td>4- Fourth or higher</td>
<td>72 %</td>
<td>65 %</td>
<td>40 %</td>
<td>58 %</td>
<td>38 %</td>
<td>7 %</td>
<td>49.15 %</td>
</tr>
<tr>
<td>Father education**</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Illiterate</td>
<td>0 %</td>
<td>19.1 %</td>
<td>26.5 %</td>
<td>50 %</td>
<td>25 %</td>
<td>54.8 %</td>
<td>31.4 %</td>
</tr>
<tr>
<td>2. Primary</td>
<td>27.3%</td>
<td>0%</td>
<td>20.9%</td>
<td>3.6%</td>
<td>20%</td>
<td>3.2%</td>
<td>13.5%</td>
</tr>
<tr>
<td>3. High school</td>
<td>22.7%</td>
<td>47.6%</td>
<td>41.2%</td>
<td>17.9%</td>
<td>20%</td>
<td>32.3%</td>
<td>30.8%</td>
</tr>
<tr>
<td>4. &gt;high school</td>
<td>27.3%</td>
<td>14.3%</td>
<td>0%</td>
<td>28.6%</td>
<td>5%</td>
<td>9.8%</td>
<td>13.5%</td>
</tr>
<tr>
<td>5. Non-response</td>
<td>22.7%</td>
<td>9.5%</td>
<td>11.8%</td>
<td>0%</td>
<td>30%</td>
<td>0%</td>
<td>10.9%</td>
</tr>
<tr>
<td>Access to Television at home</td>
<td>89 %</td>
<td>76 %</td>
<td>100 %</td>
<td>83%</td>
<td>100 %</td>
<td>22%</td>
<td>76.5%</td>
</tr>
<tr>
<td>Access to Radio at home</td>
<td>39%</td>
<td>59%</td>
<td>21%</td>
<td>58%</td>
<td>81%</td>
<td>93%</td>
<td>68.2%</td>
</tr>
<tr>
<td>Access to Internet at home</td>
<td>61%</td>
<td>6%</td>
<td>20%</td>
<td>54%</td>
<td>0%</td>
<td>4%</td>
<td>24.2%</td>
</tr>
<tr>
<td>Average number of rooms at house</td>
<td>3.8 (3.8-3.1)</td>
<td>4 (3.4-4.6)</td>
<td>3.5 (2.8-4.1)</td>
<td>5.4 (4.4-6.4)</td>
<td>5.4 (4.0-6.8)</td>
<td>4.6 (4.1-5.1)</td>
<td>4.4 (4.1-4.7)</td>
</tr>
<tr>
<td>Average number of toilet at house</td>
<td>1.9 (1.5-2.3)</td>
<td>1.6 (1.3-1.9)</td>
<td>1.40 (1.2-1.6)</td>
<td>3.04 (2.5-3.6)</td>
<td>2.7 (1.8-3.6)</td>
<td>2.7 (2.4-3)</td>
<td>2.3 (2.0-2.5)</td>
</tr>
</tbody>
</table>
3.3 Challenges

3.3.1 Challenges at school

Adolescent girls reported school environment as challenging during menstruation. Adolescent girls felt uncomfortable at school; and described feelings of anxiety, stress, fear, and shame. Some of the practices girls adopt if she has to attend schooling during menstruation includes sitting alone, avoided talking with others, and limited participation in much of the classroom activities. Due to constant fear of bloodstain that might appear in their cloths, girls generally avoid movements in and outside classroom and prefer to stay stationed at one place. One of the girls summarized her views as follows:

“I do not want to talk about my period to anyone as it is a personal thing and do not want others to know about this. I feel shy talking about menstruation to others”.
–IDI Adolescent Girl

Other respondents described behavior of menstruating girls as follows:

“She has stress, behaves badly with her fellow classmates and is arrogant since she is not feeling well” - FGD Girls School

“She is sad sits alone, do not participate in classroom, everybody knows from her face that she is menstruating” - FGD Girls school

3.4 Determinants of menstruation related challenges

In an effort to inquire what factors contributed to the challenges adolescent girls face during menstruating, research assistants requested different respondents to share their views. The findings reveal that several factors pose challenge to girls during menstruation at school. The factors that determine type of challenges girls face at schools are presented as follows:

3.4.1 Determinant One, WASH Facilities at School

3.4.1.1 Availability of WASH facilities

The findings from onsite observation of WASH facilities reveal that all 12 schools had latrines on school grounds (Table 4). All schools, except three, had latrines exclusively for use by girls. There were 8 (66.7%) partially functional latrines for girls. Of the total schools studied, 50% (6) of schools had somewhat clean latrines. Lighting was good in latrines. From the total sites observed, there was at least some light in 8 latrines. From the total study sites, latrines in only 2 schools had somewhat functional locks. Latrines in 3 schools in urban areas and none (0) in rural areas had small dustbins. Only 2 schools had incinerator for burning used sanitary pads. Latrines in none of the study sites had anal cleansing materials. In addition, Data from observation of school sites reveal that only two schools in rural areas and five schools in urban areas had
functional water source on schools grounds. Nine schools (4 in rural areas and 5 in urban areas) had hand washing facilities available within their premises. Observation data show that of the total schools sites with hand washing facility, none (0 percent) in urban areas while only 1 had soap and/or ash available at the site. In addition of the total 12 schools, 5 in urban areas while 1 in rural areas had hand washing facility with water.

Table 4: Characteristics of WASH facility in schools in six provinces

<table>
<thead>
<tr>
<th>Sanitation Observations</th>
<th>Rural (n=6)</th>
<th>Urban (n=6)</th>
<th>Total (n=12)</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of schools with latrines</td>
<td>6 (100%)</td>
<td>6 (100%)</td>
<td>12 (100%)</td>
</tr>
<tr>
<td>No. of schools with <em>at least some</em> latrines specifically for use by girls only(^9)</td>
<td>5 (83.3%)</td>
<td>4 (66.7%)</td>
<td>9 (75%)</td>
</tr>
<tr>
<td>No. of schools with <em>at least some</em> partially functional(^10) latrines for girls</td>
<td>5 (83.3%)</td>
<td>3 (50%)</td>
<td>8 (66.7%)</td>
</tr>
<tr>
<td>No. of schools with <em>at least some</em> somewhat clean(^11) latrines for girls</td>
<td>3 (50%)</td>
<td>3 (50%)</td>
<td>6 (50%)</td>
</tr>
<tr>
<td>No. of schools with <em>at least some</em> light(^12) in latrines for girls</td>
<td>5 (83.3%)</td>
<td>3 (50%)</td>
<td>8 (66.7%)</td>
</tr>
<tr>
<td>No. of schools with <em>at least some</em> functional locks in latrines for girls</td>
<td>1 (16.7%)</td>
<td>1 (16.7%)</td>
<td>2 (16.7%)</td>
</tr>
<tr>
<td>No. of schools with <em>at least some</em> trash bins</td>
<td>0</td>
<td>3 (50%)</td>
<td>3 (25%)</td>
</tr>
<tr>
<td>No. of schools with anal cleansing materials</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>No. of schools with space or pits used for burning used sanitary materials</td>
<td>0</td>
<td>1 (16.6%)</td>
<td>1 (8.3%)</td>
</tr>
<tr>
<td>No. of schools with incinerators for burning used sanitary materials</td>
<td>0</td>
<td>2 (33.3%)</td>
<td>2 (16.7%)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Water Observations</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of schools with functional water source on school grounds at time of visit</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Hygiene Observations</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of schools with hand washing facilities available</td>
</tr>
<tr>
<td>No. of schools with hand washing facilities with soap or ash available</td>
</tr>
<tr>
<td>No. of schools with hand washing facilities with water available</td>
</tr>
</tbody>
</table>

No data was available for the study schools if they had washing facility with soap, ash and/or water available inside and outside latrines. Most of the adolescent girls reported not using latrines because of dysfunctional hand washing facilities, particularly inside the latrines. One

\(^9\) Latrines specifically for girls defined as in UNICEF WASH in School Monitoring Package (2011) - designated for girls only, boys cannot use them.

\(^10\) Latrine functionality defined as in the UNICEF WASH in Schools Monitoring Package (2011). Toilets can be used, but there are at least some problems with the physical infrastructure (e.g., deterioration in concrete, loose doors, locks, deteriorating roof) and some repair is necessary.

\(^11\) Latrine somewhat clean defined as in the UNICEF WASH in Schools Monitoring Package (2011). There is some smell and/or some sign of faecal matter/urine and/or some flies and/or litter.

\(^12\) Latrine some light defined as in the UNICEF WASH in Schools Monitoring Package (2011). There is less visibility on the inside, but it is still possible to see clearly. Girls would be able to look at their uniforms and tell if there is a stain.
school in Ghor had UNICEF built sanitary latrines with attached hand washing facility, but the school administrator reported that it was not used due to the unavailability of running water and soap.

The World Health Organizations recommends a pupil-to-latrine ration of 25:1. While most of the schools in the study had latrines, none of the schools met the WHO recommended ratio [15]. This is an indication of inadequate latrines in study sites. Further analysis and disaggregation of data by gender show that on average mean girl-pupil to latrine ratio in rural schools in the study sites is 26:1 which is close to WHO standard of 25:1 while the girl pupil to latrine ration in urban schools is 120:1, far from WHO standard (table 5). The ratio for boys was not calculated since most of the schools were only girls’ school, except in some provinces where boys were enrolled up to grade 4.

Table 5: Mean Pupil- to-Latrine Ratios

<table>
<thead>
<tr>
<th>Sanitation: Pupil-to-latrine Ratios</th>
<th>Rural (n=6)</th>
<th>Urban (n=6)</th>
<th>Total (n=12)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean pupil-to-latrine ratio in participating schools</td>
<td>38:1</td>
<td>144:1</td>
<td>91:1</td>
</tr>
<tr>
<td>Mean girl pupil-to-latrine ratio</td>
<td>26:1</td>
<td>120:1</td>
<td>73:1</td>
</tr>
<tr>
<td>Mean boy pupil-to-latrine ratio</td>
<td>62:1</td>
<td>313:1</td>
<td>188:1</td>
</tr>
<tr>
<td>Mean pupil-to-latrine ratio for latrines considered at least partially functional only</td>
<td>68:1</td>
<td>378:1</td>
<td>223:1</td>
</tr>
<tr>
<td>Mean girl pupil-to-latrine ratio</td>
<td>72:1</td>
<td>407:1</td>
<td>239:1</td>
</tr>
<tr>
<td>Mean boy pupil-to-latrine ratio</td>
<td>79:1</td>
<td>1827:1</td>
<td>953:1</td>
</tr>
<tr>
<td>Mean pupil-to-latrine ratio for latrines considered at least somewhat clean only</td>
<td>149:1</td>
<td>738:1</td>
<td>444:1</td>
</tr>
<tr>
<td>Mean girl pupil-to-latrine ratio</td>
<td>105:1</td>
<td>540:1</td>
<td>323:1</td>
</tr>
<tr>
<td>Mean boy pupil-to-latrine ratio</td>
<td>210:1</td>
<td>1853:1</td>
<td>1031:1</td>
</tr>
<tr>
<td>Mean pupil-to-latrine ratio for latrines considered at have at least some light</td>
<td>169:1</td>
<td>392:1</td>
<td>280:1</td>
</tr>
<tr>
<td>Mean girl pupil-to-latrine ratio</td>
<td>94:1</td>
<td>409:1</td>
<td>251:1</td>
</tr>
<tr>
<td>Mean boy pupil-to-latrine ratio</td>
<td>210:1</td>
<td>1853:1</td>
<td>1031:1</td>
</tr>
<tr>
<td>Mean pupil-to-latrine ratio for latrines with functional locks</td>
<td>2555:1</td>
<td>1476:1</td>
<td>2016:1</td>
</tr>
<tr>
<td>Mean girl pupil-to-latrine ratio</td>
<td>1254:1</td>
<td>1387:1</td>
<td>1321:1</td>
</tr>
<tr>
<td>Mean boy pupil-to-latrine ratio</td>
<td>328:1</td>
<td>1891:1</td>
<td>1109:1</td>
</tr>
</tbody>
</table>

Consistent with direct observation findings, qualitative data suggest that lack of functional WASH facilities at schools has greatly impacted students’ coping strategies during menstruation. Further, it has also adversely impacted female teaching staff. When inquired if teachers use latrines, one of the teachers reported that:

“I do not use the school latrines because of the poor conditions and maintenance. I live near-by school and often goes home to use the latrine at home. This wasn’t the case for other teachers, particularly those who do not live in proximity to schools.” -KII Teacher-
3.4.1.2 Conditions of WASH Facilities

While all schools in the study had latrines, adolescent girls reported that the condition of latrines were poor at schools. Most of the latrines are traditional open pits. The latrines are not clean, do not have functional locks and there is no hand washing facility in the latrines so to clean oneself. Lack of privacy emerged as the most cited reason by adolescent girls for not using school latrines. Adolescent girls reported that, in exceptional cases when they use latrines to change absorbent materials, they request one of their friends to accompany them to the latrines to look after them. In Laghman, one of the remote provinces, adolescent girls reported that they do not use the latrines because; latrines are close to the school boundary wall and were accessible to outside people as well. In some instances girls reported that they have to wait until the school closes so they could go back home and change their sanitary pads. Girls who didn’t had their period at school, reported that if they ever experience an episode of menstruation at school in the future, they would not use the school latrines, citing similar reasons.

Photo credit: © Dr. Formuly

In KIIIs, school teachers and administrators also expressed dissatisfaction with the conditions of latrines at schools. They reported that the school latrines lack privacy, running water and cleaning materials (toilet papers and soap).
3.4.1.4 Maintenance of WASH facilities

While most of the school administrators and teachers reported that the latrines and other WASH facilities are cleaned every day, the observation data reveal that lighting (either it is case of absence of light bulbs or absence of natural light) and cleanliness was poor in all school latrines studied. During the observation, the researchers found used toilets papers and feces on latrine floors. School administrators, teachers and adolescent girls reported that some younger students do not properly use the latrines and other WASH facilities. One of the school administrators reported that:

“We have designated staff that clean latrines every day before the students enter the school. However, the students, particularly the younger students openly defecate inside the latrines, which greatly affect their use by other students and teaching staff. We have told them several times in the class and during morning congregation to maintain cleanliness in school premises particularly in toilets, but they do not listen”.

In addition, lack of cleaning materials and functional water system (especially latrines lack intermittent and in some instances permanent supply of water) greatly affected utilization of WASH facilities in some schools. School administrators and teachers indicated that lack of resources, particularly budgetary constraints, greatly affects schools’ ability to maintain available WASH infrastructure at schools. The school administrator in one of the schools in Kabul
reported that the septic tank for the latrines was full. They do not have budget to empty the septic tanks in order to clean and remove blockage of latrines. In most of the schools, the school administration collects small contributions from teachers to purchase cleaning materials or repair WASH facilities including hand washing facilities and water system.

3.4.1.5 Availability of waste disposal facilities

Except three urban schools, none of the schools had a trash bin in the latrine. An adolescent girl reported that:

“There is no proper place for girls to change and dispose of their used napkins. In some latrines, they put paper cartons that are used by everybody as dustbin. From there, the support staff disposes off everything to a large container inside the school compound”–IDI Adolescent Girl-

In schools where the latrines are traditional open pits, girls throw used sanitary pads inside the pits. Some girls however indicated that they do not feel comfortable disposing used sanitary pads inside the pits or dust bins for the fear of having other girls seeing the blood stained sanitary materials. As such, girls carried dark plastic bags in their school bags to store used menstrual materials, including cloth or sanitary pads. Teachers also encouraged girls to use dark plastic
bags to take their used menstrual material home. When girls reach home, they later burned used sanitary materials (mostly cloths) or bury them in a safe and private place without involving other members of the family. This was done when male family members were not home, as girls felt uncomfortable to have male family members see used sanitary materials. Carrying several absorbent materials in their school bag could be unpleasant for adolescent girls due to foul smell. This furthers girls’ anxiety and level of discomfort. In addition, inappropriate disposal of sanitary pads and absorbent material could block the sanitation system at schools that would reduce their use.

*Waste disposal site in one of the schools in Kandahar Province*

Open dumping site in one of the schools in Kandahar. Photo credit © Assadullah Kamrani

### 3.4.2 Determinant 2: Education and Knowledge of Menstruation

#### 3.4.2.1 Knowledge & Education about Menstruation

Knowledge and understanding of biology of menstruation is important for girls to manage their menstruation. Girls’ feelings of shame, fear and stress are heightened by their lack of understanding of menstruation. The findings indicate lack of information and low awareness among adolescent girls about menstruation. Many girls reported that they only received information regarding onset of menstruation, duration and what to use to manage menstruation. Girls reported that they got information regarding menstruation from different sources. Mothers, elder sisters, grandmothers cousins, aunts were mentioned as the main sources of information at home. At school, adolescent girls obtained menstruation related information from friends, school teachers, in particularly from science and theology teachers. While some girls had received some basic information regarding menstruation prior menarche, it was considered inadequate.
One of the girls said that:

“My mother had told me about menstruation that you are a girl and whenever you face such an instance where you get menarche, do not panic. While the information was useful, it was too general. My mother had only told me that at a particular age, girls start menstruating so she should not panic. When you encounter such an instance. My mother did not provide more details, as I had a lot of questions.”

-IDI Adolescent Girl-

In rural province of Laghman, some girls reported that there are adolescent girls at school who have menstruation but do not know what it is, why it takes place, and how to care for it. They never talk to people and inquire about this from others to they can get necessary support.

Talking with research assistants, an adolescent girl reported that:

“I know someone who was praying during menstruation to avoid shame and just so others do not know about her menstruation. I told her that it is not good that you are praying during menstruation, because it is not allowed. You are deceiving not only yourself but also people. You are making yourself responsible to GOD. She felt ashamed and told me that I do not share this with others.”

-FGD, School girls-

The health workers also believed that due to lack of information and low awareness among local community members regarding menstruation, women and girls in particular do not take good care of themselves during menstrual cycle. One health workers shared a story from a girl in the community as follows:

“There was a girl who came to the clinic with her sister in law. She was not feeling well. I was new in the clinic, so she approached me and said that she is bleeding and that her other sisters are ok. She was crying. I felt sorry for her and told her everything about menstruation. I told her that this is a not a sickness rather it is a natural thing that every girls will experience, every month. It often lasts for 7 or more days. It can occur to me and other family members at your home. She was very happy and thanked me for that. She said I had relieved her from a very big worry. She said I have not sat with any male so I am not sure what is happening to me.”

-KII Health Worker-

The study findings reveal that due to the lack of information about menstruation, respondents often tried to hide their period to avoid shame and discomfort.

Most of the adolescent girls and mothers believed that menstruation is release of dirty blood from their body so they remain healthy.
3.4.2.2 Knowledge of menstruation before menarche

The menarche experience was traumatic for most of the adolescent girls. Girls described menarche as a frightening and stressful condition. Low level of education about menstruation particularly, before menarche caused panic among young adolescent girls. They did not know why they were bleeding. Some thought they had become sick. Others thought they lost their virginity. Adolescent girls who had experienced menarche outside home had more unpleasant experience compared to their counterparts who had menarche at home.

