





PROCESS DOCUMENTATION OF MHM INTERVENTIONS IN SITAMARHI & PURNEA DISTRICT

(Phase I – 1st April 2021 to 14th March 2022

&

Phase II – 1st April 2022 to 31st December 2022)

SUBMITTED BY

NAV ASTITVA FOUNDATION

PREFACE

Good menstrual hygiene management (MHM) plays a fundamental role in enabling women, girls, and other menstruators to reach their full potential. Menstrual hygiene management is globally recognized as a public health concern. UNICEF Bihar in partnership with NavAstitva Foundation (NAF) have implemented a project in two phases (1st April 2021 to 14th March 2022 and 1st April 2022 to 31st December 2022) to demonstrate menstrual health and hygiene management in two districts (Purnia & Sitamarhi) of Bihar.

Menstruation is a normal biological process experienced by millions of women and adolescent girls around the world each month. Although menstruation is a normal physiological phenomenon but this subject has been kept very hushed and very few people talks about it. Lots of social beliefs, traditions, taboos, misconceptions etc. have been attached with menstruation. Most girls too remain absent from schools at the onset of menstruation. Lack of knowledge on safe hygiene practices, non-availability of sanitary absorbents, affordability of sanitary absorbents etc. has been detrimental on the health & well-being of women and adolescent girls.

To sensitize and demonstrate menstrual hygiene management in close association with government departments and Jeevika, UNICEF in partnership with NavAstitva Foundation initiated the program in Purnia and Sitamarhi district. The primary objective of this initiative was to strengthen Jeevika SHGs to mainstream the MHM agenda in their period meetings, create an awareness and develop a trained team in the districts to advocate and disseminate messages on MHM. In the two years of implementation the program has directly reached 72488 male and female persons and indirectly about 319349 persons.

This process documentation captures the events and activities that has been done in both the districts on menstrual health and hygiene management. This document also suggests ways and scope of scaling up this initiative in the entire state for the cause of women and adolescent girls considering their better health and wellbeing. NavAstitva Foundation remains committed to this cause to make Bihar and empowered female population with better health and wellbeing status.

We thank the district administration of Purnia and Sitamarhi, team of Jeevika in both the districts, technical support and guidance from UNICEF and team members and most important our outreach workers and community persons without whom and their dedication, it would not have been possible to showcase and implement the project in both the districts.

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1. INTRODUCTION

Menstrual Health and Hygiene (MHH) is essential to the well-being and empowerment of women and adolescent girls. On any given day, more than 300 million women between the ages of 15 and 49 are menstruating on any given day (Water Aid, Unilever Domestos, and WSSCC 2013). In total, an estimated 500 million lack access to menstrual products and adequate facilities for menstrual hygiene management (MHM)¹. To effectively manage their menstruation, girls and women require access to water, sanitation and hygiene (WASH) facilities, affordable and appropriate menstrual hygiene materials, information on good practices, and a supportive environment where they can manage menstruation without embarrassment or stigma. According to the WHO/UNICEF Joint Monitoring Programme 2012, menstrual hygiene management is defined as: "Women and adolescent girls are using a clean menstrual management material to absorb or collect menstrual blood, that can be changed in privacy as often as necessary, using soap and water for washing the body as required, and having access to safe and convenient facilities to dispose of used menstrual management materials. They understand the basic facts linked to the menstrual cycle and how to manage it with dignity and without discomfort or fear." The challenges that menstruating girls and women face encompass more than a basic lack of supplies or infrastructure. While menstruation is a normal and healthy part of life for most women and girls, in many societies, the experience of menstruators continues to be constrained by cultural taboos and discriminatory social norms. Poor menstrual health and hygiene is exacerbating social and economic inequalities, negatively impacting their education, health, safety, and human development. The resulting lack of information about menstruation leads to unhygienic and unhealthy menstrual practices and creates misconceptions and negative attitudes, which motivate, among others, shaming, bullying, and even gender-based violence.