One of the girls reported that:

“I did not know about menstruation. I was sleep and when woke up, I had my first period. I did not know what to do. I could not get up from my bed. When someone has not experienced this in her life, and is ashamed, it is difficult. I was crying when I had my first period since it did not make sense to me. I called upon my aunt who was sleeping besides me and told her about the incident. She said do not worry, it happens to every girl and then I became to know.” -FGD out of school girls-

The school administrator in one of the schools reported that:

“One day, our female cleaner brought a young girl who was crying. She had her menarche and did not know what to do. They brought her to my office. We provided assurance and told her that this is a normal thing and every girl will experience this.” -KII School Administrator-

Below is story of two different girls who shared their experience from menarche.

“I was 15 when I had my period. Was at home, and was feeling frightened. My sister had provided little information. I went to her again and told her that I have become sick like you. She gave me cloths to use and said use this so your cloths does not become dirty. Washed the used cloths and after getting it dry, used them again. I only told my sister, did not want my father and brother to know. I would say to myself that if they become aware of this it is really bad and I will feel really ashamed of them.”

-IDI Adolescent Girl-

“I was 14th when I had my first menarche. I was at my aunt’s house in Herat as a guest and got menarche. I went to my aunt who was at my age and told her that I have become sick like you as she had told me about her period. She then gave me sanitary pad and showed me how to use it. I had some information also, as my aunt and grandmother had told me about it. But I did not have any materials I therefore had to tell my aunt and did not want others to know about it. My aunt told me do not be ashamed and be afraid, every girl experience menstruation it is not only you. –IDI Adolescent Girl-
3.4.2.2 Menstruation in School Curricula

Adolescent girls, teachers and school administrators reported that while there is no specific subject in the school curriculum regarding menstruation, some information is taught to students in girls’ school in Islamic studies and science subjects, including biology, in grades 10 to 12. In schools, adolescent girls do not receive menstrual education in a timely manner as some of the girls may have already experienced menarche prior to grade 10. Some teachers believed that it is too early to teach menstruation to students who are in grade 5-6. They also believed that it is not appropriate to teach menstruation when young boys and girls sitting together in the same class. A female teacher reported that:

“I do not favor teaching menstruation to younger children, particularly when girls and boys are in the same class. I do not think it is good for girls and boys to learn about such sensitive topic at this younger age, especially when they are sitting together. This will limit girls’ ability to openly discuss this and share their concerns with teachers. If it is not done here at school, I suggest girls can go to clinics and seek information from gynecologist doctor. However, I do not have problem when this topic is taught at the university level, even if there are co-education system. You know, university students are grown enough, they know what is good and what is bad for them. I think this is not the case with younger children.” -KII School Teacher-

Conferring to the views expressed by adolescent girls, and to address the information gap regarding menstruation, teachers said they teach menstruation as side topic, since there was no formal subject in school curricula on the topic of menstruation. Meanwhile, most of the teachers reported not having received any formal education or training regarding menstruation, which often impacted the type of information they share with the adolescent girls.

The nature of information as described by adolescent girls and teaching staff was mostly biologic in nature. Furthermore, menstruation was sometimes discussed when reproductive health issues were presented, particularly by science and biology teachers. Information presented often included, menstruation, signs and symptoms and management strategies including use of different sanitary pads and disposing absorbent materials. However there was incongruence between information presented by teachers regarding menstruation and available resources at schools including lack of access to WASH facilities, unavailability of hand washing space and lack of designated place at school to change absorbent materials. This resulted in lack of compliance by most of the adolescent girls.

Due to sensitive nature of the topic, in almost all provinces, female teachers were assigned to teach menstruation, except two rural provinces where they did not have female teachers. In these rural provinces of Laghman and Ghor, male biology and science teachers taught about menstruation to adolescent girls, which were considered not useful by girls and other teaching staff. Adolescent girls felt uncomfortable listening to a male teacher talk about or discuss menstruation with girls.

One of the girls said: “Since this is a very sensitive topic, it is not good for male teachers to talk about menstruation with adolescent girls. It is a shame. Students know about menstruation and
so does teachers. There is therefore no need to talk about this. If there was a female teacher, it is then fine to talk about it, but not for male teacher to talk with girls about menstruation.”

-IDI Adolescent Girl-

3.4.2.3 Type of information presented to girls regarding menstruation

Adolescent girls receive different information regarding menstruation in different settings. While some girls did learn about menstruation in school, health care workers were also another popular source of information. In Kabul’s urban schools, a male and female health worker taught students about health topics including menstruation.

The school administrator said: “they are not there anymore as the organization that was funding them had to stop supporting their salaries”. In the remaining schools, health workers did not often visit schools to share information about menstruation and other health related topics.

In addition, there was no structured material regarding menstruation at schools and at the health facility. While talking with research assistants, the health workers indicated that they do not have any structured materials regarding menstruation in their health education materials. To this end, information regarding menstruation is integrated into other health topics including pregnancy, childbirth and breastfeeding. They further added that while girls often get information from school, health workers also educate them about menstruation and how to care for oneself during menstruation whenever girls approach healthcare facilities for other health problems.

Information regarding menstruation is presented to mothers and their daughters during health education sessions\(^\text{13}\) organized at the health facilities. If mothers are not accompanied by their daughters at the clinic, health workers encourage the mothers to share this information with their daughters and other family members. According to health workers, mothers do not share this information with girls because they feel shy. This was confirmed by adolescent girls at the community.

One of the girls in out of school FGD said that: “At home girls have little knowledge since mothers do not provide adequate information to them and girls also feel shy to ask questions or probe for information. Some mothers believe that it is not good for them to talk to girls about this sensitive topic. They feel uncomfortable discussing menstruation with their daughters.”

The information girls received at home was different from the information and guidance they received at school and health care settings. For instance, some of the mothers believed that if girls start menstruating at an early age, girls would be prone to cancer. Some girls in rural schools were taught that if menstruation does not take place, it is a sign of impairment and

\(^{13}\)Health education sessions are part of routine activities of health facilities. These sessions are organized every day at the health facility and at the community. The health education sessions in the clinic is often provided by healthcare providers including doctors, nurses, midwives and vaccinators, while at the community level, Community health workers organize health education sessions. The health education sessions organized at the health facility is for those who visit health facilities and have access to the health clinics. However, health education sessions organized at the community is organized for people who live in remote and underserved areas and do not come to health clinics.
infertility. Others believe, that menstruation takes place because dirty blood accumulates in their body, and has to be released otherwise they will become sick.

Meanwhile inability of mothers to provide information or discuss menstrual related topic in some provinces could be attributed to mothers’ limited knowledge and understanding of menstruation. Furthermore, given the low literacy rate for rural women and the fact that they have not received formal education regarding menstruation, mothers may not able to discuss menstruation with adolescent daughters at home.

3.4.2.4 Cultural Beliefs and Practices as determinants of some of the challenges girls face at school and home

Traditional beliefs and practices often determine women and girls behavior during menstruation. For instance, women and adolescent girls follow specific diets during menstruation. Adolescent girls and mothers reported that families encourage girls to use hot meals and beverages including tea during menstruation. Mothers reported preparing specific local dishes including “Chawa”\(^{14}\), “Liti”\(^{15}\), “Shula”\(^{16}\) for girls while they have their period. Mothers encourage their daughters to drink more tea and avoid certain foods and beverages including cold water, yogurt, spicy and sour food, salads, tomatoes and lemons. Adolescent girls reported that they are told by their mothers if they drink cold water or eat sour food, they will become sick and have “Gazak”\(^{17}\) in their body.

In addition, local cultural norms and customs determined use of personal hygiene practices. In most of the provinces, women and girls reported not taking shower during menstruation. Health workers also added that some women in the community have this belief that it is not good to wash oneself during menstruation as it will bring them harm or they will become sick.

A girl reported that:

“I do not often take shower during menstruation, but if I have to go somewhere for instance attend a wedding party or attend a ceremony, I take shower” -IDI Adolescent Girl-

Conferring to the views expressed by the respondent, the health workers reported that some girls in their community do not maintain good hygiene during menstruation. In some instance, women and girls do not use absorbent sanitary materials including menstrual cloths. They do not wear any sanitary material.

In one of the provinces, the health worker reported that: “Girls in this community do not maintain good personal hygiene. They do not use menstrual cloths. I have seen girls who do not even use any type of absorbent materials. They have strong and unpleasant smell when they come to the clinic. When I asked them if they wear any sanitary materials they say they do not

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\(^{14}\) A homemade semiliquid mixture prepared from black tea, sugarcane, walnut, almond, pistachio, and ginger

\(^{15}\) A homemade traditional semiliquid mixture prepared from flour, sugar, oil water and dry nuts. It is often given to childbearing women, lactating mothers and women in menopause including younger girls during menstruation

\(^{16}\) It is a famous Afghan dish, prepared from rice, peas, onion, garlic, spinach, curd, black pepper. It is good in flavour and very nutritious

\(^{17}\) It means getting cold or feeling cold due to exposure to cold water.
use anything indicating they do not feel it is necessary to use or wear additional materials during menstruation. They say who will wash menstrual cloths every month –KII Health Worker-

In addition, cultural norms also determined type of activities adolescent girls could engage during menstruation. Girls mentioned that they did not play outside with other children or go to neighbors’ homes. Girls did not participate in household work including washing, cooking, laundry and household cleaning. In a few instances, girls and mothers were not allowed to participate in home activities including washing clothes and cooking and preparing food during menstruation because they are not perceived clean by household members. Adolescent girls at school reported that during menstruation, they do not participate in physical activities including jump-rope workouts. Likewise, most of the out of school girls reported not working in the farmlands during menstruation. One of the girls said: “We do not go to cotton field and do not go to fetch water. We rarely participate in wedding ceremonies.” –FGD Out of School Girl

When probed for information regarding the reason, girls reported that family members think it is not good for them to engage in outside activities as they are now grown adults. Culturally it is not appropriate for girls to go outside after they have their first period, since the environment is not safe.

One of the girls said:

“Families think girls have grown, are mentally more mature than before, should be more caution of their surroundings, should be descent in character and involved them in decision making thinking she has gained wisdom.” IDI Adolescent Girls-

Another girl reported that:

“My family tells me that I have grown and am no more a child. I should not go out to bazar and not to relatives’ house as there are so many things in the world, if something happens, we will shave your head. I do not dare to go out because I am afraid; this situation is not that good. My uncle’s family told me that when I was a child whatever I was doing was ok as I was a kid, now I have grown, I should be cautious of my activities.” IDI Adolescent Girl

In some instances, women and girls avoided social activities such as funerals weddings, and going to the shrine. One mothers said:

“Our elders and our mothers told us that do not go to funeral since it is not good. The girls are not clean and have not taken bath, while the deceased has taken bath and will become unclean”. –FGD Mothers-

Mothers in urban provinces believed that some of the cultural practices were old fashioned. Referring to the era of ignorance, one of the mothers reported that:

“During the period of ignorance, people would isolate women and did not allow them to eat with others. They would tell them not to participate in meal gathering. Even would feed them
separately. But, when Bibi Ayesha (Prophet Mohammad’s wife) would become sick, he would drink water in her glass. I do not see any problem in women who have menstruation.”

- FGD Mothers-

Another mothers said:

“\textit{The problem of isolating women during menstruation is still there in some remote areas. They do not allow women to eat together with other family members. They do not allow them to take bath and would say if you wash yourself, you will have heavy hair fall from your head and one should cover their hair until they become clean. They would even say do not cut your nails during menstruation. This is not the case in urban areas.}”

- FGD Mothers-

Traditional beliefs also guided the way girls and women disposed of used menstrual material. Some girls believed it is not good to burn napkins or sanitary pads before washing them. They said used sanitary pads soaked with blood should be washed and then buried or burned. Girls thought burning sanitary pads soaked with blood is a sin. Some believed that it should be washed before dumping it so nobody sees it.

A girl reports that:

“\textit{From an Islamic perspective, seeing pads with stained blood by strangers is considered sin.}”

- Girls FGD School-

Regarding disposal of sanitary pads, mother had different views. Most of the mothers believed that burning sanitary pads is not good.

One of the mothers said:

“\textit{Burning sanitary pads is not good, some peoplesay. Some water should pour one them so they become clean. It can be disposed or burned afterwards so nobody sees it. If you burn without cleaning, people say you are burning your blood.}”

She further added that: “\textit{burning is not good for the environment as it pollutes our environment}”.

- Mothers FGD-

\textbf{3.4.2.5 Trusted source of information and support}

Girls receive information from multiple sources including parents, siblings, grandparents and other family members at home. At school, they received information regarding menstruation from teachers and fellow classmates. In other instance, girls reported reading about menstruation in books and sometimes while watching TV. As a result of diversity in the source of information, girls often received different types of information regarding menstruation. This created confusion among adolescent girls and in most instances shaped their behavior and practices regarding menstruation. Almost all respondents expressed dissatisfaction regarding the type of information
presented to adolescent girls regarding menstruation. Information was more general in nature and did not provide more insight into the subject of menstruation. Girls indicated needing more tailored and useful information so they are able to manage menstruation more effectively at school and at home.

In addition, the school administrators and school teachers suggested improvement in girls experience at school by facilitating timely transfer of information from teaching staff to students. School teachers indicated a desire to support girls during menstruation so they actively participate in classroom activities.

Meanwhile, most of the mothers reported that they do not feel comfortable talking about menstruation with their husband and sons and sometimes female elders at home regarding menstruation. They reported use of slang words to talk to other women at home while referring to menstruation. Given the sensitive nature of the topic, mothers felt uncomfortable talking with girls regarding menstruation, while in other instances; adolescent girls did not want to seek information from their mothers and teachers about menstruation.

“To avoid shame and discomfort, we do not want men to know about our period, we therefore use these terms which is common among women to discuss menstruation related issues. It is a shame to talk to male about menstruation related topics.” FGD Mothers

When girls were asked which source of information they trust the most, some respondents from out of school FGDs indicated that it should be the mothers who should tell their daughters about menstruation as mothers are very close to human beings. In addition, mothers suggested that girls should learn about menstruation at school.

3.5.3 Determinant 3: Materials for management of menstruation

3.5.3.2 Preferred Menstrual Management Materials

Some of the commonly used materials by respondents to manage menstruation included sanitary pads and menstrual cloths. All girls preferred use of sanitary pads. But, sanitary pads were mostly used by girls living in urban areas. Contrary to the girls living in urban areas, most of the girls in rural areas used menstrual cloths. Almost all girls preferred use of sanitary pads at school. Girls therefor kept sanitary pads for school use and used menstrual cloth at home. Sanitary pads were preferred for use in school because of comfort in their use, being absorbent and reducing risk of leaks and staining clothes.

One of the girls reported that: “Since people live far from city, and are poor, they often use menstrual cloths.”

- FGD out of school girls-
3.5.3.3. Access to and sources of menstrual management material

A girl’s education, socioeconomic status and access to local markets influenced their choice of menstrual materials. But good SES was not an indication that girls will use sanitary pads. The most important determinant in terms of choice of using sanitary materials was accessibility. Girls living in urban areas had access to local markets and pharmacies. Most of them used sanitary pads. While girls in rural areas preferred use of sanitary pads, they did not have access to local shops and pharmacies to purchase sanitary pads. Not all shops in their communities sold sanitary pads. When sanitary pads were available, they would request their mothers to purchase sanitary pads for them. In most instances, mothers purchased sanitary pads in bulk while going to local markets outside their community. When they ran out of sanitary pads, girls reported using cloths. Ease of access, low price and reusability were the main factors determining their choice of use of menstrual cloth.

With regards to source of getting menstrual materials, girls reported several sources of sanitary materials. Outside the school environment, adolescent girls purchased sanitary pads from pharmacies and general stores. Mothers mostly purchased sanitary pads for adolescent girls from local shops and pharmacies. While almost all schools had small shops within the school compound, very few sold sanitary pads. Lack of menstrual management materials at school affected girls’ ability to deal with stressful situations associated with menstruation. Most of the adolescent girls often brought sanitary pads from home for use during menstruation. They also brought cleansing materials including soap and toilet paper during menstrual cycle. In two instances, teachers reported providing sanitary pads to students who had their menstrual cycle at school.

Respondents who used cloths as the main sanitary materials during menstruation indicated that they get the materials from home, which is often provided by their mothers, elder siblings, aunts or grandmothers. The menstrual cloth, or “tikka,” was prepared at home from cotton materials and old cloths. Sometimes they purchase cloths from the market and prepare menstrual pads for use during menstruation.

One of the adolescent girls reported that:

“I always use cloths because we live in remote areas where access to sanitary napkins/pads is limited. When my mother goes to city she brings sanitary pads, but when it finishes, I have to rely on cloths.” -IDI Adolescent Girls-

3.6 Impactson and risks to girl’s health and education

Adolescent girls adopted several coping strategies to deal with fear, shame while managing menstruation. Some of these coping strategies determined the way girls interacted with their
peers and engaged in classroom activities. Teachers interviewed during study indicated that as a result of MHM challenges at school, adolescent girls experience negative outcomes, some of which may have potential health and education risks for adolescent girls. Health and education impacts included prolong stress, self-isolation, and lack of participation in classroom activities, absenteeism, and poor academic performance. Risks include school drop-out and contracting infections.

3.6.1 Potential Impacts

3.6.1.1 Self Isolation

The constant feeling of shame and fear during menstruation led to self-exclusion among adolescent girls. Adolescent girls reported excluding themselves from social interaction at school and at home. Girls distanced themselves from their peers so to avoid foul smell bringing noticed by other students. Most girls discussed that they remained seated until the school was closed to minimize the chances of others knowing about their menstruation. Some girls reported associating only with their close friends; others avoided interaction with younger girls who did not know about menstruation. At home, due to feeling of shame, adolescent girls reported sitting in their own rooms, away from other family members including brothers and fathers. They reported avoiding eye contact with their father and brothers. Mothers in some provinces reported encouraging girls to stay away from male family members including father and brothers.

3.6.1.2 Participation in school activities

Girls discussed feeling tired and fatigued, limiting their participation in classroom activities. During menstruation, they preferred not going in front of the classroom to write on the board. Most of the girls reported not participating in physical education sessions because they worry about leakage and subsequent shame. Abdomen cramps and headache associated with menstruation prevented girls from participation in class learning activities. The resulting feeling of pain, discomfort, stress, and fatigue contributed to low participation in class. Likewise, out-of-school girls indicated that during menstruation, they did not participate in household work. Besides pain and tiredness, traditional beliefs in some instances resulted in lack of participation of girls in household work. Mothers reported that they do not allow girls to work or participate in household work describing menstruation as a stressful and exhaustive process. One girl said:

“During menstruation, I feel tired and fatigue, particularly while at school. I try my best so that my fellow classmates do not know about my period, since I feel ashamed. I do not want to talk to someone and want to set aside and quite. I do not want to talk about my period to anyone as it is a personal thing and do not want others to know about this. I feel shy talking about menstruation to others. - IDI Adolescent Girl-

3.6.1.3 Distraction and lack of concentration

Some adolescent girls reported that they are not able to concentrate in their lessons during menstruation, particularly when they are in the school. The emotional feelings associated with menstruation causes distractions to most of the girls during menstruation.
3.6.1.4 School absenteeism

Girls had different attitudes towards school absenteeism. Some girls reported not wanting to miss classes during menstruation, however most girls indicated that they skip school for the first two days of their period and prefer staying home, particularly if the flow of menstruation was heavy. Teachers in some schools told adolescent girls to skip first school days if they felt the flow of menstruation was heavy. In some instances, girls were given leave of absence when teachers were told by adolescent girls that they are not able to manage their menses properly at school and wanted to go home. Meanwhile, mothers preferred that girls skip school for one or two school days as a result of menstruation so to avoid embarrassment at school.