Menstrual health and hygiene (MHH) expands this definition to include the broader systemic factors that link menstruation with health, well-being, gender equality, education, equity, empowerment, and rights. These systematic factors include accurate and timely knowledge about menstruation, hygiene, and health; available, safe, and affordable materials; sanitation and washing facilities; safe and hygienic disposal; informed health and education professionals; referral and access to health services; positive social norms; and MHH advocacy and policy (UNICEF 2019a). MHH is a cross-sectoral issue that is most effectively addressed through collaboration among officials and practitioners in water supply, sanitation, and hygiene (WASH), education, public health, sexual and reproductive health and rights, urban development, and the private sector.

Menstruation is a normal and healthy part of life for girls and women. It is inextricably tied to the reproductive process, with changing effects and needs throughout the life cycle, including postpartum and menopausal challenges. As normal as menstruation is, around the world it

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¹ www.worldbank.org/en/topic/water/brief/menstrual-health-and-hygiene

continues to be stigmatized and associated with dirtiness and impurity. The experience of menstruating girls and women is constrained by cultural taboos and discriminatory social norms. The resulting lack of information about menstruation creates misconceptions and negative attitudes, which motivate, among others, shaming, bullying, and even gender-based violence. It also results in unhealthy menstrual practices and restrictions on social, religious, and familial interaction, such as cooking and eating with family members. These negative experiences associated with menstruation cause distress, shame, and diminished self-esteem (Hennegan et al. 2019).

The National Family Health Survey -5 (NFHS-5 conducted in 2019-20) reflects an increase in the proportion of women aged 15-24 using hygienic methods of protection during their menstrual period in comparison to NFHS-4 across almost all states including Bihar: the status of Bihar remains low at 59%. The increase of 28 % as compare to NFHS-4 (released in 2015-16) could be attributed to a positive policy environment and the concerted efforts of stakeholders in focusing on awareness, access and attitude and behaviour changes among women and girls regarding MHM in Bihar. The Swachh Bharat Mission (SBM) being implemented in the state along with the Mukhyamantri Kanya Utthan Yojna (MKUY) is significant in its inclusion of MHM as a part of the 'equity and inclusion' component along with providing financial support to school going adolescent girls. The MHM Guidelines issued by the Ministry of Drinking Water and Sanitation (2015) embarks its commitment to support girls and women on this issue.

2. BACKGROUND:

Good menstrual hygiene management (MHM) plays a fundamental role in enabling women, girls, and other menstruators to reach their full potential. Menstrual health and hygiene (MHH) include the broader systemic factors that link menstruation with health, well-being, gender equality, education, equity, empowerment, and rights. These systematic factors include accurate and timely knowledge about menstruation, hygiene, and health; available, safe, and affordable materials; sanitation and washing facilities; safe and hygienic disposal; informed health and education professionals; referral and access to health services; positive social norms; and MHH advocacy and policy formulation. MHH is a cross-sectoral issue that is most effectively addressed through collaboration among officials and practitioners in water supply, sanitation, and hygiene (WASH), education, public health, sexual and reproductive health and rights, urban development, and the private sector.

To demonstrate menstrual health and hygiene and propose the MHM roadmap in Bihar, UNICEF in partnership with Nav Astitva Foundation (NAV) has been working in two districts of Bihar with government departments and the community as a whole using the *Jeevika* platform to roll out the program. The program aimed to increase awareness among women and adolescent girls at the grass root level about Menstrual Hygiene (MH) so that they can fully participate in their private and public life.

The two districts that had been taken up to demonstrate the project "Strengthening Rural Women Self Help Groups to promote *Menstrual Health & Hygiene Management (MHHM)*"

were – Purnea and Sitamarhi. In both the districts two blocks were also being supported, i.e., Riga in Sitamarhi and Kasba in Purnea on MHHM issues. The purpose of the initiative was two folds.

- 1. District level facilitation for bringing coordination and convergence among key line departments for effective menstrual hygiene management programs,
- 2. Strengthening SHGs to mainstream MHM agenda in their periodic meetings. The intensive support in two Blocks is basically to strengthen the SHGs.

The project was being implemented from 1st April 2021 and ended on 31st December 2022.



DISTRICT: SITAMARHI

No. of Blocks: 17

No. of GP: 273

No. of Villages: 845

No. of SHGs: 38686

No. of VO: 2490

No. of CLF: 51

CM/BK/VRP: 3703

SHG members: 450829

DISTRICT: PURNIA

No. of Blocks: 14

No. of GP: 246

No. of Villages: 1450

No. of SHGs: 37733

No. of VO: 2551

No. of CLF: 45

CM/BK/VRP: 4566

SHG members: 443773

BLOCK: KASBA

MRP/CNRP/ MBK/CF/BM= 14

No of SHG - 1974

No of VO- 134

No. of CLF: 3

CM/BK/VRP: 133

SHG members: 22897

BLOCK: RIGA

MRP/CNRP/ MBK/CF/BM= 11

No of SHG - 2634

No of VO- 186

No. of CLF: 4

CM/BK/VRP: 167

SHG members: 31343

3. NEED OF MENSTRUAL HYGIENE MANAGEMENT:

Menstrual Health and Hygiene (MHH) is essential to the well-being and empowerment of women and adolescent girls. To effectively manage their menstruation, girls and women require access to water, sanitation and hygiene (WASH) facilities, affordable and appropriate menstrual hygiene materials, information on good practices, and a supportive environment where they can manage menstruation without embarrassment or stigma. While menstruation is a normal and healthy part of life for women and girls, in many societies, the experience of menstruators continues to be constrained by cultural taboos and discriminatory social norms. The lack of information about menstruation, social taboos and cultural practices leads to unhygienic and unhealthy menstrual practices and creates misconceptions and negative attitudes, which motivate, among others, shaming, bullying, and even gender-based violence. Menstruation is still a taboo subject in rural Bihar and due to which adolescent girls and women are suffering in terms of health, education, gender, equity and empowerment components. For generations of girls and women, poor menstrual health and hygiene is exacerbating social and economic inequalities, negatively impacting their education, health, safety, and human development.

In Bihar the subject of Menstrual Health and Hygiene (MHH) is also not taken up departments at scale although the Mukhyamantri Kanya Utthan Yojna (MKUY) do mention of incentive to school going girls for the purchase of sanitary pad and items of menstrual needs. There are several programs such as the Rashtriya Kishore Swasthya Karyakram (RKSK) launched by the Ministry of Health and Family Welfare that talks of reaching out to male and female, rural and urban, married and unmarried, in and out-of-school adolescent population, Swachh Bharat Mission that talks of sanitation and hygiene awareness, Teachers Training where teachers are oriented on safe sanitation, hygiene improvement and improved water facility for health and wellbeing of children in schools. Although government is implementing several program on this issue the awareness level on this subject is very limited and no program or agency (both private and government) talks about the menstrual needs of women and adolescents in the society too. Lack of information and awareness among our women and adolescent girls make them undertake wrong health measures, follow misconceptions and they are susceptible to many diseases affecting their health. Hence, the need of MHH are multifarious and the government and private agencies must work on MHH where half of our population faces this need every month.

When girls and women are aware and have access to safe and affordable sanitary materials to manage their menstruation, they decrease their risk of infections. This can have cascading effects on overall sexual and reproductive health, including reducing teen pregnancy, maternal outcomes, and fertility. Promoting menstrual health and hygiene is an important means for safeguarding women's dignity, privacy, bodily integrity, and, consequently, their self-efficacy. Awareness of MHH contributes to building an enabling environment of non-discrimination and gender equality in which female voices are heard, girls have choices about their future, and women have various options to lead and act positively. Improving menstrual

hygiene and providing access to affordable menstrual materials can help improve girls' and women's access to education, opening more options for jobs, promotions, and entrepreneurship, thus unleashing female contributions to the overall economy. In addition, feminine hygiene products are a multibillion-dollar industry, which, if properly tapped into, can generate income for many and significantly boost economic growth.

4. IMPLEMENTING AGENCY:

The program was implemented by Nav Astitva Foundation (NAV) having its head office in Patna and field offices in the respective blocks of the two districts of Sitamarhi and Purnia.