One mothers said:

“It is better for girls to stay home while menstruating.” At home, they are more comfortable as they have access to materials, toilet and most importantly we can provide support. But in school, they do not have facilities and they cannot rest. At home they can at least rest. At school there is no proper place so they can solve their problems”. -FGD Mothers-

3.6.2 Potential Risk

3.6.2.1 Health Consequences

3.6.2.1.1 Infection

In some provinces, health workers indicated that due to low level of awareness about menstruation among residents, menstrual management practices is poor among women in general and adolescent girls in particular. They noted that girls often do not maintain good hygiene during menstruation. This increases the risk of contracting infection. Girls and mothers often approach the clinic for treatment of infection. One of the health workers said that:

“The level of education and awareness in this community is low. People including adolescent girls and women do not know the importance of personal hygiene. Some of them therefore do not maintain good personal hygiene. They often come to clinic complaining from pain and itching and other health problems.”

- Health Worker-

Health workers assumed that in some instances, due to poor hygiene and menstrual management practices including use of unhygienic materials, girls’ contract infection and they come with different symptoms to the clinic including burning micturition, ovarian cysts and uterus cyst. Some of the conditions get worse and if not treated on time may lead to hospitalization for severe infection.

One of the mothers recommended that:

“In our community most of the women use menstrual cloth during menstruation. After use, they wash it and keep it hidden from other family members without exposure to sun and in some instances in places with higher chance of getting infection so it becomes dry. I think we need to educate women about this in our community.”-FGD Mothers-.
3.6.2.2 Education Consequences

3.6.2.2.1 School Drop-out

School absenteeism was common among adolescent girls. Most of the adolescent girls missed school for the first two to three days during menstruation to avoid discomfort and shame at school. School administrators and teachers were concerned that prolonged absenteeism could influence students’ attendance and potentially lead to girls dropping out from school. They indicated that girls missing 2 to 3 days every month will lead to increased missed school days in a year. They reported that girls who are absent due to menstruation are labeled as absent, and this could influence girls’ ability to qualify for exams and will ultimately lead to their failure in that particular class. In case the girls have high absenteeism, this may ultimately lead to drop out from the school.
CHAPTER FOUR: Provincial Analysis

4.1 Variation between Rural and Urban Schools

4.1.1 Knowledge of Menstruation

4.1.1.1 Terms used to describe menstruation

Respondents in both urban and rural schools used similar terms to describe menstruation. Common terms presented included: sickness, monthly disease, monthly period, menstruation and “Benamazy”. In some provinces, however, people used local terms to describe menstruation. Likewise, respondents reported pain, low back pain, abdomen cramps, nausea, headache, paleness and in some instances acne on their faces as major physical symptoms and signs for menstruation. Stress, feeling of anger, short temperedness, and in some instance self-isolation was reported as signs observed among girls during menstruation.

4.1.1.2 Source of Information regarding Menstruation

No difference was ascertained in the views expressed by respondents in difference provinces regarding sources where adolescent girls obtained information regarding menstruation. Girls often preferred getting information from people they trusted the most. Girls in urban and rural schools described receiving information from: mothers, sisters, aunts, sister in law, cousin and grandmothers. At urban and rural schools, girls obtained information from teachers and in some instances close friends. Irrespective of the type of source, adolescent girls uniformly reported that the information presented by different sources was not adequate, needing more insight into the topic. Girls reported wanting more information to help them manage menstruation more effectively. In some provinces, girls reported feeling shy asking questions from mothers and other elders in the family. This as described by some respondents put girls in precarious situation as they are unable to deal with anxiety and stress associated with menstruation. Officials in Balkh described the situation as follows:

“Awareness is generally low. Girls face a lot of challenges. If someone dares to speak, they will get help, other girls will live with this pain and shame.” School administrator

Another respondent reported that:

“Families living in cities and rural areas differ in terms of their perception of MHM. Urban families mostly prefer discussing it and allow girls to come to school in rural areas, this is not the case. People prefer that girls stay home during menstruation so nobody is aware of it.” KII Department of Education
4.1.2 Experience of Menarche

Without exception, all adolescent girls described the menarche experience as stressful and full of anxiety and fear. Some girls in rural Kabul and Laghman indicated that girls often hide their menstruation for the fear of being married to someone by their families. In Balkh however, girls reported that they had to hide menstruation from the family as they would not be allowed to go to school. One of the adolescent girls said that:

“I was sad and wanted to leave school but when knew that it happens to all women, and became more aware of it, continued my school.” FGD Girls Balkh

Another girl reported that:

“When girls reach puberty, the only thing people think is to get them married. When I had my first period, I was crying. This was my only worry that now people will be talking about my marriage, I will leave school. I was worried.”

IDI Laghman

4.1.3 Family Reaction

There was no difference with regards family reaction towards menstruating adolescent girls in rural and urban schools. Overall girls reported that mostly of the families feel happy seeing girls grown into adulthood. Family attitude was described as supportive of menstruating girls. Most of the mothers indicated providing moral support and do not allow girls to get engage in household chores during menstruation. They furthered added preparing special type of local meals in order to keep girls healthy. This included, Chawa, Yakhni, Litti and Soup. Mothers also reported encouraging girls not to eat spicy and sour food and do not drink cold water, yogurt and lemon during menstruation.

One of the respondents indicated that:

“After menstruation, mother and father discuss about the future of girls, if they are illiterate they soon think about marriage, but if they are educated they would think something different, this is the difference between rural and cities.” IDI Girl Ghor

4.1.4 Restrictions during menstruation

There was some difference in the views expressed by respondents regarding type of restrictions imposed on them during menstruation. As practicing Muslims, all girls reported not praying, fasting or reciting Holy Quran during menstruation. Regarding participation in ceremonies, while most of the girls indicated lack of restrictions, some girls preferred not to participate in ceremonies fearing shame and embarrassment should they get a stain in their cloth or have their period during the ceremony. Girls from rural school however reported not being allowed to participate in funerals. It was reported that since the deceased person is clean, menstruating girls would make them unclean. In some families in rural Kandahar and Ghor, girls reported that in some families people do not allow girls and women to cook indicting they are not clean. Conferring to the views expressed by girls in Ghor, mothers reported that in some communities, people do not eat with the women in the same place when they are menstruating.
“Some people say do not work you smell bad, we have to live with it and after we are clean they do not say such things. Do not participate in ceremonies; we do not talk too much. In villages, there is a lot of work; people do not care about these things.” FGD Mothers

4.1.4 Use of menstrual materials

Some difference was observed among urban and rural schools in terms of use of sanitary materials during menstruation. While all girls indicated use of pads as the most preferred menstrual material, some girls from rural schools reported using menstrual cloth. Inability to afford cost and accessibility to sanitary pads were cited reason for not using sanitary pads. Girls using sanitary pads reported ease of use and comfort including safety as important consideration for using sanitary pads. No difference was document regarding source of sanitary pads. Local shops, pharmacies and superstores were reported as the main sources of getting sanitary pads.

4.1.5 Disposal site

There were designated disposal sites in two urban and one rural school in study provinces. While there is no designated disposal site in other school, girls reported using dustbins and latrines as the main disposal sites to dispose of materials. The urban school in Kabul and rural schools in Kandahar, Ghor and Balkh had dustbins inside latrines which were used by girls to dispose of their used sanitary materials. In Ghor, there is properly constructed dumping site by UNICEF that was attached to an incinerator. However, the remaining schools, mostly in rural areas with traditional latrines, girls threw pads inside open pits as disposal site. The school administrator reported that:

“Adolescent girls bring pads from home. They change pads in the washroom and throw the used materials in the designated place where it is later incinerated by the support staff.” School Administrator GHOR

4.1.7 Cultural beliefs and practices

No difference was observed regarding cultural believes and practices of adolescent girls in rural and urban schools. Adolescent girls followed a specific diet during menstruation and avoid spicy and sour food. Except few girls, most of the adolescent girls in rural and urban areas did not take shower during menstruation. While a difference of opinion observed among adolescent girls in rural and urban areas, there is not adequate information to report with confidence a difference of similarity in the opinions or views of adolescent girls regarding certain cultural norms and customs that shapes the way girls behave during menstruation.

“In traditional societies, girls cannot express their concerns; they are often accompanied by someone from the family. I provide information and counseling to them. Some of them use unclean cloths in rural areas in urban areas girls often use cotex. This is common for women but very important for girls, they try to hide this. Mothers are not shy, while girls are often shy”. -KII Health Worker-
4.1.8 MHM in school curricula

There was no difference in the views expressed by adolescent girls regarding MHM in school curricula. Adolescent girls uniformly indicated that no topics are included in the school curricula regarding MHM. Menstruation-related topics are covered in some subjects like theology and biology. The information is taught as side topics by teachers. Consistent with the views expressed by adolescent girls, the school staff indicated that there is no specific topic regarding menstruation in the school curriculum. Except two urban and one rural school, none of the teachers had attended/received a training on MHM. In addition, lack of female teacher in remote provinces greatly affected students’ ability to acquire information regarding menstruation. As reported by girls in rural Laghman and Ghor, most of the teachers are male which makes it difficult for girls and the teachers to get engage in discussion regarding menstruation. In some instances, due to sensitive nature of the topic, younger teachers had difficulty to teach menstruation to adolescent girls, which greatly affected girls’ ability to acquire more in-depth information on the topic.

4.2 Variation between Intervention Vs Non-Intervention Schools

Out of 12 study schools, MHM interventions were implemented in three schools, one urban school in Ghor, one urban school in Balkh and one rural school in Kandahar provinces. MHM interventions implemented in schools included installing of wash room, place for changing menstrual materials, proper disposal site including incinerator. Some of the features of MHM intervention and non MHM intervention schools is presented as follows:

4.2.1 WASH Facilities

WASH infrastructure such as wash rooms was present in intervention schools but they were not functional. Girls therefore did not use them due to absence of running water, soap and other cleaning materials. No WASH facility was installed by UNICEF in non-intervention schools.

One girl said:

“The problems are the same as non-intervention schools. There is no professional teacher to teach menstruation. While there are new latrines present at school, most of them are locked. We use the same old latrines. They are very dirty, no materials and wash supplies are available inside the latrines. FGD School Girls

4.2.2 Place for changing menstrual materials

Regarding presence of designated place for adolescent girls to change materials, no difference was observed. Private room and latrines were the two locations where girls reported changing menstrual materials. All girls indicated feeling comfortable and safe changing pads at home due
to myriad of reasons including, privacy, ease of use, availability of cleaning materials. This was confirmed by one of the school teachers.

She said:

“Students wear their menstrual materials through out the day until they return home, because there is no space to change, no facility and no materials so they could purchase and change. They do not bring materials to school since there is no place for changing.”
-KII Teacher-

4.2.3 Disposal Site

Some difference was observed within non-intervention schools. While none of the schools had a designated place where girls could safely dispose their sanitary pads, adolescent girls in one of two schools indicated that there are dustbins placed in each latrine where they dispose used sanitary pads. They further added that the smaller dustbins are then emptied by support staff in a larger container placed in the school yard.

4.2.4 Condition of Wash Facilities

Condition of wash facilities were described as unsatisfactory by adolescent girls from intervention and non-intervention schools. While school administrator in all intervention schools indicated presence of WASH facilities, they however reported that they are not functional due to unavailability of water and cleaning materials.

4.2.5 School absenteeism

Regarding absenteeism there was mix feeling among adolescent girls from intervention and non-intervention schools. The information presented is not adequate to confirm with confidence similarity and/or difference among adolescent girls in intervention and non-intervention schools regarding absenteeism. Overall, most of the girls preferred attending school during menstruation, lack of wash facilities and fear of shame and embarrassment at school prompted girls to skip the first few schools days during menstrual cycle.

4.3 Variation of Information from School girls and Out of School girls

Out of schools girls constituted girls who were at school at some point in time, but dropped of school due to myriad of reasons including, lack of wash facilities, socio-cultural norms, and early marriage, distance from the school and lack of a safe environment at school and surrounding communities. In Balkh for instance, out of school girls were in school at some point in time, but due to unavailability of wash facilities, they had to quit school. Likewise, adolescent girls in rural school in Kabul indicated they are being teased by people while going to school. This has
prompted many families to stop girls from going to school for the fear of physical harm and sexual assault to girls.

4.3.1 Knowledge of Menstruation

No difference was observed regarding knowledge of menstruation among school and out of school girls. School girls had leverage of getting information from multiple sources, while out of school girls obtained information from limited sources including family members and religious scholars. A difference in type of information was also observed among school and out of school girls. While limited in nature, school girls obtained more accurate and scientific information regarding menstruation. However, the information presented to out of school girls was mostly conventional knowledge, emanating from experience and cultural practices.

4.3.2 Experience of Menarche

While menarche signified girls’ growth to adulthood, this was perceived by families of out of schools and some school girls as a sign of girls’ readiness for marriage. Adolescent girls from rural school in Laghman and Kabul indicated that one of the reason they had fear and worry during menarche was the fact that family members will decide about their marriage. In some instances, school girls in rural Ghor reported hiding their period so they are not forbidding from school. One of the girls reported that:

“After menstruation, mother and father discuss about the future of girls. If they are illiterate, they would soon think about marrying girls. However, if families are educated, they would think something different about the future of their daughters. This is the difference between rural areas and people living in cities.”

-IDI Girl Ghor-

4.3.3. Family Support

Access to information and family support and most importantly wash facilities was always there for the out of school girls. However, this was not always the case for school girls. School girls did not have access to moral support if they were at school. While some school girls reported getting support from friends and teachers, they sometimes refrained talking with friends and teachers about menstruation and stress associated with the event. Conferring to the views expressed by school girls, mothers reported that girls do not have moral support at school. There is no place for them to rest. This could be facilitated at home.

Overall school girls described their experience while at school as stressful and full of anxiety. Lack of facilities, peer pressure and fear of embarrassment among peers and school staff coupled with poor concentration to lessons puts school girls at a precarious situation.

4.3.4 Use of Materials and Disposal Strategies

On the use of materials, no difference was ascertained among school and out of school girls. Adolescent girls used cloths and sanitary pads and used different strategies to dispose used
materials. However, there was some difference among school and out of school girls regarding disposal of used materials. While school girls had access to incinerator in only three intervention schools, in all other school, girls used the same disposal strategies as out of school girls. Some of the common disposal strategies used by adolescent girls included, burying, open dumping away from home, burning and in some instances
CHAPTER FIVE: Conclusion

5.1 School WASH Facilities

- Latrines are available in all 12 schools but usage varies due to functional aspects. Usage varies in urban vs rural schools and also by gender.
- Usage of latrines specifically by girls is higher in rural schools than urban schools. The trend is similar for partial functional latrines which were found higher in rural schools.
- The trend is otherwise on indicators such as latrines having trash bins and having incinerator which were found in some of the urban school and nil in rural schools. Same was case found with urban schools on having better washing facilities and running water availability as compared to their counterpart. The condition of WASH facilities in non-intervention schools was much poor compared to intervention schools. Atleast intervention schools have a washroom though nonfunctional but in non-intervention schools there were no washrooms.
- The mean pupil to latrine ratio is below the WHO standard indicating inadequate number of latrines for pupils.
- On average mean girl pupil to latrine ratio in rural schools in the study is 26:1 which is close to WHO standard of 25:1 while the girl pupil to latrine ration in urban schools is 120:1, far from WHO standard.
- Due to absence of appropriate bins in washrooms, girls adopt various practices such as bringing waste bag, disposing waste in open pits, taking menstrual waste back home after school, burning of menstrual waste
- Absence of appropriate latrines and WASH facilities affected attitudes and practices of adolescent girls across the 12 schools during mensuration.
- Schools lack financial as well as management capacity to manage cleanliness, hygiene in washrooms

5.2 Knowledge & Education

- Girls reported that they got information regarding menstruation from different sources but lack complete information about the management of menstruation. Mothers, elder sisters, grandmothers cousins, aunts were mentioned as the main sources of information at home. At school, girls learned about menstruation from friends and science and theology teachers
- Most of the adolescent girls reported getting some basic information regarding menstruation prior menarche. However, the information was considered inadequate
- Though girls received information from multiple sources, the information provided was sometimes contradictory to other sources of information. This further complicated the situation for girls to manage menstruation.
- School girls had leverage of getting information from multiple sources while out of school girls obtained information from limited sources including family members and religious scholars. A difference in type of information was also observed among school and out of school girls. While limited in nature, school girls obtained more accurate and
scientific information from school teachers, however the information presented to out of school girls was mostly conventional in nature, emanating from experience and cultural practices.

- Menarche experience was traumatic for most of the adolescent girls. Girls described menarche as frightening and stressful.
- Adolescent girls who had experienced menarche outside home had more unpleasant experience compared to their counterparts who had menarche at home.
- Adolescent girls, teachers and school administrators reported absence of specific subject in the school curricula regarding menstruation, some information is taught in girls school under Islamic studies and science subjects, including biology, in grades 10 to 12.
- Teachers in spite of being educated doesn’t lay importance on providing menstruation related education in grade 5-6 as they believed it is too early to teach menstruation to students who are in grade 5-6. They also believed it is not appropriate to teach menstruation when young boys and girls sitting together in the same class.
- Most of the teachers had not received any formal education or training regarding menstruation, which influenced the type of information they share with adolescent girls at school.
- The nature of discussion on menstruation if ever happened is around biology of reproductive system by science teachers.

5.3 Beliefs and Practices

- Traditional beliefs and practices determined girls’ behavior during menstruation. For instance, adolescent girls follow specific diets during menstruation. Adolescent girls and mothers reported that families encourage girls to use hot meals and beverages including tea during menstruation. Mothers reported preparing specific local dishes including “Chawa” “Liti” “Shula’ for girls while they have their period.
- Local cultural norms and customs determined use of personal hygiene practices. In most of the provinces, girls reported not taking shower during menstruation. According to health workers some women in the community have this belief that it is not good to wash oneself during menstruation as it will bring them harm or they will become sick.
- Cultural norms also determined type of activities adolescent girls could engage during menstruation. Girls did not participate in household work including washing, cooking, laundry and household cleaning. This was particularly reported by the girls in rural Kandahar and Ghor, as families did not allow girls and women to cook indicting they are not clean.
- Most of the girls mentioned that they did not play outside with other children or go to neighbors’ homes. Family members believed it was not good for them to engage in outside activities as they are now grown adults and it is not considered appropriate for girls to go outside after menarche.
- Mothers in urban provinces believed that some of the cultural practices are old fashioned.
- Adolescent girls adopted several coping strategies to deal with fear, shame while managing menstruation. Adolescent girls reported excluding themselves from social interaction at school and at home from their classmates and family members. Girls distanced themselves from their peers so to avoid them noticing foul smell.
• Some girls in rural Kabul and Laghman indicated that girls often hide their menstruation for the fear of being married to someone by their families. In Balkh however, girls reported that they had to hide menstruation from the family as they would not be allowed to go to school.

• Most girls remained seated until the school was closed to minimize the chances of others knowing about their menstruation. Some girls associated only with their close friends; others avoided interaction with younger girls who did not know about menstruation. At home, due to feeling of shame, some adolescent girls self-isolated themselves, staying in their private rooms, away from other family members including brothers and father.

5.4 Management of Materials

• Some of the commonly used materials by respondents to manage menstruation included sanitary pads and menstrual cloths. A girl’s education, socioeconomic status and access to local markets influenced the type of materials they used during menstruation. While most of the respondents preferred use of sanitary pads, most of the girls in rural areas used menstrual cloth during menstruation. Ease of access, low price and reusability was reported as the main factors for using cloths.