Nav Astitva Foundation (NAF), a professional development agency from Bihar specializing in community processes with special focus on women empowerment, education, health and hygiene. The organization came into existence in the year 2012 and registered under the society registration act 1860. Nav Astitva Foundation was started with a vision and mission to provide better education, health, empowerment, and nutritious food for underprivileged people, especially women and girls. The organisation has a highly committed and dedicated team having wide and rich experience in working with women and children, marginalized sections of the society, vulnerable populations for their empowerment and development.

5. WHY BIHAR LIVELIHOODS PROMOTION SOCIETY – JEEVIKA?

The Government of Bihar (GoB), through the Bihar Rural Livelihoods Promotion Society (BRLPS), an autonomous body under the Department of Rural Development, is spearheading the World Bank aided Bihar Rural Livelihoods Project (BRLP), locally known as JEEViKA with the objective of social & economic empowerment of the rural poor. Ministry of Rural Development (MoRD), Government of India (GoI) has restructured the Central Scheme Swarnajayanti Gram Swarozgar Yojana (SGSY) into National Rural Livelihoods Mission (NRLM).

As a first step in the implementation of NRLM in the state, GoB has designated BRLPS as the State Rural Livelihoods Mission (SRLM) for implementation of NRLM in the state.

² Total SHG Formed in Bihar	1066628
Total VO Formed in Bihar	71907
Total CLF Formed in Bihar	1552
Total PG in Bihar	5284

² www.brlps.in dated 20.12.2022

Bihar Rural Livelihoods Promotion Society (BRLPS), an autonomous society under Rural Development Department, Govt. of Bihar has been designated as State Rural Livelihoods Mission by Rural Development Department, Government of Bihar to scale up the "JEEViKA" model in all 534 Blocks of 38 Districts in Bihar under National Rural Livelihood Mission. So far JEEViKA has been able to reach out to nearly 1.17 crore rural poor households by organizing them into more than 10 Lakh women Self Help Groups. The SHG are further federated into Village organisation (VO) and Cluster Level Federations (CLF). The adjoining figures shows the growing strength of Jeevika in the state of Bihar.

Hence, the presence of Jeevika Didis in every villages of the state and their interest and awareness towards social development makes Jeevika the best platform to implement and showcase the project objectives.

As this intervention of Menstrual Health and Hygiene Management (MHHM) involves women and adolescent girls, Jeevika is an appropriate stage where the SHG members are oriented, made aware and involved in this menstrual health and hygiene. Since Jeevika has already reached more than 1.17 crore rural households, the positive impacts of the demonstration in Sitamarhi and Purnea will be an easy affair for the administration to scale up the initiative across all the 38 districts and 534 blocks of Bihar.

6. OBJECTIVE OF INTERVENTION

The programme primarily focused on the infrastructure, facility and behaviour change aspects of the problem as opposed to social stigma, cultural norms, lack of awareness and economic barriers that prevent women from acting on information about menstrual health. The key objective of the intervention was:

- Mainstream MHHM agenda in the implementation of development programs across all departments and establish Jeevika as a platform and driving force to carry the issue forward
- To bring convergence and coordination among key line departments to mainstream MHM agenda
- To develop District Convergent action plan on menstrual hygiene management and facilitate periodic review of the key line departments.
- To develop at least three master trainers from each block of the selected districts on MHM and facilitate percolating down of information to the SHG group level
- ♣ To build the capacities of Community mobilizers in selected Blocks and to facilitate handholding support to mainstream MHM agenda in VO and SHG meetings
- To observe Global Menstrual Hygiene Day and create a momentum in the selected Districts for a continued dialogue on MHM

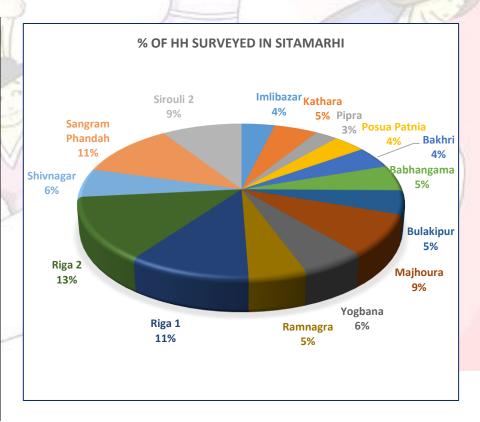
7. Baseline and Endline Findings from the Project

Nav Astitva Foundation (NAV) during the course of implementation undertook a baseline survey during the onset of the project in both the district of 500 HH to understand the knowledge, attitude and practice of the women HHs on menstrual hygiene management. Similarly, at the end of the project these 500 women members were again approached for the end line survey. The comparative findings from the both the districts show that there has been a steady rise in the knowledge and awareness level of the women and adolescent girls on this issue. The finding of both the districts has been detailed herewith:

In Sitamarhi district the baseline and the endline survey was done in 15 villages covering 500 HHs while in Purnea district the survey was done in 05 villages. The questionnaire was based on 10 questions in local language (hindi) for which the respondent made their responses. The details of the villages along with the HHs covered has been given in the table below.

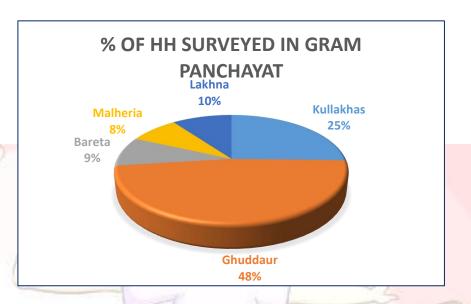
1. Sitamarhi: HH surveyed in villages

		1
SI.	Gram Panchyats/Villages	нн
1	Imlibazar	19
2	Kathara	25
3	Pipra	13
4	Posua Patnia	19
5	Bakhri	23
6	Babhangama	27
7	Bulakipur	25
8	Majhoura	43
9	Yogbana	28
10	Ramnagra	25
11	Riga 1	53
12	Riga 2	67
13	Shivnagar	30
14	Sangram Phandah	57
15	Sirouli 2	46
	Total	500



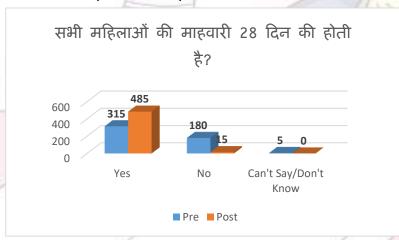
2. Purnea: HH survey in the villages

SI.	Gram Panchyats	НН
1	Kullakhas	127
2	Ghuddaur	238
3	Bareta	44
4	Malheria	41
5	Lakhna	50
	Total	500



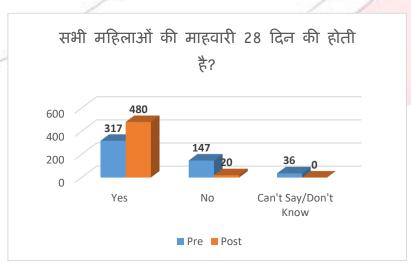
1a. Sitamarhi: Does every woman have menstruation cycle of 28 days?

सभी महिलाओं की माह <mark>वारी 28</mark> दिन की होती है?			
	Pre	Post	
Yes	315	485	
No	180	15	
Can't Say/Don't Know	5	0	



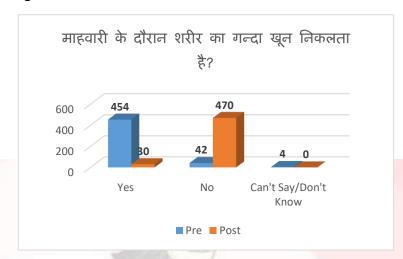
1b. Purnea: Does every woman have menstruation cycle of 28 days?

सभी महिलाओं की माहवारी 28 दिन की होती है?			
	Pre	Post	
Yes	317	480	
No	147	20	
Can't Say/Don't Know	36	0	



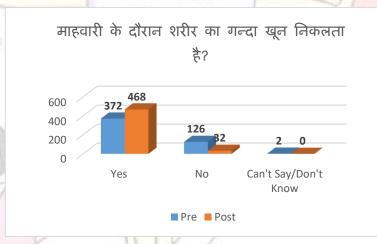
2a. Sitamarhi: Bad blood comes out during menstruation?