• While most of the mothers indicated using menstrual cloths, a change of practice was observed among some mothers in Balkh. Some mothers reported using pads since they are available in the market. On the other hand few mothers considered pads as harmful, causing infection during menstruation.

• Lack of menstrual management materials at school affected girls’ ability to deal with stressful situations associated with menstruation. While almost all schools had small shops within the school compound, very few sold sanitary pads. Adolescent girls often brought sanitary pads from home for use during menstruation. They also brought cleansing materials including soap and toilet paper during menstrual cycle.

• Outside the school setting, adolescent girls indicated several sources of getting sanitary pads including, pharmacies and general stores. Mothers also purchased sanitary pads for adolescent girls at local shops and pharmacies.
Annexure

Annex 1 Description of study provinces

Balkh province is situated in north of Afghanistan. The province is divided into 15 districts. The provincial capital is Mazar-i-Sharif which has a population of about 368,100 inhabitants. Balkh has a total population of 1,245,100. An estimated 60% of the population in Balkh lives in rural districts, while 34% live in urban areas. Around 51% of the total population is male and 49% is female. On average, only 28% of the households in Balkh use safe drinking water. The proportion is higher (67%) in urban areas compared to rural areas (12%). On average, 7.2% of households have access to safe toilets facilities, with great disparity between urban (15%) and rural areas (10%).

Ghor province is lies 386Km from Herat city. The province is divided into 10 districts. The provincial capital is Chaghcheran which has a population of about 132,442 inhabitants. The province has 635,302 populations. Around 99% of the population of Ghor lives in rural districts while 1% lives in urban areas. Around 51% of the population is male and 49% is female. In Ghor province, only 8.8% of households use safe drinking water. Nearly three quarter ((72%) of households have direct access to main source of drinking water with in their community. However nearly one quarter (24%) of households have to travel for up to an hour to access drinking water. 3% of households have to travel up to 6 hours to access drinking water. On average only 1% of household have access to safe toilets facilities.

Herat province is located in the western part of the country. The province is divided into 16 districts the provincial capital is Herat center which has a population of about 397,456 inhabitants. Herat has a total population of 1,762,157. Around three quarters (77%) of the population of Herat lives in rural districts while just under a quarter (23%) lives in urban areas. Around 50% of the population is male and 50% is female. On average 28.2% of households in Herat use safe drinking water. The proportion is 36% in urban areas, while it is 30% in rural areas. More than four-fifths (85%) of households have direct access to main source of drinking water can take up 6 hours as the following table below shows. On average only 9.5% of households have access to safe toilet facilities, with great disparity between urban and rural areas. The proportion of households with sanitary toilets is 32% in urban areas while it is only 9% in rural areas.

Laghman has a total population of 410,300 people. There are 60,048 households in the province. Around 99% of the population of Laghman lives in rural districts while 1% live in urban areas. Around 51% of the population is male and 49% is female. In Laghman province, on average 34.2% or households use safe drinking water. An estimated 84% of households have direct access to their main source of drinking water within their community. However, one in six households(16%) has to travel for up to an hour to access drinking water. On average only 4% of households have access to safe toilet facilities.
Kabul is the capital city of Afghanistan. The city has an estimated 3.7 million population. Of which 17% live in rural areas, while 83% are urban dwellers. There are 16 districts in Kabul city. Overall literacy rate in Kabul is over 46%. The enrollment rate for children 6-12 is above 65%. An estimated 55.9% of Kabul resident have access to safe drinking water and more than 17% have access to sanitary toilets.

Kandahar province is located in the southern region. Kandahar has a total population of 990,100. Around 68% of the population of Kandahar lives in rural districts while 32% lives in urban areas. Around 51% of the population is male and 49% is female. On average only 32.3% of households use safe drinking water. More than four fifths (87%) of households have direct access to their main source of drinking water within their community, however one in ten (10%) households has to travel for up to an hour to access drinking water. On average only 9.4% of households have access to safe toilet facilities. The situation is better in urban area where 57% of households have safe toilets, but this is true for only 7% of rural households.
Annex 2 Inclusion and Exclusion Criteria for different respondent groups

Inclusion Criteria

1. Adolescent school girl
   a. Girls who are present on the day of study
   b. Girls who have attained menarche
   c. Adolescent girls attending Secondary and high school
   d. Girls aged 12-16 years

2. Out of school adolescent girls
   a. Girls who have attained Menarche
   b. Girls aged 12-16
   c. Do not attend school
   d. Live in surrounding community close to study school
   e. Are willing to participate in the study

3. School administrators
   a. From the study school
   b. From the study province

4. School teachers
   a. Teaches one of the science subjects
   b. Are female
   c. Teach at the study school
   d. Are willing to participate in the study

5. Health workers
   a. From the health facility surrounding the school in target schools
   b. Female health workers
   c. Willingness to participate in the study

6. Director of education
   a. From the target provinces
   b. Willingness to participate in the study

7. Mothers
   a. Women who have daughters that meet the age of target groups (adolescent girls)
   b. Live in the community close to the study school
   c. Are willing to participate in the study

Exclusion Criteria

1. Adolescent girls
   a. Girls below age 11 and above 16 years
   b. Girls who have not attained Menarche
   c. Girls who are not willing to participate in the study

2. Out of school adolescent girls
   a. Girls who have not reached menarche
   b. Girls below age 11 and above age 16
   c. Live in communities far from the study school
   d. Are not willing to participate in the study
3. School administrators
   a. School administrators from schools not included in the study
   b. School administrators from other provinces
   c. School administrators not willing to participate in the study

4. School teachers
   a. Teachers from schools other than the study schools
   b. Are not willing to participate in the study

5. Health workers
   a. Health workers working in health facilities distant to the school
   b. Male health workers
   c. Are not willing to participate in the study

6. Directors of Education
   a. Directors of Education from other provinces

7. Mothers
   a. Women who have daughters that does not meet the age of primary target group (adolescent girls)
   b. Women living in communities far from study schools
   c. Women who are not willing to participate in the study
Annex 3, Research Study tools  
IDI Guide Adolescent Girls

**Objectives**
- Determine knowledge and perception of menstruation among adolescent school girls
- Collect information regarding behavior and practice of girls regarding menstruation management in different sittings (Inquire about girls experience at different settings including schools and home while menstruating)
- Identify challenges girls face when managing their period
- Identify barriers in accessing information and WASH facilities at different settings i.e. school and at home

I. **Part One: Socio-demographic questions**

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<tbody>
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<td>1.</td>
<td>Code of interviewee</td>
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<tr>
<td>2.</td>
<td>Age</td>
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<td>3.</td>
<td>Age at menarche</td>
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<td>Grade</td>
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<td>5.</td>
<td>Marital Status</td>
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<td>6.</td>
<td>Father occupation</td>
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<td>Mother occupation</td>
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<td>8.</td>
<td>Education level of father</td>
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<td>Education level of mother</td>
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<td>10.</td>
<td>Number of family members</td>
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<td>11.</td>
<td>Income level of father</td>
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<td>12.</td>
<td>Position in the family among siblings</td>
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<td>Type of house</td>
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<td>14.</td>
<td>Number of rooms</td>
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<td>15.</td>
<td>Number of latrines</td>
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<td>16.</td>
<td>Presence of TV at home</td>
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<td>17.</td>
<td>Presence of Radio</td>
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<tr>
<td>18.</td>
<td>Access to the internet at home</td>
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- Mud made
- Concrete
- Shared
- Separate latrines
- Other
<table>
<thead>
<tr>
<th>I. Introductory questions</th>
<th>Main questions</th>
<th>Follow up</th>
</tr>
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<tbody>
<tr>
<td><strong>Opening questions</strong></td>
<td>1. Tell me about your school, how do you like your school?</td>
<td>• What do you like most about your school?</td>
</tr>
</tbody>
</table>
|                           | 2. Tell me about your classroom, how do you like your classroom? | • What do you like most about your classroom?  
  • Do you have friends  
    i. How many?  
    ii. How many close friends? |
|                           | 3. Tell me about the subjects you study at school? | • What is your favorite subject/s? please specify  
  • Why do you like this subject/s? |
| II. Knowledge of Menstruation: Now we would like to speak about menstruation | 4. Tell me about health topics that you study at school? | • Do you study about hygiene? |
|                           | 5. Did you study about menstruation | • What did you learn about menstruation?  
  • What term/s did the teacher use to define menstruation?  
  • What terms does your classmates use to define menstruation? |
|                           | 6. What are the signs and symptoms that would determine that a girl or women is menstruating? | ❖ Physical  
  i. Pain  
  ii. Abdominal discomfort  
  ❖ Psychological  
  i. Stress  
  ii. Anger  
  ❖ Other, please specify |
|                           | 7. Where did you get information regarding menstruation for the first time? | ❖ School (What type of info)  
  ❖ Home (What type of info)  
  ❖ Mosque (What type of info)  
  ❖ Media (What type of info)  
  ❖ Social Network (What type of info) |
|                           | 8. Did you learn about menstruation before or after you got period for the first time? | • Who told you about it  
  • What did they tell you?  
  • Who provided information about menstruation to you?  
    i. Teacher  
    ii. Mother  
    iii. Religious scholar or Mullah Imam  
    iv. TV, Radio, newspaper  
    v. Friends |
|                           | 9. What did they tell you about menstruation? | • What was your reaction?  
  • How did you find the information about menstruation?  
    i. Was it enough? |
| Behavior and attitudes | 10. In your opinion, why girls menstruate? | ii. Was it useful?  
iii. Did you have more questions?  
• Why it happens?  
• When does it happen?  
• How does a girl’s life change when she starts to menstruate?  
• What would be the reaction of the family regarding girls who menstruate? Why this reaction? |
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<td>11. Does menstruation signify anything important in your family? Please tell us about this.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
• To be a young  
• Marriage |
| Change in live | 12. With starting menstruation what changes will happen in a girl live? |  
• More respecting  
• Involving in household decision making  
• Prayer  
• Fast |
| 13. What will be the reaction of family against girls when they start menstruation? |  
• Restriction to girls  
• Participating in wedding ceremonies  
• Going to Masjid  
• Going to other social events  
• Participating to household decision making  
• Prayer  
• Fast |
| III. Girls Experience during menstruation | 14. What was your experience the first time your menstruation started? |  
• How old were you then?  
• Where were you, when you first time had menstruation?  
• How did you feel when you were menstruating?  
• What did you do? Did you know what to do? If so, who told you want to do?  
• Did you talk to someone? Or did you keep it secret, why?  
• What did you tell them? Who did you not want to know that you started your period?  
• What was their reaction?  
• What did you use to manage?  
  i. Pad,  
  ii. Cloth  
  iii. Tissue  
• Where did you get the materials from?  
• Where did you go to change your napkins? |
| Source of information | 15. When was the recent time you had your period at school? |  
• Did you know about it?  
  i. Did you know when it was due?  
  ii. How do you track your periods? |

Formative Research on Menstrual Hygiene Management among Adolescent Girls in Afghanistan
<table>
<thead>
<tr>
<th><strong>Dispose of used materials</strong></th>
<th><strong>16. How did you dispose of used material?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Where were you?</strong>&lt;br&gt; 1. Did you come to school?&lt;br&gt; 2. Did you stay at home?</td>
<td><strong>Incinerate</strong>&lt;br&gt; <strong>Reuse</strong>&lt;br&gt; <strong>wash</strong>&lt;br&gt; <strong>other (specify please)</strong>&lt;br&gt; <strong>Where?</strong>&lt;br&gt; <strong>Any restrictions with how you dispose of the material?</strong></td>
</tr>
<tr>
<td><strong>Do you often use the same materials?</strong>&lt;br&gt; 1. Materials at home&lt;br&gt; 2. Materials at school&lt;br&gt; 3. Where did you get them from?&lt;br&gt; 4. Where did you go to clean yourself?</td>
<td>❖ Water&lt;br&gt; ❖ Soap</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Experiences in time of to be not prepared for period</strong></th>
<th><strong>17. Tell me about a time where you had your period but you were not prepared for it and didn’t have materials?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>How did you feel when you realized you got your period?</strong>&lt;br&gt; <strong>Where did you go?</strong>&lt;br&gt; <strong>What did you do?</strong>&lt;br&gt; <strong>Did you talk to someone about it?</strong>&lt;br&gt; <strong>What was their reaction?</strong>&lt;br&gt; <strong>Did they help you?</strong>&lt;br&gt; <strong>Were you able to get materials?</strong>&lt;br&gt; 1. From where and whom?&lt;br&gt; 2. What materials?</td>
<td>❖ How did you feel when you realized you got your period?&lt;br&gt; ❖ Where did you go?&lt;br&gt; ❖ What did you do?&lt;br&gt; ❖ Did you talk to someone about it?&lt;br&gt; ❖ What was their reaction?&lt;br&gt; ❖ Did they help you?&lt;br&gt; ❖ Were you able to get materials?&lt;br&gt; ❖ From where and whom?&lt;br&gt; ❖ What materials?&lt;br&gt; ❖ Did you stay at school that day? Or you had to leave for home?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Learning from</strong></th>
<th><strong>18. Now that you have had experience having period, what</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Are you able to keep track of your period?</strong>&lt;br&gt; <strong>Do you know when it is next due?</strong></td>
<td><strong>Are you able to keep track of your period?</strong>&lt;br&gt; <strong>Do you know when it is next due?</strong></td>
</tr>
<tr>
<td>previous experiences</td>
<td>have you learned from the experience?</td>
</tr>
<tr>
<td>----------------------</td>
<td>----------------------------------------</td>
</tr>
<tr>
<td></td>
<td>• How are you preparing for it?</td>
</tr>
<tr>
<td></td>
<td>i. When you are school</td>
</tr>
<tr>
<td></td>
<td>ii. When you are at home</td>
</tr>
<tr>
<td></td>
<td>iii. When you are at other places</td>
</tr>
<tr>
<td></td>
<td>• Do you carry materials with yourself?</td>
</tr>
<tr>
<td></td>
<td>o. Where do you keep them?</td>
</tr>
<tr>
<td></td>
<td>• How do you feel when you are in the class that day?</td>
</tr>
<tr>
<td></td>
<td>• How do you act when in class when you are on your period?</td>
</tr>
<tr>
<td>Sharing information</td>
<td>19. When you are menstruating, who do you talk to about it, if anyone?</td>
</tr>
<tr>
<td>Restrictions</td>
<td>20. Do you observe or experience any restriction when you are menstruating?</td>
</tr>
<tr>
<td>Behavior and</td>
<td>21. When you are menstruating do you feel not to do certain activities while at school or at home?</td>
</tr>
<tr>
<td>restrictions at school</td>
<td></td>
</tr>
<tr>
<td>Peers and classmate feeling</td>
<td>22. How does your peers or classmates feel about you when you are menstruating?</td>
</tr>
<tr>
<td>Family treat</td>
<td>23. How does your family treat you when you are menstruating?</td>
</tr>
</tbody>
</table>

- Family, friends, teachers?
- Why these people?
- What do you talk about?
- If you don’t talk to anyone, why?
- Mobility outside home
  - Attending school
  - Attending ceremonies
- Eating if yes why?
- Praying if yes why?
- Cooking if yes why?
- Taking shower if yes why?
- Anything else? Please specify
- Participate in class activities
- Answer questions
- Write on the board that day
- Play games or socialize
- Sit near someone

- How do they know?
  - Behavior change
  - Type of clothing
  - Use of latrine
  - Smell/odor
  - Other, please specify
- How do they treat you?
  - Teachers
  - Classmates
  - Friends
  - Cleaners
  - Others

- How do they know you are menstruating?
  - Mother
  - Father
  - Brothers
  - Sisters
  - Friends
<table>
<thead>
<tr>
<th>Experience something different</th>
<th>24. Do you experience something different when you are menstruating?</th>
<th>Please explain</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Physically</td>
<td>- Pain (What did you do?)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Emotionally</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Shame</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- Isolation</td>
</tr>
<tr>
<td></td>
<td>• Why do feel this way?</td>
<td>• Psychologically</td>
</tr>
<tr>
<td></td>
<td>• Physically</td>
<td>• Stress</td>
</tr>
<tr>
<td></td>
<td>• Why do feel this way?</td>
<td></td>
</tr>
<tr>
<td>Advantages of menstruation</td>
<td>25. In your opinion, are there advantages to menstruation for girls?</td>
<td>• Rest from regular b. household work</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• School work</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Respect from others</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Other</td>
</tr>
<tr>
<td>Disadvantages of menstruation</td>
<td>26. In your opinion, are there disadvantages to menstruation for girls?</td>
<td>• Social isolation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Shame</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Discomfort</td>
</tr>
<tr>
<td></td>
<td>• Why do feel this way?</td>
<td>• Other, please specify</td>
</tr>
<tr>
<td>Helping others</td>
<td>27. If one of your friends doesn’t realize she is menstruating and has leaked and stained her clothing, what would you do? Please explain</td>
<td></td>
</tr>
<tr>
<td>Transfer of information to others</td>
<td>28. If you were to give advice to your friends who have not yet reached their menarche, what would you say</td>
<td>• What would you say to your siblings?</td>
</tr>
<tr>
<td>Sources of information</td>
<td>29. Who should give information to girls on menstruation and how?</td>
<td>• How they should give information?</td>
</tr>
<tr>
<td>Family support</td>
<td>30. How families can support their girls when they are menstruating?</td>
<td></td>
</tr>
<tr>
<td>Suggestions to school administration</td>
<td>31. In your opinion, what can your school administration do to improve situation for girls who are menstruating?</td>
<td>• What type of information package?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• What type of WASH Facilities for Menstruation management</td>
</tr>
<tr>
<td>Suggestions to Ministry of Education</td>
<td>32. What is your recommendation to the ministry of education?</td>
<td></td>
</tr>
</tbody>
</table>

At the end we are grateful from you to give us your precious time to interview with you. Really we learn a lot from you!
Before we leave here, are you have any ideas, suggestion to be added in our discussion? Are there any issues to be discusses on? Are there any issue that we talked about and you want to know more about it? Thanks for your participation!
FGD Guide

School Girls

Objectives
- Assess students’ knowledge and perception regarding Menstruation and menstrual hygiene management at school
- Assess common behavior and practice among girls during menstruation
- Find out changes in girls experience before and after they have had menstruation
- Identify barriers in accessing wash facilities at different settings including school and at home

1. Part One: Socio-demographic questions

1. Name
2. Age
3. Age at menarche
4. Grade
5. Marital Status
6. Father occupation
7. Mother occupation
8. Education level of father
9. Education level of mother
10. Number of family members
11. Income level of father
12. Position in the family among siblings
13. Type of house
   a. Mud made
   b. Concrete
14. Number of rooms
15. Number of latrines
   a. Shared
   b. Separate latrines
   c. Other
16. Type of latrines
   a. Traditional pit
   b. Flush toilet
17. Presence of TV at home
18. Presence of Radio
19. Access to the internet at home
II. Part Two: Knowledge and perception of school girls regarding menstruation

<table>
<thead>
<tr>
<th>objectives</th>
<th>Main questions</th>
<th>Follow up</th>
</tr>
</thead>
</table>
| Opening question | 1. What subjects do you study at school? | a. Your favorite subject, why? Please explain  
b. Your favorite topic, why? Please explain |
| | 2. Tell us about hygiene subjects that they are teaching to you in school? | ❖ Do you study about hygiene  
❖ Do you study about menstruation?  
i. What topics do you learn about menstruation?  
ii. Who teaches about menstruation?  
iii. How often?  
iv. Which terms use by your teachers to indicate menstruation?  
v. Which term use by your classmates to indicate menstruation? |
| Evaluation of knowledge | 3. In your opinion, why do girls menstruate? | • Why it happens?  
• When it happens  
• How long does it last?  
• What does it mean for a girl to menstruate? |
| Attitude and the way of thinking | 4. How do you know if a girl is menstruating? | • Clothing  
• Smell/odor  
• Stain  
• Use of latrine  
• Absent from classroom  
• Is her behavior different? How? |
| Source of information | 5. If girls have questions about menstruation, who do they ask? | • Mother  
• Sister  
• Relative (aunt- cousins, other)  
• Teacher  
• Friends  
• Other (please specify) |

IV. Part three: Activity 1, Before and After Menarche

The facilitator will post two flip charts on the wall, one for before and one for after. With the help of note taker, the facilitator will request girls to share insight about their experience before menarche. The note taker will write information shared by respondents. With completion of the before section of the exercise, the facilitator will ask respondents to share information about their experience after they had menarche. To guide the discussion, the facilitator will post the questions in a separate flipchart so she can use while guiding and facilitating the discussion.