माहवारी के दौरान शरीर का गन्दा खून निकलता है?			
Pre Post			
Yes	454	30	
No	42	470	
Can't Say/Don't Know	4	0	



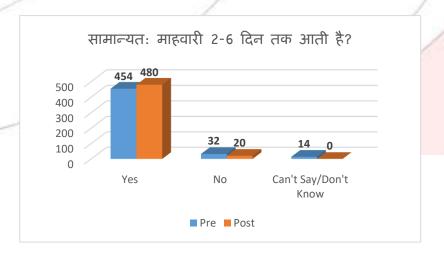
2b. Purnea: Bad blood comes out during menstruation?

माहवारी के दौरान शरीर का गन्दा			
खून निकलता है?			
	Pre	Post	
Yes	372	468	
No	126	32	
Can't Say/Don't Know	2	0	



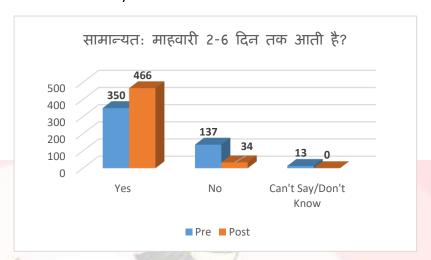
3a. Sitamarhi: Normally menstruation occurs for 2-6 days?

सामान्यतः माहवारी 2-6 दिन तक आती है?				
Pre Post				
Yes	454	480		
No	32	20		
Can't Say/Don't Know	14	0		



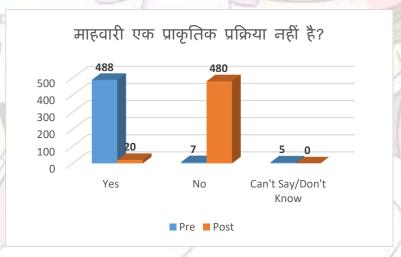
3b. Purnea: Normally menstruation occurs for 2-6 days?

सामान्यतः माहवारी २-६ दिन			
तक आती है?			
	Pre	Post	
Yes	350	466	
No	137	34	
Can't Say/Don't Know	13	0	



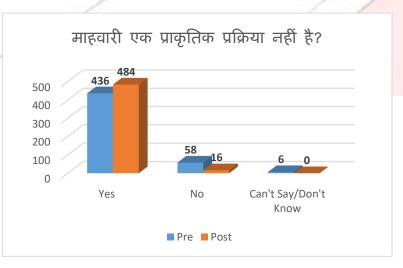
4a. Sitamarhi: Menstruation is not a natural process?

Q3.		100	
माहवारी एक प्राकृतिक प्रक्रिया नहीं है?			
	Pre	Post	
Yes	488	20	
No	7	480	
Can't Say/Don't Know	5	0	



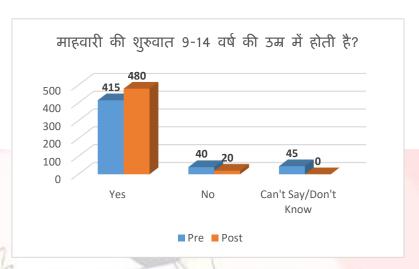
4b. Purnea: Menstruation is a natural process?

माहवारी एक	प्राकृतिक ों है?	प्रक्रिया
	Pre	Post
Yes	436	484
No	58	16
Can't Say/Don't Know	6	0



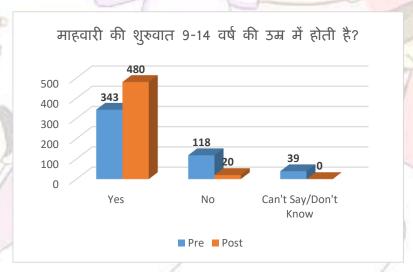
5a. Sitamarhi: Menstruation starts at the age of 9-14 years?

माहवारी की शुरुवात 9-14 वर्ष की उम्र में होती है?		
	Pre	Post
Yes	415	480
No	40	20
Can't Say/Don't Know	45	0



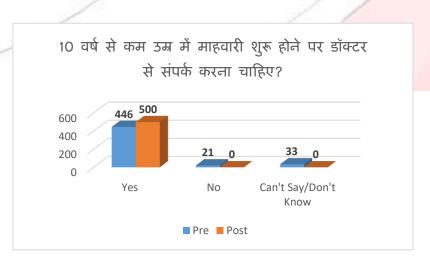
5b. Purnea: Menstruation starts at the age of 9-14 years?