<table>
<thead>
<tr>
<th>objectives</th>
<th>Main questions</th>
<th>Follow up</th>
</tr>
</thead>
</table>
| Evaluation of knowledge | 6. What was your understanding of menstruation before | ❖ You had any awareness  
i. Which information you have had before menses? |
<table>
<thead>
<tr>
<th>Source of knowledge</th>
<th>7. Where did you get that information from?</th>
</tr>
</thead>
<tbody>
<tr>
<td>i. Home</td>
<td>i. You don’t had any information?</td>
</tr>
<tr>
<td>ii. Mother</td>
<td></td>
</tr>
<tr>
<td>iii. Sister</td>
<td></td>
</tr>
<tr>
<td>iv. Ant</td>
<td></td>
</tr>
<tr>
<td>v. Brother in law</td>
<td></td>
</tr>
<tr>
<td>vi. Grant mother</td>
<td></td>
</tr>
<tr>
<td>vii. Friends</td>
<td></td>
</tr>
<tr>
<td>viii. School</td>
<td></td>
</tr>
<tr>
<td>ix. Teacher</td>
<td></td>
</tr>
<tr>
<td>x. Classmates</td>
<td></td>
</tr>
<tr>
<td>xi. Others</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Feel</th>
<th>8. How did you feel before having menarche?</th>
</tr>
</thead>
<tbody>
<tr>
<td>i. You feel you are still a child</td>
<td></td>
</tr>
<tr>
<td>ii. Irresponsibility others</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Experience before menarche</th>
<th>9. What was your experience before menarche?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did you have restrictions?</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Experience after menarche</th>
<th>10. How girls are treated before menarche in different settings?</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. At home</td>
<td>a. Be young</td>
</tr>
<tr>
<td>b. At school</td>
<td>Involving in household decision making</td>
</tr>
<tr>
<td>c. At the community</td>
<td>Involving in community decision making</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Experience after menarche</th>
<th>11. Has anything changed for you after you had your menstruation? Please specify</th>
</tr>
</thead>
<tbody>
<tr>
<td>i. Be young</td>
<td>i. Involving in household decision making</td>
</tr>
<tr>
<td></td>
<td>ii. Involving in community decision making</td>
</tr>
<tr>
<td></td>
<td>Others</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Feel</th>
<th>12. How do you feel after getting menarche?</th>
</tr>
</thead>
<tbody>
<tr>
<td>i. Excitement</td>
<td></td>
</tr>
<tr>
<td>ii. worry</td>
<td></td>
</tr>
<tr>
<td>iii. fear</td>
<td></td>
</tr>
<tr>
<td>iv. Happiness</td>
<td></td>
</tr>
<tr>
<td>v. sadness</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Attitude of family</th>
<th>13. How does your family feel about you after menarche?</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Attitude of different settings</th>
<th>14. How are you treated at different settings after menarche?</th>
</tr>
</thead>
<tbody>
<tr>
<td>i. Home</td>
<td>i. Home</td>
</tr>
<tr>
<td>ii. School</td>
<td>ii. School</td>
</tr>
<tr>
<td>iii. Community</td>
<td>iii. Community</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Barriers and challenges</th>
<th>15. Do you experience restrictions after you had your menarche?</th>
</tr>
</thead>
<tbody>
<tr>
<td>i. Home</td>
<td>i. Home</td>
</tr>
<tr>
<td>ii. School</td>
<td>ii. School</td>
</tr>
<tr>
<td>iii. Community</td>
<td>iii. Community</td>
</tr>
</tbody>
</table>

| 16. Please describe         | a. Barriers and challenges at home                           |

---

Formative Research on Menstrual Hygiene Management among Adolescent Girls in Afghanistan
| Advantages of menses | 17. Please describe some of the advantages of having menstruation | - Release from common household works
- Respect by some other people
- Others |

| Disadvantages of menses | 18. Please describe some disadvantages of having menstruation |

IV. Part four: Activity 2, Imagining the life of a typical girl

<table>
<thead>
<tr>
<th>objectives</th>
<th>Main questions</th>
<th>Follow up</th>
</tr>
</thead>
</table>
| Feel       | 19. In your opinion, how does Farima feel when she knows she has her period? | - Excited
- Nervous
- Worried
- Other, please specify |

| Practice    | 20. What is the first things Farima will do once she knows she has her period | - Where does she go?
- Who will she talk to? Why? |

<table>
<thead>
<tr>
<th>Accessibility to hygienic materials</th>
<th>21. What kind of materials supplies Farima will use?</th>
</tr>
</thead>
<tbody>
<tr>
<td>i. Pad</td>
<td>i. Pad</td>
</tr>
<tr>
<td>ii. Cloth</td>
<td>ii. Cloth</td>
</tr>
<tr>
<td>iii. Other</td>
<td>iii. Other</td>
</tr>
<tr>
<td>- Why she will use these materials and not other materials</td>
<td></td>
</tr>
<tr>
<td>- Does she like to use these materials? Are they comfortable/preferred</td>
<td></td>
</tr>
<tr>
<td>- What does Farima do with the materials after they are used?</td>
<td></td>
</tr>
<tr>
<td>- Are the materials the same girls will use at home? At school? Why or why not?</td>
<td></td>
</tr>
<tr>
<td>- Where will Farima get these materials from?</td>
<td></td>
</tr>
<tr>
<td>- Will she bring it from home?</td>
<td></td>
</tr>
<tr>
<td>- Will she get it from a friend?</td>
<td></td>
</tr>
<tr>
<td>- Will she buy it from the school shop? If available</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Participation in class activities</th>
<th>22. Let’s talk about Farima’s participation in class or other school</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Will she have distractions</td>
<td></td>
</tr>
<tr>
<td>- Will she be focused at her class/school work</td>
<td></td>
</tr>
</tbody>
</table>
| Lesson learned | 23. How has Farima learned to manage her period? | From school  
Friend  
Family  
Education |
|---|---|---|
| Changes after menses | 24. What might make Farima’s classmates suspect that she has her period? | Behavior change in class  
Use of latrine  
Different clothing |
| Attitudes of others during menses | 25. How might people behavior towards Farima change when they know she has her period? | Do they tease her?  
Avoid her  
Exclude her  
Friends  
Teachers  
Family |
| Sharing of information with others | 26. Which people at school Farima will feel comfortable talking to while having her period? Please specify | Why these people?  
How different they are from others?  
Why she will not feel comfortable talking to people?  
Who she would not want to know? Why |
| Attitude of others | 27. How Farima will be treated? | Before  
i. At home  
ii. At school  
iii. At the community  
After  
i. At home  
ii. At school  
iii. At the community |
| Experience of restrictions | 28. Tell me about restrictions Farima will be faced when you have menstruation? | Restriction on movement outside home  
Restriction on cooking  
Restriction on bathing and taking shower  
Restriction on praying  
Restriction in talking to others including siblings  
Social isolation  
Others, please specify |
### Barriers and challenges

29. Please describe some of the barriers and challenges that Farima face during menstruation?

- **Barriers and challenges at home**
  - **Awareness**
  - **Infrastructure**
- **Experience**
  - Exclusion
  - Avoidance
  - Shame
  - Restrictions
  - Physical pain
- **Barriers and challenges at school**
  - **knowledge**
  - **lack of knowledge**
  - **infrastructure**
- **experience**
  - Exclusion
  - Avoidance
  - Shame
  - Restrictions
  - Physical pain

### Restrictions

30. What other restrictions and challenges will face Farima? Please specify?

### Challenges

31. The challenges you are mentioned above, which one is the main challenge in your school?

### V. Part Five: Latrine related Questions

<table>
<thead>
<tr>
<th>objectives</th>
<th>Main questions</th>
<th>Follow up</th>
</tr>
</thead>
</table>
| Information about toilets | 32. What is your general impression of school latrines/facilities? | - Cleanliness?  
- Smell?  
- Privacy?  
- Safety?  
- What type of latrines are there at your school?  
- Traditional/pit |
| Information about hand washing facilities | 33. What is your general impression of school hand washing facilities? | i. Number? ii. Cleanliness? iii. Functionality? • Availability of soup/hand washing liquid • Frequency of supplying i. Who is supplying ii. Who pays for it • Do students contribute in buying these supplies? • Are there separate hand washing facilities for girls and boys? • How do girls feel about using school hand washing facility? |
| School policy regarding latrine use | 34. Please describe school policy regarding latrine use? | • During breaks? • Any other time? • Must girls get permission? From whom? |
| School policies regarding latrine maintenance | 35. Please describe school policy regarding latrine maintenance? | • Who does it? • How often? • Who pays for it? |
| Accessibilities to toilets | 36. Do all students use the same latrines used by teaching staff? | • Are there separate latrines for students? |
|  | 37. Where are the latrines located in your school? | • Distance from the classroom |
|  | 38. Do students use other | i. Where? |
places besides latrines?  
ii. Why?

<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>39. When do students normally use latrines?</td>
<td>During breaks</td>
</tr>
<tr>
<td>b. During the classroom sessions</td>
<td></td>
</tr>
<tr>
<td>40. Are school latrines locked?</td>
<td>a. When they are locked?</td>
</tr>
<tr>
<td>b. Who locks them?</td>
<td>c. When are they unlocked?</td>
</tr>
<tr>
<td>c. Who unlocks them?</td>
<td></td>
</tr>
</tbody>
</table>

**Toilet hygiene**

<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>41. Who cleans the school latrines?</td>
<td>a. When do they normally clean school latrines?</td>
</tr>
<tr>
<td>b. How often do they clean the school latrines?</td>
<td>c. Do you find hygiene supplies i.e. soap, water and other Materials for personal hygiene?</td>
</tr>
</tbody>
</table>

**Dispose- off personal supplies**

<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>42. How do girls dispose of used personal supplies at school?</td>
<td>a. Where do girls dispose of them? How?</td>
</tr>
<tr>
<td>d. Wash</td>
<td>e. clean</td>
</tr>
<tr>
<td>43. Where girls normally dispose-off their personal supplies?</td>
<td>a. Where?</td>
</tr>
<tr>
<td>b. How?</td>
<td></td>
</tr>
</tbody>
</table>

**VI. Part sex: Scenario One, Describe desired latrine at school**

In order to ensure continuity of the discussion during the FGD, we propose that the note taker will summarize the findings from the first section regarding current situation of latrines. We will post this information on a flip chart and put it on a wall so students can read from the chart. The facilitator will use the findings to guide the discussion regarding the ideal toilet latrine. We propose this instead of disrupting the discussion and having the students work on the drawing of the ideal latrine, which will be time consuming, and most importantly interrupt the discussion which will affect continuity and focus in the FGD.

**Main questions**

<table>
<thead>
<tr>
<th>Suggestions for improvement</th>
<th>Follow up</th>
</tr>
</thead>
<tbody>
<tr>
<td>44. What type of supplies and materials do your school latrines need in order to improve?</td>
<td></td>
</tr>
<tr>
<td>45. What type of supplies and materials do your school hand washing facilities need in order to improve?</td>
<td></td>
</tr>
<tr>
<td>46. What could be done to improve water supply in your school?</td>
<td></td>
</tr>
<tr>
<td>47. Which of these materials are the most important ones for each of them (school latrines, hand washing facilities and water supply)?</td>
<td></td>
</tr>
</tbody>
</table>

**VII. Part seven: Closing Questions**
<table>
<thead>
<tr>
<th>Objective</th>
<th>Question</th>
<th>Probe/ Follow-Up</th>
</tr>
</thead>
<tbody>
<tr>
<td>The ways of solving problems</td>
<td>48. What could be done to address these challenges</td>
<td></td>
</tr>
<tr>
<td></td>
<td>49. What could the school administration do to improve the situation for Farima</td>
<td></td>
</tr>
<tr>
<td></td>
<td>50. What could her parents do to improve the situation for Farima and other girls</td>
<td></td>
</tr>
</tbody>
</table>

At the end we are grateful from you to give us your precious time to interview with you. Really we learn a lot from you! Before we leave here, are you have any ideas, suggestion to be added in our discussion? Are there any issues to be discuses on? Are there any issue that we talked about and you want to know more about it? Thanks for your participation?
### FGD Guide Girls-Out of school

**Objectives**
1. Assess knowledge and perception of out of school girls regarding menstruation and menstrual hygiene management at the community
2. Assess common behavior and practice among girls during menstruation
3. Find out changes in girls experience before and after they have had menstruation
4. Identify barriers in accessing wash facilities at home and in the community

---

<table>
<thead>
<tr>
<th>I. Part One: Socio-demographic questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Identity code of interviewee</td>
</tr>
<tr>
<td>2. Age</td>
</tr>
<tr>
<td>3. Age at menarche</td>
</tr>
<tr>
<td>4. Education level</td>
</tr>
<tr>
<td>5. Marital Status</td>
</tr>
<tr>
<td>6. Father occupation</td>
</tr>
<tr>
<td>7. Mother occupation</td>
</tr>
<tr>
<td>8. Education level of father</td>
</tr>
<tr>
<td>9. Education level of mother</td>
</tr>
<tr>
<td>10. Number of family members</td>
</tr>
<tr>
<td>11. Income level of father</td>
</tr>
<tr>
<td>12. Position in the family among siblings</td>
</tr>
<tr>
<td>13. Type of house</td>
</tr>
<tr>
<td>c. Mud made</td>
</tr>
<tr>
<td>d. Concrete</td>
</tr>
<tr>
<td>14. Number of rooms</td>
</tr>
<tr>
<td>15. Number of latrines</td>
</tr>
<tr>
<td>d. Shared</td>
</tr>
<tr>
<td>e. Separate latrines</td>
</tr>
<tr>
<td>f. other</td>
</tr>
<tr>
<td>16. type of latrines</td>
</tr>
<tr>
<td>c. traditional pit</td>
</tr>
<tr>
<td>d. flush toilet</td>
</tr>
<tr>
<td>17. Presence of TV at home</td>
</tr>
<tr>
<td>18. Presence of Radio</td>
</tr>
<tr>
<td>19. Access to the internet at home</td>
</tr>
</tbody>
</table>

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| 20. Part Two: Knowledge and perception of school girls regarding menstruation |
|-----------------------------|-----------------|----------------|
| objectives                  | **Main questions** | **Follow up** |
| Opening question            | 1. Tell us about your daily life at home? | How do you like being at home? |
|                             | i. Boring       | i. Boring |
|                             | ii. Busy        | ii. Busy  |
|                             | iii. Doing nothing | iii. Doing nothing |
2. What kind of activities do you do normally at home?

- Help with house chores
- Take care of younger sibling
- Work on the field
- Fetch water
- Collecting animals
- Other, specify please.

3. Do you going to school?

- Yes
- No, why?
  - i. Are security is not good?
  - ii. School is far from your house?
  - iii. Are any prohibition from your family?
  - iv. Are your self do not want to go to school?
  - v. Economic problems?
  - vi. An availability of wash facilities in school?

4. Do you participate in the community gathering?

- Wedding
- Funeral
- Engagement ceremonies
- Eid festival
- New Year celebration
- Other, please specify.

Evaluation of knowledge 5. In your opinion, why do girls menstruate?

- Why it happens?
- When it happens?
- How long does it last?
- What does it mean for a girl to menstruate?

Attitude and way of thinking 6. How do you know if a girl is menstruating?

- Clothing
- Smell/odor
- Stain
- Use of latrine
- Absent from classroom
- Is her behavior different? How?
III. Part Three: Activity 1, Before and After Menstruation

The facilitator will post two flip charts on the wall, one for before and one for after. With the help of note taker, the facilitator will request girls to share insight about their experience before menarche. The note taker will write information shared by respondents. With completion of the before section of the exercise, the facilitator will ask respondents to share information about their experience after they had menarche. To guide the discussion, the facilitator will post the questions in a separate flip chart so she can use while guiding and facilitating the discussion.