Dil.		6 61
माहवारी की शुरुव में हो	ात 9-14 व ाती है?	ार्ष की उम्र
	Pre	Post
Yes	343	480
No	118	20
Can't Say/Don't Know	39	0



6a. Sitamarhi: If menstruation starts within 10 years, then doctors needs to be consulted?

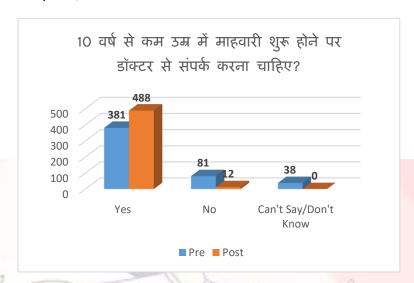
90 वर्ष से कम उम्र में माहवारी शुरू होने पर डॉक्टर से संपर्क करना चाहिए।			
Pre Post			
Yes	446	500	
No	21	0	
Can't Say/Don't Know	33	0	



6b. Purnea: If menstruation starts within 10 years, then doctors needs to be consulted?

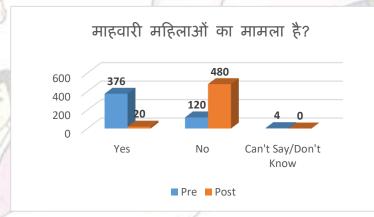
90 वर्ष से कम उम्र में माहवारी शुरू होने पर डॉक्टर से संपर्क करना चाहिए।		
	Pre	Post
Yes	381	488
No	81	12
Can't Say/Don't	38	0

Know



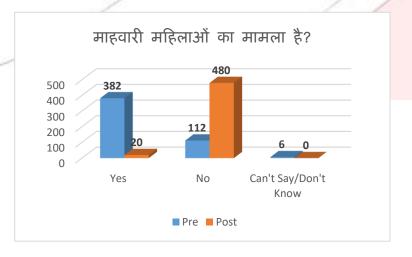
7a. Sitamarhi: Menstruation is only a female affair?

माहवारी महिलाओं का मामला है।		
	Pre	Post
Yes	376	20
No	120	480
Can't	1	-
Say/Don't	4	0
Know		10.1



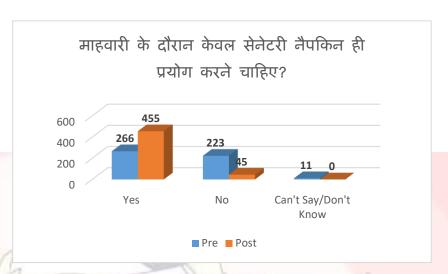
7b. Purnea: Menstruation is only a female affair?

माहवारी महिलाओं का मामला है।		
Pre Post		
Yes	382	20
No	112	480
Can't Say/Don't Know	6	0



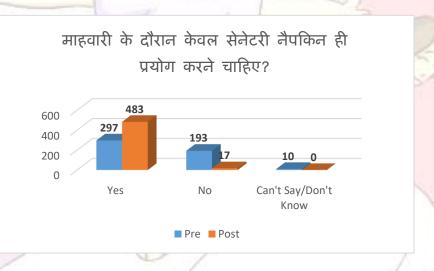
8a. Sitamarhi: Only sanitary pad should be used during Menstruation?

माहवारी के दौरान केवल सेनेटरी नैपकिन ही प्रयोग करने चाहिए।		
	Pre	Post
Yes	266	455
No	223	45
Can't Say/Don't Know	11	0



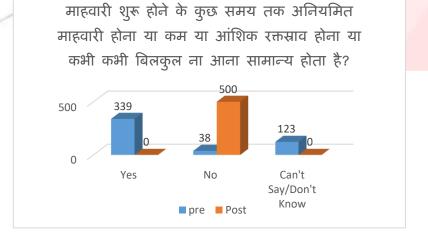
8b. Purnea: Only sanitary pad should be used during Menstruation?