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Main Questions</th>
<th>Follow-up</th>
</tr>
</thead>
</table>
| Evaluation of knowledge | 8. What was your understanding of menstruation before getting menarche? | • You are understand?  
  i. Please give information about?  
  • Do not had any information? |
| Source of information | 9. Where did you get that information from? | • Mother  
  • Sister  
  • Ant  
  • Sister in law  
  • Grandmother  
  • Friend  
  • School  
  • Teacher  
  • Classmates  
  • Others |
| Attitude | 10. How did you feel before having menarche? | • You are feel, you may still a child?  
  • Sense of Irresponsibility  
  • Others |
| Experience before menarche | 11. What was your experience before menarche? | Did you have restrictions? |
| Attitude of friends before menarche | 12. How girls are treated before menarche in different settings? | i. At home  
  ii. At the community  
  iii. Masjid |
| Experience of change after menarche | 13. Has anything changed for you after you had your menstruation? Please specify | • Being young  
  • Involving in household decision making  
  • Involving in community decision making  
  • Others |
<p>| Attitude of | 14. How are you treated at | i. Home |</p>
<table>
<thead>
<tr>
<th>friends</th>
<th>different settings after menarche?</th>
<th>ii. Community</th>
</tr>
</thead>
</table>

**Experience after menarche**

15. How do you feel after getting menarche?  
- Excited  
- Nervous  
- Fear  
- Happiness  
- Sadness

<table>
<thead>
<tr>
<th>Attitude of family after menarche</th>
<th>16. How does your family feel about you after menarche?</th>
</tr>
</thead>
<tbody>
<tr>
<td>i. At home</td>
<td>i. At home</td>
</tr>
<tr>
<td>ii. At community</td>
<td>ii. At community</td>
</tr>
</tbody>
</table>

**Experience of restrictions**

17. Do you experience restrictions after you had your menarche?  
- i. At home  
- ii. At community

<table>
<thead>
<tr>
<th>Barriers and challenges</th>
<th>18. Please describe some of the barriers and challenges that you have faced after you got your menstruation</th>
</tr>
</thead>
<tbody>
<tr>
<td>i. Barriers and challenges at home</td>
<td>i. Barriers and challenges at the community</td>
</tr>
<tr>
<td>ii. Barriers and challenges at the community</td>
<td></td>
</tr>
</tbody>
</table>

**Advantages of menses**

19. Please describe some of the advantages of having menstruation  
- Release from common household works  
- Respect by some other people  
- Others

<table>
<thead>
<tr>
<th>Disadvantage of menses</th>
<th>20. Please describe some disadvantages of having menstruation</th>
</tr>
</thead>
</table>

**Attitude of girls during menses**

21. What kind of materials supplies girls will use during their menstruation in your community?  
- i. Pad  
- ii. Cloth  
- iii. Other

22. Why they will use these materials and no other materials  
- a. Do they like to use these materials?  
- b. Are they comfortable/preferred

23. Where will girls get these materials from?  
- Will girls make it at home?  
- Will girls get if from a friend?  
- Will girls buy it from the community shop? If available

24. What do girls do with the materials after they are used?

**Attitude**

25. How would you know if a girl in the community has her period?  
- Behavior change at home  
- Behavior change at community gatherings  
- Different clothing

**Attitude of others**

26. How might people behavior change towards girls when they know they have their period?  
- Do they tease them?  
- Avoid them  
- Exclude them  
- Friends  
- Family

27. Which people at home girls will feel comfortable talking to while having their  
- Mother  
- Sister  
- Other family member (grandmother,
 period? Please specify sister-in-law, aunt)

- Friends
- Why these people?
- How different they are from others?
  i. Why they will not feel comfortable talking to people?
  ii. Who they would not want to know? Why
- How girls will be treated?

before
  i. At home
  ii. At the community

After
  i. At home
  ii. At the community

**Restrictions**

28. Tell me about restrictions girls will face when they have menstruation?

| i. Restriction on movement outside home | 29. What type of latrine is available at your home? |
| ii. Restriction on cooking | • Tradition pit |
| iii. Restriction on bathing and taking shower | • Flash toilets |
| iv. Restriction on praying | • Shared latrines |
| v. Restriction in talking to others including siblings | • Other, please specify |
| vi. Social isolation | • Cleanliness |
| vii. Others, please specify | • Privacy |

### IV. Part Four: Latrine related Questions

**Scenario One, Describe desired latrine at school**

<table>
<thead>
<tr>
<th>objectives</th>
<th>Main question</th>
<th>Follow up</th>
</tr>
</thead>
<tbody>
<tr>
<td>Problems related to toilets</td>
<td>29. What type of latrine is available at your home?</td>
<td>• Tradition pit</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Flash toilets</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Shared latrines</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Other, please specify</td>
</tr>
<tr>
<td>Attitude</td>
<td>30. Your general impression of latrines at home</td>
<td>• Cleanliness</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Privacy</td>
</tr>
</tbody>
</table>

### V. Part Five – Key Question: Challenges and Suggestions

<table>
<thead>
<tr>
<th>Problems</th>
<th>31. Please summarizes some of the challenges girls face at different setting during her period</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>a. Home</td>
</tr>
<tr>
<td></td>
<td>i. Knowledge</td>
</tr>
<tr>
<td></td>
<td>a. Lack of adequate Information</td>
</tr>
<tr>
<td></td>
<td>i. Infrastructure</td>
</tr>
<tr>
<td></td>
<td>• unavailability of latrines</td>
</tr>
<tr>
<td></td>
<td>• Unavailability of materials</td>
</tr>
<tr>
<td></td>
<td>iii. Experience</td>
</tr>
<tr>
<td></td>
<td>• Exclusion</td>
</tr>
<tr>
<td></td>
<td>• Avoidance</td>
</tr>
<tr>
<td></td>
<td>• Shame</td>
</tr>
<tr>
<td></td>
<td>• Restrictions</td>
</tr>
<tr>
<td></td>
<td>• Physical pain</td>
</tr>
<tr>
<td></td>
<td>b. Community</td>
</tr>
<tr>
<td></td>
<td>i. Knowledge</td>
</tr>
</tbody>
</table>
At the end we are grateful from you to give us your precious time to interview with you. Really we learn a lot from you! Before we leave here, are you have any ideas, suggestion to be added in our discussion? Are there any issues to be discuss on? Are there any issue that we talked about and you want to know more about it? Thanks for your participation!

| Restrictions | 32. Please describe some of the barriers and challenges that girls face during menstruation? | a. Lack of adequate Information  
ii. Infrastructure  
• unavailability of latrines  
• Unavailability of materials  
iii. Experience  
• Exclusion  
• Avoidance  
• Shame  
• Restrictions  
• Physical pain  
b. Barriers and challenges at the community |
| Challenges and barriers | 33. What other challenges will girls will face during their period? | a. Barriers and challenges at home  
b. Barriers and challenges at the community |
| | 34. Of the challenges you noted above, what are the most difficult challenges in the community? |

VI. Part Sex-Final Questions

| 35. What could be done to address these challenges |
| 36. What could community members do to improve the situation for girls in the community |
| 37. What could the parents of girls do to improve the situation for their daughters at home |
FGD Guide Mothers of Girls

Objectives
1. Assess knowledge and behavior of mothers regarding menstruation
2. Identify support systems available at home for menstruating girls
3. Inquire about mother’s understanding of girls experience at schools

I. Part one: Socio-demographic questions

<table>
<thead>
<tr>
<th>Main questions</th>
<th>Follow up</th>
</tr>
</thead>
<tbody>
<tr>
<td>Code</td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td></td>
</tr>
<tr>
<td>Occupation</td>
<td></td>
</tr>
<tr>
<td>Husband occupation if alive</td>
<td></td>
</tr>
<tr>
<td>Education level</td>
<td></td>
</tr>
<tr>
<td>Education level of husband</td>
<td></td>
</tr>
<tr>
<td>Number of children</td>
<td>Number of boys Number of girls</td>
</tr>
<tr>
<td>Age of eldest child</td>
<td></td>
</tr>
<tr>
<td>Age of youngest child</td>
<td></td>
</tr>
<tr>
<td>Income level of husband</td>
<td></td>
</tr>
<tr>
<td>Type of house</td>
<td>Mud made Concrete</td>
</tr>
<tr>
<td>Number of rooms available in the house</td>
<td></td>
</tr>
<tr>
<td>Number of latrines</td>
<td>Shared latrines</td>
</tr>
<tr>
<td>Presence of TV at home</td>
<td></td>
</tr>
<tr>
<td>Presence of radio at home</td>
<td></td>
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<tr>
<td>Electricity at home</td>
<td></td>
</tr>
</tbody>
</table>

II. Part Two: Key Questions–1. Women’s knowledge, perceptions and behaviors

We would now like to talk specifically about menstruation. We are interested in learning about the experiences of women in this community around menstruation. These next questions will be about women in this community.

<table>
<thead>
<tr>
<th>Objective</th>
<th>Questions</th>
<th>Probes/follow-ups</th>
</tr>
</thead>
<tbody>
<tr>
<td>Awareness</td>
<td>1. What is your understanding of menstruation?</td>
<td>• Why do women menstruate? • When do women start menstruating? • How often does it happen? • How do women feel when they menstruate? • Why does blood leave the body?</td>
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</tr>
<tr>
<td></td>
<td>2. What terms, words or phrases do women in this community use for menstruation?</td>
<td>• How is menstruation related to fertility?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• What does the term mean? Good/bad connotation?</td>
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<tr>
<td></td>
<td></td>
<td>• Whosesit?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• How does a mother feel when her daughter begins to menstruate?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Attitude</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• How does a girl’s life change when she reaches menarche?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Does she gain respect? Why or why not?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Do they experience restrictions? Why?</td>
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<tr>
<td></td>
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<td>o Mobility outside home</td>
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<tr>
<td></td>
<td></td>
<td>o Attending school</td>
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<td></td>
<td>o Attending ceremonies</td>
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<td></td>
<td></td>
<td>o Eating</td>
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<td></td>
<td>o Praying</td>
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<td></td>
<td></td>
<td>o Cooking</td>
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<tr>
<td></td>
<td></td>
<td>o Taking shower</td>
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<tr>
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<td>o Does it change their relationship with others</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Father</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Mother</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Brothers</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Friends</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Does reaching menarche signify something specific? Please explain</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Practice</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Can you describe a typical day for a woman in your community when she is menstruating?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Are there activities she prefers to do? Why?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Are there activities she prefers not to do? Why?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• How is this day different from a typical day when she is not menstruating?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• How is her daily routine changed? Why?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Are there restrictions placed on women when they are menstruating?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>o Cooking</td>
</tr>
<tr>
<td></td>
<td></td>
<td>o Bathing</td>
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<td></td>
<td>o Praying</td>
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<tr>
<td>6. When a woman has her period, how does she take care of herself during those days?</td>
<td>• Changing, personal hygiene, materials used, washing, different tasks, etc.</td>
<td></td>
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</tbody>
</table>
| 7. What kind of materials do women use to manage their menstruation? | • Disposable pads? Cloths? Toilet paper? Other?  
|   | • Why these materials?  
|   | • Are they accessible? From where?  
|   | • What do they cost?  
|   | • Is there a preference for red materials? Why?  
|   | • Do girls use the same materials?  
|   | • Are different materials used in different places? For example, at home, when leaving the house, etc. |
| 8. What do women do with used materials? | • Thrown away? Where? i.e. bury, burn, dump  
|   | • Washed? Where? Dried? Where?  
|   | • Incinerated? Where?  
|   | • Put in latrine?  
|   | • Do they clean before use? Why? |
| First experience | 9. When women were younger, how did they find out about what materials to use and how to take care of themselves during menstruation? | • Who taught them how to use these materials?  
|   | • Grandmothers  
|   | • Elderly women in the community  
|   | • At school  
|   | • Health facility  
|   | • Other  
|   | • What is their impression about this experience |
### III. Part Three: Key Questions – 2. Mothers’ support to children and their understanding of the daughters’ experiences

**Transitional script to read by the facilitator to introduce the next set of questions:** *Since you are all mothers, we want to learn about how women in this community communicate with their daughters as well as their sons about menstruation.*

<table>
<thead>
<tr>
<th>Objective</th>
<th>Questions</th>
<th>Probes/follow-ups</th>
</tr>
</thead>
</table>
| Th the way of getting information | 10. How do young girls usually find out about menstruation? | • Who (if anyone) normally communicates with young girls about menstruation? Why?  
• Mother/aunt/family members/other women in the community? Teachers/schools?  
• Do girls find out before or after menarche? Why? |
| The way of sharing information | 11. What do mothers think is community-typically share information with their daughters about menstruation? | **Biological basis:**  
• Why does menstruation happen?  
• Physical changes? Emotional changes?  

**Information on management:**  
• How to track menstruation?  
• Materials? (cloths, sanitary pads, other)  
• Washing? Where? How?  

**Behavioral expectations:**  
• Expected changes in daily routine?  
• How should interact with others?  
• Any restrictions?  
• Any special beliefs?  
• Do mothers tell daughters about how their behavior changes? What behavior? Why? |
| Evaluation of girls knowledge | 12. What else do you think your daughters know about menstruation? | • How did they learn it? (home, school, friends)  
• Whodogirlstalk about it?  
• When do they learn about it? |
<p>| Att | 13. How do mothers | • Do mothers feel comfortable to talk |</p>
<table>
<thead>
<tr>
<th>Description</th>
<th>Question</th>
<th>Probes/follow-ups</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feel when talking about menstruation with their daughters?</td>
<td></td>
<td>• Are daughters comfortable talking with their mothers?</td>
</tr>
<tr>
<td>Attitudes of boys</td>
<td>14. Do mothers in this community typically talk about menstruation with their sons? What do they share?</td>
<td>• How is it different from the information they share with their daughters? • If they do not talk with their sons, why? • If mothers do not talk to sons about menstruation, who does? How do sons learn about menstruation?</td>
</tr>
<tr>
<td>Attitude of girls during menses</td>
<td>15. What materials do you use to manage menstruation?</td>
<td>• Are they different from what women use? Why? • Who teaches girls how to use the materials? Why? • Who provides her with these materials? Why? • Where do they come from? (made at home/shop) • Dogirls use different materials when they're at home versus school? • Do girls have a preferred material? — is this different from what they can afford or obtain?</td>
</tr>
<tr>
<td>Practice during menses</td>
<td>16. Who provides girls with materials?</td>
<td>• Self, mother, father, other family?</td>
</tr>
<tr>
<td>Attitude</td>
<td>17. Does a girl's typical daily change when she is menstruating? How?</td>
<td>• Daily routine? Going to school? • Social norms? Attend ceremony, funeral • Restrictions? Praying</td>
</tr>
</tbody>
</table>

**IV. Part Four: Key Questions—3. Mothers’ understanding of girls’ experiences in school**

<table>
<thead>
<tr>
<th>Objective</th>
<th>Questions</th>
<th>Probes/follow-ups</th>
</tr>
</thead>
<tbody>
<tr>
<td>Challenges</td>
<td>18. What specific challenges may girls face in school when they are menstruating?</td>
<td><strong>Absenteeism and concentration in school:</strong> • Pain? Embarrassment? Teasing? • Missed school? Concentration? <strong>Girls’ needs:</strong> • What specific needs do girls have?</td>
</tr>
</tbody>
</table>
### Support

<table>
<thead>
<tr>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>19. Do you think girls have unique challenges at school that boys don’t face?</td>
</tr>
<tr>
<td>20. Do mothers support their daughters during difficult days coping with menstruation?</td>
</tr>
<tr>
<td>21. Do mothers think it is acceptable for girls to miss school during menstruation?</td>
</tr>
<tr>
<td>22. Do girls manage menstruation differently at school than they do at home?</td>
</tr>
</tbody>
</table>

### Support from Others

- Are girls’ needs met in school? Explain.
- Are girls able to talk to teachers about challenges?
- Do they talk to mothers/parents about this?
- Can you recall a conversation about this?

### Practice

<table>
<thead>
<tr>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>21. Do mothers think it is acceptable for girls to miss school during menstruation?</td>
</tr>
<tr>
<td>22. Do girls manage menstruation differently at school than they do at home?</td>
</tr>
</tbody>
</table>

### Awareness

<table>
<thead>
<tr>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>23. Do girls get information about menstruation at school? Please explain.</td>
</tr>
</tbody>
</table>

### Attitude

<table>
<thead>
<tr>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>24. How do you think girls feel when they have their period at school?</td>
</tr>
</tbody>
</table>

### V. Part Five: Key Questions – 4. Program recommendations

Transitional script to read by the facilitator to introduce the next set of questions:
We are working with UNICEF to improve programs related to menstruation for girls in schools and would like to get your opinion and input on the key components of those programs.

<table>
<thead>
<tr>
<th>Objective</th>
<th>Questions</th>
<th>Probes/follow-ups</th>
</tr>
</thead>
</table>
| Suggestions for improvement of the situation | 25. Imagine you have been asked to advise the Department of Education on how to improve programs to support girls in schools who are menstruating. | • What kind of resources should they provide?  
• Infrastructure for latrines? Washrooms? Water?  
• Management materials? Pain medication?  
• Education? Guidance?  
• Whould pay for them?  
• Whould provide the support? Teachers, parents, school counsellors, health workers? |
| | 26. How should teachers be involved in supporting/educating STUDENTS about menstruation? | • Trainings?  
• School curriculum?  
• Providing support?  
• Male or female teachers? |
| | 27. How should parents be involved with school programs? | • Parent-teacher associations?  
• Do parents want to learn? |
| | 28. How should parents be involved with their daughters’ needs at home? | • Information?  
• Provision of materials? |
| | 29. Who else should be involved in school programs? | • Health workers? Specific organizations?  
• How?  
• Why? |
| | 30. Are there certain aspects of your traditions that you believe should be incorporated into education surrounding menstruation? | • What specific traditions or beliefs? |

Closing Questions

Transitionalscripttobreadbythefacilitortointroducethenext set of questions:

We have talked about many different aspects of menstruation today and we are coming to the final questions.
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>31. Do you have anything else you would like to add to the discussion that we have not yet covered?</td>
<td></td>
</tr>
<tr>
<td>32. Do you have any questions for us? We may not be able to answer them all, but we can do our best.</td>
<td></td>
</tr>
</tbody>
</table>

To end our discussion, I want to thank all of you for your time and speaking with me today. We really learned a lot from you! Before we leave for today, does anyone have an opinion, ideas, or thoughts they would like to add or ask? Is there something you would like to talk about? Is there something we talked about today that you would like to know more about? Thank you for participating.
### Key Informant Interview Guide Director of Education

#### Objectives
- Assess knowledge and perception of MOE officials regarding school environment for MHM activities
- Assess policy environment regarding implementation of menstrual hygiene management topics at schools
- Identify policy gaps related to menstrual hygiene management in the country

#### I. Part One: Introductory questions

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Main questions</th>
<th>Follow up</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your name please</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Title</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Organization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Department</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How long have you been working here?</td>
<td>Number of male staff</td>
<td>Number of female staff</td>
</tr>
<tr>
<td>How many staff do you have at the Provincial Directorate of Education?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### II. Part Two: Introductory Questions

1. What is your general impression about adolescent girls’ schools in this province?
   - a. How many?
   - b. Accessibility
     - I. Easy accessible
     - II. Not accessible
   - c. Infrastructure
     - I. Building
     - II. Classrooms
     - III. Teaching materials
       - Books
     - iv. WASH facilities
       - Latrines
       - Hand washing facilities
     - v. Other, please specify
   - d. Attendance
     - I. high enrollment rate
     - II. low enrollment rate

2. Please state your understanding of school curriculum at secondary girls schools
   - a. Topics included in the school curriculum in secondary adolescent schools
   - b. Health topics included in the school curriculum
     - I. Health and hygiene related topics
     - II. Menstruation related issues covered in these topics
     - III. Others, please specify
       - From which grade menstruation is
| 3. Who teaches these menstruation related topics? | a) female teachers  
b) Male teachers  
c) Both male and female teachers |
| 4. Who is the target audience for these topics? | a) Girls  
b) Boys  
c) Other, please specify  
d) Are teachers trained to teach this topic? How? Do they feel comfortable teaching this topic? |

### III. Part Three: Policy environment

| 1. What is the MOE policy regarding teaching of menstruation related topics to adolescent girls | a. What is their reaction of teaching staff regarding inclusion of menstruation related topics in school curricula  
I. They feel uncomfortable teaching these topics  
II. They feel comfortable teaching these topics  
III. They do not show any reaction  
IV. Other, please specify  
b. What is the perception of families regarding teaching of menstruation related topics to adolescent girls?  
I. They are not consulted  
II. They are supportive of the idea  
III. They do not support the idea and  
IV. Some families have stopped sending their daughters to schools |
| 2. How do you assess school environment for teaching of menstruation related topics? | a. Do schools have required facilities to support teaching of menstruation related topics  
- Teaching materials  
- Please specify  
- WASH facilities  
- Latrines  
- Hand washing |
### IV. Part Four: Challenges

1. What challenges the schools face in teaching of menstruation related topics to students?
   - a. Unavailability of infrastructure
     - Hand washing facilities
     - Latrines
     - Others
   - b. Unavailability of teaching materials
     - Books
     - Teaching aids
   - c. Teaching staff
     - Teachers
     - Educators
     - Counsellors
   - d. Other, please specify

### V. Part Five: Recommendations

1. What could be done to improve school environment for teaching of menstruation related topics to adolescent girls?
   - a. What could school administration do to support presence of a conducive environment for
<table>
<thead>
<tr>
<th>girls</th>
<th>teaching of menstruation related topics</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>b) What could DOE do to support this?</td>
</tr>
<tr>
<td></td>
<td>c) What could MOE do to support this?</td>
</tr>
</tbody>
</table>

| 2. What can schools do to make it easier for girls to be in school during menstruation | a) Education  
|                                                                                     | b) Facilities  
|                                                                                     | c) Support  
|                                                                                     | d) Resources |

| 3. As an MOE officials, what is your recommendation to MOE to improve conditions for adolescent girls particularly in relation to their menstrual hygiene management in school? | a. Targeted health promotion activities  
|                                                                                     | I. Including more materials on health and hygiene in school curriculum  
|                                                                                     | II. Include information on personal hygiene management  
|                                                                                     | III. Include information on menstruation and menstruation hygiene management  
|                                                                                     | IV. Advocate for recruitment of health counselor at schools  
|                                                                                     | V. Information on enhancement of school sanitary facilities  
|                                                                                     | • Latrines  
|                                                                                     | • Hand washing facilities  
|                                                                                     | • Disposal sites at schools |

| 4. Any final remarks |
Key Informant Interview Guide School Administrator

**Objectives**
1. Assess availability and quality of sanitary facilities at schools including latrines
2. Determine if health and hygiene related topics are taught at school including menstruation hygiene management among adolescent girls
3. Collect information regarding presence of support systems at school for menstruating girls

I. First part: I. Opening Questions

**PART 1 – SCHOOL INFORMATION**

A01. Interviewer name:

A02. Date (dd/mm/yy): / /

A03. Start time : am/pm
A04. End time : am/pm

A05. Name of Administrator interviewed:

A06. Designation/Title:

A08. Number of years teacher appointed at this school:

A07. Gender: and AGE
   1: Male  2: Female

**A. Basic school information**

A1. School name:

A2. School identification code:

A3. School location:
   1: Rural  2: Peri-urban  3: Urban

A4. School area:
   1: Day  2: Night  3. Community based

A5. School level:
   1: Primary  2: Secondary  3: High
   4: Mixed  88: Other

A6. School type:

A7. Type of education

A8. No of students according to grade

<table>
<thead>
<tr>
<th>Grade</th>
<th>No of Girls</th>
<th>No of Boys</th>
<th>Handicap students</th>
</tr>
</thead>
<tbody>
<tr>
<td>First</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Second</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Third</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fourth</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fifth</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sixth</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seventh</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eighth</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ninth</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tenth</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eleventh</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please specify No of students in each grade. Each column is for the No of students Girls, Boys, and students that suffering from paralysis, handicap (physical handicap such as arms and legs handicap, blindness, etc.):
<table>
<thead>
<tr>
<th>A8.12</th>
<th>Twelfth</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>A8.13</td>
<td>Total</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A10 No of teachers. (_______________)
A10.1 No of male teachers (__________)
A10.2 No of female teachers (__________)

A10 Are your school has parent teacher association?
1 : Yes 2 : No

A11 Are your school has health shura?
1 : Yes 2 : No
If yes please specify it? _________________

A12 Are school has associations that lead by students?
1 : Yes 2 : No
If yes, please specify it? _________________

II. Part Two: Knowledge of sanitary facilities at school

The facilitator have to read the following text to interviewee:
in this part we would like to ask about school toilets.

<table>
<thead>
<tr>
<th>Questions</th>
<th>Probes</th>
<th>Objective</th>
</tr>
</thead>
</table>
ii. What type of latrines are there at your school?  
• Traditional/pit  
• Modern/flush latrines  
• Others  
iii. How many latrines are there?  
• Are there separate latrines for girls and boys?  
iv. How do girls feel about using school latrines?  
v. Availability of water in the school latrines  
vi. Source of water  
• Tab water  
• Hand pump  
• Shallow well  
• Tanker  
• Stream  
• Other, please specify | Information/awareness |
| 10. What is your general impression of school hand washing facilities? | i. Number?  
ii. Cleanliness?  
iii. Functionality?  
iv. Availability of soup/hand washing liquid  
• Frequency of supplying  
• Who is supplying  
• Who pays for it?  
  i. Do students contribute in buying these supplies?  
  ii. Are there separate hand | Awareness |
<table>
<thead>
<tr>
<th>Question</th>
<th>Sub-questions</th>
<th>Table Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>11. Please describe school policy regarding latrine use?</td>
<td>i. During breaks?</td>
<td>Practice</td>
</tr>
<tr>
<td></td>
<td>ii. Any other time?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>iii. Must girls get permission? From whom?</td>
<td></td>
</tr>
<tr>
<td>12. Please describe school policy regarding latrine maintenance?</td>
<td>• Are your school receive hygienic materials such as soap, toilet paper, water and other hygienic materials?</td>
<td>Accessibility to hygienic materials</td>
</tr>
<tr>
<td></td>
<td>i. Who does it?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ii. How often?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>iii. Who pays for it?</td>
<td></td>
</tr>
<tr>
<td>13. Do all students use the same latrines used by teaching staff?</td>
<td>i. Are there separate latrines for students?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ii. Please describe the difference between students and teachers toilets?</td>
<td></td>
</tr>
<tr>
<td>14. Where are the latrines located in your school?</td>
<td>i. Distance from the classroom</td>
<td>Toilet Location</td>
</tr>
<tr>
<td></td>
<td>ii. Are toilets within school yard?</td>
<td></td>
</tr>
<tr>
<td>15. Do students use other places besides latrines?</td>
<td>Where?</td>
<td>Experience</td>
</tr>
<tr>
<td></td>
<td>Why they use other places?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Why they don’t uses other places?</td>
<td></td>
</tr>
<tr>
<td>16. How do girls dispose of used personal supplies at school?</td>
<td>i. Where do girls dispose of them?</td>
<td>Practice</td>
</tr>
<tr>
<td></td>
<td>How?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ii. How do girls clean them? With what – soap?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>iii. Do girls need to dry materials?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Where?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>iv. Wash</td>
<td></td>
</tr>
<tr>
<td></td>
<td>v. clean</td>
<td></td>
</tr>
<tr>
<td>17. What hygienic materials like cotex, cotton, and toilet papers are available at school?</td>
<td>• Where they can find it? How do girls access them? Who do they ask?</td>
<td>Accessibility to hygienic materials</td>
</tr>
<tr>
<td></td>
<td>• Are these materials always available?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Do girls have to pay for them?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• How much do they cost?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Who pays for them?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Do girls need to ask for them?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Who do ask?</td>
<td></td>
</tr>
</tbody>
</table>
### III. Presence of health topics in the school curriculum

<table>
<thead>
<tr>
<th>18. What subjects are taught at school?</th>
<th>School Curriculum</th>
</tr>
</thead>
<tbody>
<tr>
<td>19. What health topics are covered in the school curriculum?</td>
<td>List of topics</td>
</tr>
<tr>
<td></td>
<td>Is hygiene taught at school?</td>
</tr>
<tr>
<td>20. Do adolescent girls received menstruation related education at school?</td>
<td>• Biological causes of menstruation</td>
</tr>
<tr>
<td></td>
<td>• What subject is menstruation taught in?</td>
</tr>
<tr>
<td></td>
<td>• Where do girls receive information regarding menstruation?</td>
</tr>
<tr>
<td></td>
<td>• Classroom</td>
</tr>
<tr>
<td></td>
<td>• Wash clubs</td>
</tr>
<tr>
<td></td>
<td>• Health clubs</td>
</tr>
<tr>
<td></td>
<td>• Who teaches these menstruation related topics to adolescent girls at the school?</td>
</tr>
<tr>
<td></td>
<td>• Teachers</td>
</tr>
<tr>
<td></td>
<td>• Nurses</td>
</tr>
<tr>
<td></td>
<td>• Community health workers</td>
</tr>
<tr>
<td></td>
<td>• Other, please specify</td>
</tr>
<tr>
<td></td>
<td>• At what grade students receive information about menstruation?</td>
</tr>
<tr>
<td></td>
<td>• At what age students receive information about menstruation at your school?</td>
</tr>
<tr>
<td></td>
<td>• When do girls learn?</td>
</tr>
<tr>
<td></td>
<td>• Do girls and boys learn together or separately?</td>
</tr>
<tr>
<td></td>
<td>• Anywhere else in the school community where menstruation is taught?</td>
</tr>
<tr>
<td></td>
<td>• School health clubs?</td>
</tr>
<tr>
<td></td>
<td>• After school activities?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>21. What specific information is taught</th>
<th>i. Why it happen?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>ii. When it happen?</td>
</tr>
<tr>
<td>Question</td>
<td>Probes</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------</td>
</tr>
<tr>
<td>22. Are teaching staff trained on menstrual health and hygiene topics?</td>
<td>i. What kind of training</td>
</tr>
<tr>
<td></td>
<td>ii. For both male and female?</td>
</tr>
<tr>
<td></td>
<td>iii. Are teachers interested for more trainings?</td>
</tr>
<tr>
<td>23. How teachers commonly feel teaching menstruation topics for adolescent girls?</td>
<td>i. Male teachers feeling</td>
</tr>
<tr>
<td></td>
<td>ii. Female teachers feeling</td>
</tr>
<tr>
<td></td>
<td>• Are teaching menses topics difficult?</td>
</tr>
<tr>
<td>24. Are teaching materials related menstrual hygiene available at schools?</td>
<td>• Are they expected to come to school? Why</td>
</tr>
<tr>
<td></td>
<td>ii. Are they expected not to come to school? Why</td>
</tr>
<tr>
<td></td>
<td>iii. Do girls abide by the school rules</td>
</tr>
<tr>
<td></td>
<td>iv. Any reaction from the parents of students</td>
</tr>
<tr>
<td>25. What is the school policy for girls who have menstruation?</td>
<td>• Who teases girls?</td>
</tr>
<tr>
<td></td>
<td>• Do you recall an instance of such kind?</td>
</tr>
<tr>
<td></td>
<td>• Why people tease girls</td>
</tr>
<tr>
<td></td>
<td>• Does the school have disciplinary policy against those who tease girls</td>
</tr>
<tr>
<td>26. In many places, girls are teased at school when they have menstruation, what is the practice here?</td>
<td>i. Frequency</td>
</tr>
<tr>
<td></td>
<td>ii. Certain girls only</td>
</tr>
<tr>
<td>27. In many schools students miss classes when they are menstruating, what is your experience in the classes you teach?</td>
<td>• Education?</td>
</tr>
<tr>
<td></td>
<td>• School curricula?</td>
</tr>
<tr>
<td></td>
<td>• Teachers support?</td>
</tr>
</tbody>
</table>

VI. Four part: Key Question– Programme suggestions
| in school during menstruation | • Presence of health worker at school?  
• Presence of child consultant at school? |

**Final Questions**

**The facilitator have to read the following to interviewee:**

We discuss comprehensively about menstruation, and now it is turn of final questions.

30. **Are you have any other issues, that still not covered and you would like to be added in discussion?**

31. **Are you have any question? May be we can’t answer all of your question, but we will try.**

At the end we are grateful from you to give us your precious time to interview with you. Really we learn a lot from you!

Before we leave here, are you have any ideas, suggestion to be added in our discussion? Are there any issues to be discusses on? Are there any issue that we talked about and you want to know more about it? Thanks for your participation!
Key Informant Interview Guide School Teacher

Objectives
- Assess knowledge and perception of school teachers regarding menstruation hygiene issues among adolescent girls in target school
- Assess presence of support systems that adolescent girls receive at school during menstruation

VI. Introductory questions

<table>
<thead>
<tr>
<th>Identity code</th>
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<tbody>
<tr>
<td>Title</td>
<td></td>
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<tr>
<td>Organization</td>
<td></td>
</tr>
<tr>
<td>Department</td>
<td></td>
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<tr>
<td>How long have you been teaching in this school?</td>
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<tr>
<td>What subject do you teach in the school?</td>
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</tbody>
</table>

VII. Knowledge of sanitary facilities at schools

<table>
<thead>
<tr>
<th>Objective</th>
<th>Question</th>
<th>Probe/Follow-Up</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health topics at school curricula</td>
<td>1. What health topics are covered in the school curriculum?</td>
<td>List of health topics taught at school?</td>
</tr>
<tr>
<td>Awareness</td>
<td>2. Do adolescent girls received menstruation related education at school?</td>
<td>Biological causes of menstruation</td>
</tr>
</tbody>
</table>

- What subject is menstruation taught in?
- Where do girls receive information regarding menstruation?
  - Classroom
  - Wash clubs
  - Health clubs
- Who teaches these menstruation related topics to adolescent girls at the school?
  - Teachers
  - Nurses
  - Community health workers
  - Other, please specify
- At what grade students receive information about menstruation?
- At what age students receive information about menstruation at your school?
- When do girls learn?
<p>| | | |</p>
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<tr>
<td>Do girls and boys learn together or separately?</td>
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<tr>
<td>Anywhere else in the school community where menstruation is taught?</td>
<td></td>
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<tr>
<td>School health clubs?</td>
<td></td>
<td></td>
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<tr>
<td>After school activities?</td>
<td></td>
<td></td>
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<tr>
<td>3. What specific information is taught about menstruation?</td>
<td></td>
<td></td>
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<tr>
<td>Why it is happening?</td>
<td></td>
<td></td>
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<tr>
<td>When is it happening?</td>
<td></td>
<td></td>
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<td>How often does it happen?</td>
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<td>How long does it last?</td>
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<tr>
<td>Education of girls on menstruation management</td>
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<tr>
<td>4. Do teachers teach girls on how to manage menstruation?</td>
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<tr>
<td>Which teachers specifically teach this?</td>
<td></td>
<td></td>
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<tr>
<td>What is taught?</td>
<td></td>
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<tr>
<td>How to clean?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>What to use? i.e. cloth, pads and napkins</td>
<td></td>
<td></td>
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<tr>
<td>What information is provided about reproductive health?</td>
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<tr>
<td>5. How often are these sessions organized at school?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Menstruation management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Who provides information regarding menstruation for adolescent girls at school?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Teachers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ii. Nurses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>iii. Community health workers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>iv. Other, please specify.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Awareness</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Are teaching staff and administration trained on menstrual health and hygiene topics?</td>
<td></td>
<td></td>
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<tr>
<td>i. What kind of training? From where?</td>
<td></td>
<td></td>
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<tr>
<td>ii. For both male and female teachers?</td>
<td></td>
<td></td>
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<tr>
<td>iii. Would teachers like more training?</td>
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</tr>
<tr>
<td>Attitude</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. How do most teachers feel about teaching menstruation to adolescent girls in this school?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Male teachers</td>
<td></td>
<td></td>
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<tr>
<td>ii. Female teachers</td>
<td></td>
<td></td>
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<tr>
<td>iii. Is a difficult topic to teach?</td>
<td></td>
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</tr>
<tr>
<td>9. What is the school policy for girls who have menstruation?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Are they expected to come to school? Why</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ii. Are they expected not to come to school? Why?</td>
<td></td>
<td></td>
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<tr>
<td>iii. Do girls abide by the school rules?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Support</td>
<td>10. Are teaching materials related menstrual hygiene available at schools?</td>
<td>Are teaching materials related to menstrual hygiene accessible to students?</td>
</tr>
</tbody>
</table>

VIII. Key question- Second Part: Information about toilets and wash facilities at school

The facilitator have to read the following text to interviewee:

in this part we would like to ask the following questions.

<table>
<thead>
<tr>
<th>Objective</th>
<th>Question</th>
<th>Probe/Follow-Up</th>
</tr>
</thead>
</table>
ii. What type of latrines are there at your school?  
   • Traditional/pit  
   • Modern/flush latrines  
   • Others  
iii. How many latrines are there?  
   • Are there separate latrines for girls and boys?  
iv. How do girls feel about using school latrines?  
v. Availability of water in the school latrines  
vi. Source of water  
   • Tab water  
   • Hand pump  
   • Shallow well  
   • Tanker  
   • Stream  
   • Other, please specify |
| 12. What is your general impression of school hand washing facilities? | i. Number? Cleanliness? Functionality?  
ii. Availability of soup/hand washing liquid  
   • Frequency of supplying  
   • Who is supplying  
   • Who pays for it  
iii. Do students contribute in buying these supplies?  
iv. Are there separate hand washing facilities for |
### Practice

13. Please describe school policy regarding latrine use?

- During breaks?
- Any other time?
- Must girls get permission? From whom?
- Are school latrines locked?
  - When they are locked?
  - Who locks them?
- When are they unlocked?
- Who unlocks them?

14. Please describe school policy regarding latrine maintenance?

- Who cleans the school latrines?
- When do they normally clean school latrines?
- How often do they clean the school latrines?
- Do you find hygiene supplies i.e. soap, water and other materials for personal hygiene?

15. Do all students use the same latrines used by teaching staff?

- Are there separate latrines for students?
- Please describe the differences between girls and teachers toilets?
| Awareness | 16. Where are the latrines located in your school? | • Distance from the classroom?  
• Are toilets in school yard? |
|-----------|-----------------------------------------------|--------------------------------------------------------------------------------|
| Experience| 17. Do students use other places besides latrines? | • Where?  
• Why they use other places?  
• If not use, why they not use other places? |
| Practice  | 18. How do girls in this school manage their menstruation? – ask question about how girls manage their period at school | • Bring supplies from home  
• Leave school/some classes  
• Use school latrine facilities  
• School provides sanitary pads to the girls during their menstruation  
• Do nothing |
| Awareness | 19. How do girls dispose of used personal supplies at school? | • Where do girls dispose of them? How?  
• How do girls clean them? With what – soap?  
• Do girls need to dry materials? Where?  
• Wash  
• Clean |
|-----------|-----------------------------------------------|--------------------------------------------------------------------------------|
|           | 20. What hygienic materials like cotex, cotton, and toilet papers are available at school? | • Where they can find it?  
• How do girls access them? Who do they ask?  
• Are these materials always available?  
• Do girls have to pay for them?  
• How much do they cost?  
• Who pays for them?  
• Do girls need to ask for them? Who do ask?  
• Are napkins or other materials available to girls at school in |
<table>
<thead>
<tr>
<th>Category</th>
<th>Question</th>
<th>Answers</th>
</tr>
</thead>
</table>
| Attitude          | 21. What do you do when you know a girl is menstruating in class?          | - Do you do anything differently that if she was not menstruating?  
- In class, have you ever had to handle a case where a girl soiled her uniform with menstrual blood? What did you do?  
- Do you feel comfortable supporting girls who are menstruating in class?  
  i. If yes, why?  
  ii. If no, why?  
  iii. If no, what do you require to feel more comfortable? |
| Support           | 22. In many places, girls are teased at school when they have menstruation, what is the practice here? | - Who teases girls? Why?  
- What do they say? Why?  
- Do you recall an instance where girls have been teased?  
- What was your reaction?  
- Did you talk to girls who have been teased?  
- How did they feel?  
- How did you feel?  
- Why people tease girls  
- Does the school have disciplinary policy against those who tease girls? Please explain |
| Experience        | 23. Can you tell of a behavior change among adolescent girls when they were menstruating? |  
  i. Participation in class activities  
  ii. Leaving school  
  iii. Missing school  
  iv. Distraction  
  v. Class behavior |
| Attitude /Support | 24. In many schools students miss classes when they are menstruating, what is your experience in the classes you i. Frequency  
ii. Certain girls only  
iii. Why do girls miss class? |
<table>
<thead>
<tr>
<th>Question</th>
<th>Probes</th>
</tr>
</thead>
<tbody>
<tr>
<td>iv. Can girls make up missed material? How?</td>
<td></td>
</tr>
</tbody>
</table>
| 25. Is there any platform where teachers discuss menstruation related issues girls face at school with parents of students? | i. Teacher-parent association  
ii. School-community association  
iii. Parent’s day  
- How often do you meet?  
- What topics are discussed?  
- What is the reaction of parents?  
- Has anything changed as a result of these meetings |

### IX. Key question - Part Four: Recommendations for improvement of programme

<table>
<thead>
<tr>
<th>Objective</th>
<th>Question</th>
<th>Probes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suggestions for improvement of the situation</td>
<td>26. What can schools do to make it easier for girls to be in school during menstruation</td>
<td></td>
</tr>
</tbody>
</table>
- Education  
- Facilities – water, sanitation and hand washing  
- Support - teachers, nurses etc.  
- Resources – materials |
| 27. What can Ministry of Education do to make it easier for girls to be in school during menstruation |  
- Education?  
- School curricula?  
- Teachers support?  
- Presence of health worker at school?  
- Presence of child consultant at school? |

### Final questions

The facilitator have to read the following to interviewee: we discuss comprehensively about menstruation, and now it is turn of final questions.

28. Are you have any other issues, that still not covered and you would like to be added in discussion?

29. Are you have any question? May be we can’t answer all of your question, but we will try.  
At the end we are grateful from you to give us your precious time to interview with you. Really we learn a lot from you! Before we leave here, are you have any ideas, suggestion to be added in our discussion? Are there any issues to be discuss on? Are there any issue that we talked about and you want to know more about it? Thanks for your participation?
Key Informant Interview Guide Health Worker

Objectives
- Acquire information regarding common health problems among adolescent girls in the target community surrounding schools
- Assess knowledge and perception of health workers regarding menstruation hygiene issues among adolescent girls in target communities
- Identify common menstrual hygiene management practices at the community level

I. First part: Introductory questions

<table>
<thead>
<tr>
<th>Code of interviewee</th>
<th>Education degree</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Clinic name and code</th>
<th>How long have you been working here?</th>
<th>Number of male staff</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Number of female staff</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Number of support staff</td>
</tr>
</tbody>
</table>

II. Second Part –Key Question: Knowledge of common health problems in the community

<table>
<thead>
<tr>
<th>Objective</th>
<th>Question</th>
<th>Probe/ Follow-Up</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health services</td>
<td>1. What type of services provided in this health facility?</td>
<td></td>
</tr>
<tr>
<td>Awareness</td>
<td>2. Do you provide health education at this facility?</td>
<td>b. What topics are covered during health education sessions at this health facility?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>c. Who organizes health education sessions?</td>
</tr>
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<td></td>
<td></td>
<td>d. How often are these sessions organized</td>
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<td></td>
<td>3. Who is the target audience for the health education sessions</td>
<td>• Does adolescent girls participate in health education sessions?</td>
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<td></td>
<td></td>
<td>i. Why?</td>
</tr>
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<td></td>
<td></td>
<td>ii. Or why not?</td>
</tr>
<tr>
<td>Health Problems</td>
<td>4. Please tell us about common health problems in this community</td>
<td>• What are the top health problems that cause the most morbidity and mortality among people in this community?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• In your opinion, where people go to seek medical care for these illnesses?</td>
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<td>5. What are some of the common problems among</td>
<td>• Where does the adolescent girls go to</td>
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<tr>
<td>Objective</td>
<td>Question</td>
<td>Probe/Follow -Up</td>
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<tr>
<td></td>
<td>adolescent girls in this community?</td>
<td>seek medical care for their illnesses?</td>
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<td></td>
<td></td>
<td>• Who accompanies them?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Generally, for what conditions do adolescent girls seek medical treatment?</td>
</tr>
<tr>
<td>Treatment of adolescent girls</td>
<td>6. Have adolescent girls are treated?</td>
<td>• For what conditions?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• How they are treated?</td>
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<td></td>
<td></td>
<td>• Who treats them?</td>
</tr>
<tr>
<td>III. Third Part- Key Question:</td>
<td>Knowledge and perception regarding menstruation of girls in the community</td>
<td></td>
</tr>
<tr>
<td>Objective</td>
<td>Question</td>
<td>Probe/Follow -Up</td>
</tr>
<tr>
<td>Awareness</td>
<td>7. In this community, what do you think girls know about menstruation?</td>
<td>a. Do they know why it is happening to them?</td>
</tr>
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<td></td>
<td></td>
<td>b. How do you think girls in this community feel about menstruation?</td>
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<tr>
<td>Awareness /Information</td>
<td>8. Do health works normally discuss menstruation with girls the health</td>
<td>a. In your encounter with adolescent girls, do you recall an instance where you</td>
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<td></td>
<td>facilities?</td>
<td>have talked to adolescent girls about menstruation?</td>
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<td></td>
<td></td>
<td>• Who accompanied them to the health facility?</td>
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<td></td>
<td></td>
<td>• What was the topic of discussion?</td>
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<td></td>
<td></td>
<td>• What was their reaction?</td>
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<td></td>
<td></td>
<td>• How did they feel after you talked with them?</td>
</tr>
<tr>
<td>Practice</td>
<td>9. In your opinion, what measures do adolescent girls in this community</td>
<td>a. What menstruation hygiene management practices is common in this community?</td>
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<tr>
<td></td>
<td>take when they have menstruation?</td>
<td>b. Are these practices common among all members of the community? Do you see any</td>
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<td>difference between women and adolescent girls? Please explain</td>
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<td>10. Have you heard of any traditional menstrual hygiene management practices?</td>
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<td></td>
<td>• What are they? Please explain</td>
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<td></td>
<td>• Who practice them?</td>
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<td>11. Are girls generally prepared to manage their menses?</td>
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<tr>
<td></td>
<td></td>
<td>• What do girls need to be prepared to manage menstruation? Who should provide</td>
</tr>
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<td></td>
<td>this preparation?</td>
</tr>
</tbody>
</table>
| 12. | Have you experienced adolescent girls approaching clinic for treatment as a result of poor menstrual hygiene management practices? | • Can you specify what those practices were?  
• What were the health conditions/health problems that was caused due to poor menstrual hygiene management practices?  
• Have you seen other health or infectious disease that has occurred due to poor menstrual hygiene? Please specify  
• In your opinion, why do they take place? |
| --- | --- | --- |
| Health measurement | 13. What measures do you have at this health facility to improve health conditions for adolescent girls during menstruation? | i. Provide health education to raise awareness  
ii. Treat for any condition associated with the poor menstruation hygiene management  
iii. Ensure their privacy and confidentiality |
| Practice | 14. Have you noticed any change in people’s knowledge, attitude and practice regarding health practices in this community? | ❖ Knowledge  
❖ Attitude  
❖ Practice |

### IV. Fourth Part-Key Question: Programme suggestions

<table>
<thead>
<tr>
<th>Objective</th>
<th>Questions</th>
<th>Probes</th>
</tr>
</thead>
</table>
| Suggestions for improvement of the situation | 15. As a health professions in this community, what is your recommendation to the ministry of public health to improve conditions for adolescent girls particularly in relation to their menstrual hygiene management | • Education  
• School curricula  
• support of teachers  
• Presence of Health workers at school  
• Presence of child consultant at school |
|  | 16. What can Ministry of Public Health do to make it easier for girls to be in school during menstruation | |

**Final questions**

The facilitator have to read the following to interviewee: we discuss comprehensively about menstruation, and now it is turn of final questions.
17. Do you have any other issues, that still not covered and you would like to be added in discussion?

18. Do you have any question? May be we can’t answer all of your question, but we will try.
At the end we are grateful from you to give us your precious time to interview with you. Really we learn a lot from you! Before we leave here, are you have any ideas, suggestion to be added in our discussion? Are there any issues to be discuses on? Are there any issue that we talked about and you want to know more about it? Thanks for your participation?
Annex 4, Training Schedule

Formative Research, Menstrual Hygiene Management
October 13-20, 2015

Day One: Tuesday October 13, 2015

<table>
<thead>
<tr>
<th>Date</th>
<th>Duration</th>
<th>Topic</th>
<th>Materials</th>
<th>Facilitator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuesday Oct 13</td>
<td>8:30-9:00</td>
<td>Registration</td>
<td></td>
<td>Admin</td>
</tr>
<tr>
<td></td>
<td>9:00-9:05</td>
<td>Recitation of the Holy Qur’an</td>
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<tr>
<td></td>
<td>9:05-9:30</td>
<td>Introduction and Welcome</td>
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<td>Javed</td>
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<tr>
<td></td>
<td>9:30-9:45</td>
<td>WinS/MHM project introduction</td>
<td>PPT day1</td>
<td>Palwasha</td>
</tr>
<tr>
<td></td>
<td>9:45-10:00</td>
<td>Tea Break</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>10:15-12:00</td>
<td>Introduction to WinS/MHM</td>
<td>Module one</td>
<td>Palwasha</td>
</tr>
<tr>
<td>12:00 -13:00</td>
<td></td>
<td>LUNCH BREAK</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>13:00-13:30</td>
<td>Gender Consideration for MHM</td>
<td>Presentation</td>
<td>Palwasha</td>
</tr>
<tr>
<td></td>
<td>13:30-14:00</td>
<td>Research Plan: Research question, objectives, overall research plan and timeline</td>
<td>Presentation</td>
<td>PA/JR</td>
</tr>
<tr>
<td></td>
<td>14:00-14:45</td>
<td>Qualitative research methodology: Basic Concept, Interviewing Techniques and In-depth interviews/key-informant interview Basics; interviewing adolescents</td>
<td>Presentation</td>
<td>PA/JR</td>
</tr>
<tr>
<td>14:45-15:00</td>
<td></td>
<td>Tea Break</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>15:00-15:45</td>
<td>FGD Techniques and Communication skills for FGD</td>
<td>Presentation, handout</td>
<td>PA/JR</td>
</tr>
<tr>
<td></td>
<td>15:45-16:00</td>
<td>Note takers role</td>
<td>handout</td>
<td>PA/JR</td>
</tr>
</tbody>
</table>

Introduction:
1. What is your research background/topic?
2. What is your experience with qualitative research?
3. Where in Afghanistan have you conducted research?

WinS/MHM Project introduction:
1. Discuss why this project is happening, part of UNICEF’s WinS/MHM Project
   a. Expected outcomes (research deliverable)
2. Previous UNICEF MHM work (Global and in Afghanistan)
3. Scope of this study: discuss where in Afghanistan the research is being conducted, why here?
4. Stakeholders working on this project: ELSC, UNICEF Afghanistan, Emory University

Qualitative Research Basics
1. Basic on qualitative research
2. Difference between qualitative and quantitative research approach
3. Methods of data collection in qualitative studies
4. In-depth/key-informant interview basics review
5. Basics of interview structure
   a. Discussing open-ended/probing strategies
   b. Active listening
   c. Other interview strategies and basics
6. Conducting FGD
   a. Basics of FGD structure
b. Active listening  
c. Probing strategies  
d. Note taking  
e. Recording the session

Day Two: Wednesday October 14, 2015

<table>
<thead>
<tr>
<th>Date</th>
<th>Duration</th>
<th>Topic/Activity</th>
<th>Materials</th>
<th>Facilitator</th>
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<tbody>
<tr>
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<td>Registration</td>
<td>Admin</td>
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<tr>
<td></td>
<td>9:00-9:30</td>
<td>Review of yesterday’s presentation</td>
<td>Participants</td>
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<td>9:30-10:20</td>
<td>Ethics/importance of ethics</td>
<td>Presentation</td>
<td>Palwasha</td>
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<tr>
<td></td>
<td>10:20-10:30</td>
<td><strong>Tea Break</strong></td>
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<tr>
<td></td>
<td>10:30-11:15</td>
<td>Child Protection Ethics /Consent and privacy</td>
<td>Presentation</td>
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<td>11:15-12:00</td>
<td>Consent/assent/recording permission</td>
<td>Presentation</td>
<td>PA/JR</td>
</tr>
<tr>
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<td><strong>12:00 -13:00</strong></td>
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<tr>
<td></td>
<td>13:00-13:40</td>
<td>Reviewing Girls IDI</td>
<td>Girls IDI tool (1)</td>
<td>PA/JR</td>
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<td>Reviewing Girls IDI</td>
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<td>PA/JR</td>
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<td><strong>Tea Break</strong></td>
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<tr>
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<td>14:30-15:30</td>
<td>Practicing conducting IDI (Group work/classwork)</td>
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<td>PA/WQ</td>
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<tr>
<td></td>
<td>15:30-16:00</td>
<td>Question Session</td>
<td></td>
<td>PA/WQ/JR</td>
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</table>

7. Introduction to research ethics  
   a. Ethics and ethical consideration in qualitative study  
8. Review Girls IDI  
   a. Review the school girls IDI with everyone  
   b. Break into two groups to discuss the Dari/Pashtu translations

Day Three: Thursday October 15, 2015

<table>
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<th>Topic/Activity</th>
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<td>8:30-9:00</td>
<td>Review of previous session</td>
<td>PA/WQ</td>
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<td>9:40-10:20</td>
<td>Review of Girls FGD</td>
<td>Study tool (2)</td>
<td>PA/WQ/RA</td>
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<td>Reviewing Girls FGD</td>
<td>Study tool</td>
<td>PA/WQ</td>
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<td><strong>LUNCH BREAK</strong></td>
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<td></td>
<td>13:00-13:40</td>
<td>Reviewing out of school girl FGD</td>
<td>Study tool (3)</td>
<td>WQ/PA/JR</td>
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<td>Reviewing out of school girl FGD</td>
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<td>WQ/PA/JR</td>
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<td>WQ/PA</td>
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Day Four: Saturday October 17, 2015

18PA: Palwasha Anwari, WA: Wassima Qarizada, JR: Javed Rahmanzai
Teacher KII, Health Worker KII and School Administration KII review

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<td>PA/WQ</td>
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<td>8:30-9:00</td>
<td>Practicing FGD (school girls and out of school adolescent girls)</td>
<td>Study tool/FGD out of school girls (3)</td>
<td>PA/WQ</td>
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<td>9:00-10:00</td>
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<td>Class work</td>
<td>PA/WQ/JR</td>
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<td>Presentation</td>
<td>PA/WQ/JR</td>
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<td>PA/WQ/JR</td>
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<td>PA/WQ/JR</td>
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<td>Review of the day, Q&amp;A</td>
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<td>PA/WQ/JR</td>
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1. Interview strategies
   a. We can stage interviews where we act like different types of participants to show how to ask questions effectively
   b. Discuss using the tool as a guide, note taking on the tools
   c. Practicing asking permission to record the interview
   d. Teams take notes on each other’s performance and offer suggestions

Day Five: Sunday October 18, 2015

FGD mothers, and school observation tool

<table>
<thead>
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<th>Date</th>
<th>Duration</th>
<th>Topic/Activity</th>
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<th>Facilitator</th>
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<td>8:30-8:45</td>
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<td>PA/WQ</td>
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<td>Practicing FGD mothers</td>
<td>Class work</td>
<td>PA/WQ</td>
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<td></td>
<td>10:10-10:30</td>
<td>Tea Break</td>
<td>PA/WQ</td>
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<td>10:30-11:15</td>
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<td>Study tool (8)</td>
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<td>Safety strategy</td>
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### Day Six: Monday October 19, 2015

**Introduction to checklists**

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<td>8:30-9:00</td>
<td>Reviewing of previous session</td>
<td>PA/WQ/JR</td>
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<td>10:00-10:10</td>
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<td>10:10-11:00</td>
<td>Note taking skills</td>
<td>PA/WQ/JR</td>
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<td>11:00-12:00</td>
<td>Transcription/translation overview</td>
<td>PA/WQ/JR</td>
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<td>13:00-13:40</td>
<td>Supervisors role and responsibility</td>
<td>PA/WQ/JR</td>
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<td>Field planning and field arrangement checklist</td>
<td>PA/WQ/JR</td>
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<td>14:30-15:30</td>
<td>Introduction to Note taker checklist, Moderator Checklist, FGD Checklist,</td>
<td>PA/WQ/JR</td>
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<td>Introduction to different levels of data quality measurements (Quality control and quality assurance)</td>
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### Day Seven: Tuesday October 20, 2015

**Field Testing (visit from two schools)**

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<td>Preparation for field test</td>
<td>PA/WQ</td>
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<td>9:00-10:00</td>
<td>Trip to the schools</td>
<td>Visit from the two schools</td>
<td>PA/WQ</td>
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<td>Study tools</td>
<td>PA/WQ</td>
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<td>14:00-14:45</td>
<td><strong>Tea and Lunch Break</strong></td>
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<td>14:45-17:00</td>
<td>In office review and feedback on field visit</td>
<td>Participants notes, experiences and reports</td>
<td>PA/WQ/JR</td>
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Annex 5 Field test plan

Date of Pilot testing: 18 October, 2015
Site: District 3 and 4 Kabul City
ELCS Team: Dr. Waseema Qarizada and Dr. Palwasha Anwari

Team Interviewer 1: Kabul, Ghor, Laghman; Team Interviewer 2: Herat, Balkh, Laghman
Team Supervisor 1: Kabul, Ghor, Kandahar; Team Supervisor 2: Herat, Balkh, Laghman

<table>
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<tr>
<th>SN</th>
<th>Time Start</th>
<th>End Time</th>
<th>Duration</th>
<th>Study tool to be used</th>
<th>Type of activity</th>
<th>Site</th>
<th>Responsible</th>
<th>Number of interview</th>
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<td>1</td>
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<td>105 minutes</td>
<td>IDI School girls</td>
<td>2 interviews</td>
<td>School 1</td>
<td>(Team Interviewer 1) (4 ppl)</td>
<td>2</td>
</tr>
<tr>
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<td>8:45</td>
<td>10:15</td>
<td>105 minutes</td>
<td>IDI School girls</td>
<td>2 interviews</td>
<td>School 2</td>
<td>(Team Interviewer 2) 4 ppl</td>
<td>2</td>
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<td>8:45</td>
<td>10:45</td>
<td>120 minutes</td>
<td>FGD girls</td>
<td>1 FGD</td>
<td>School 1</td>
<td>(Team interviewer 1) 2 ppl</td>
<td>1</td>
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<tr>
<td></td>
<td>8:45</td>
<td>10:45</td>
<td>120 minutes</td>
<td>FGD girls</td>
<td>1 FGD</td>
<td>School 2</td>
<td>Team interviewer 2 ppl</td>
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<td>2</td>
<td>10:45</td>
<td>11:00</td>
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<td>KII teacher</td>
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<td>School 1</td>
<td>(Team interviewer 1) 4 ppl</td>
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<td>4</td>
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<td>School head</td>
<td>1 interview</td>
<td>School 1</td>
<td>Team 1- 2 ppl</td>
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<td>12:00</td>
<td>60 minutes</td>
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<td>School 2</td>
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<td>Supervisor</td>
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<td></td>
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<td>11:30</td>
<td>60 minutes</td>
<td>Direct Observation</td>
<td>1</td>
<td>School 2</td>
<td>Supervisor</td>
<td>1</td>
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<td>Community 1</td>
<td>Team 1, two people</td>
<td>1</td>
</tr>
<tr>
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<td>13:00</td>
<td>14:30</td>
<td>90 minutes</td>
<td>FGD girls out of school</td>
<td>1 FGD</td>
<td>Community 2</td>
<td>Team2, two people</td>
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<td>FGD girls mother</td>
<td>1 FGD</td>
<td>Community 1</td>
<td>Team 1, two people</td>
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<td>13:00</td>
<td>14:30</td>
<td>90 minutes</td>
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<td>15:30</td>
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<td>Team debriefing</td>
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