माहवारी के दौरान केवल सेनेटरी नैपकिन ही प्रयोग करने चाहिए।		
100-	Pre	Post
Yes	297	483
No	193	17
Can't Say/Don't Know	10	0



9a. Sitamarhi: During the onset of Menstruation for some times abnormal blood flow or less blood flow or partial blood flow or no blood is a normal phenomenon?

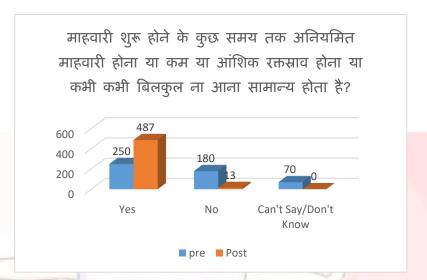
माहवारी शुरू होने के कुछ समः तक अनियमित माहवारी होना, कम या आशिक रक्तस्राव होना या कभी —कभी माहवारी			
बिलकुल न आ	बिलकुल न आना सामान्य होता है ।		
	Pre	Post	
Yes	339	0	
No 38 500			
Can't Say/Don't Know	123	0	



9b. Purnea: During the onset of Menstruation for some times abnormal blood flow or less blood flow or partial blood flow or no blood is a normal phenomenon?

माहवारी शुरू होने के कुछ समः तक अनियमित माहवारी होना, कम या आशिक रक्तस्राव होना या कभी —कभी माहवारी बिलकुल न आना सामान्य होता है ।

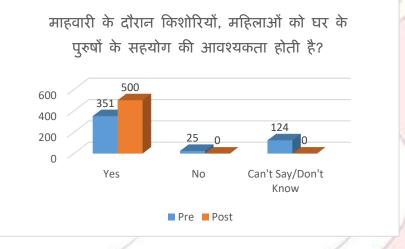
_	Pre	Post
Yes	250	487
No	180	13
Can't Say/Don't Know	70	0



10a. Sitamarhi: During Menstruation women and adolescent girls require the support of male members of the house?

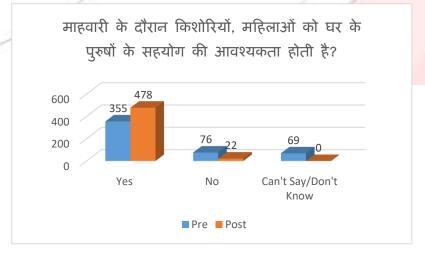
माहवारी के दौरान किशोरियों, महिलाओं को घर के पुरुषों के सहयोग की आवश्यकता होती है।

Pre Post
Yes 351 500
No 25 0
Can't Say/Don't Know 124 0



10b. Purnea: During Menstruation women and adolescent girls require the support of male members of the house?

माहवारी के दौरान किशोरियों, महिलाओं को घर के पुरुषों के सहयोग की आवश्यकता होती है।		
	Pre	Post
Yes	355	478
No	76	22
Can't Say/Don't Know	69	0



8. RESULTS OF INTERVENTION

Nav Astitva Foundation (NAV) has been implementing the project since April 2021 in the two blocks of Sitamarhi and Purnia district along with the district wide support to promote menstrual health and hygiene among various stakeholders. The implementation that was carried in a phase wise manner provided some great insights and results in these two districts. Some of the key results of the intervention in both the phases are:

- Development of District Level MHM action plan for Sitamarhi and Purnea in collaboration with different departments including Jeevika, Health, Education and Social Welfare Department
- 2. 100 CLFs members from Jeevika developed as Master Trainers in both the districts on MHM related issues
- 3. 167 & 133 Community Mobilizers of Jeevika from Sitamarhi & Purnea respectively were trained (3 days training) to carry forward MHM awareness, narratives and discussions among SHG members
- 4. Regularised MHM agenda and discussion in the monthly meetings of CLFs & VOs, SHG meetings and VHSNDs in the two blocks of both districts
- 5. In Sitamarhi, 117 Master Trainers from the Education and the ICDS department has been developed to take the MHM issues down the line among the schools and AWCs. In Purnea, 36 Master Trainers that included BHMs, BCMs and MOICs from all 14 blocks of Health Department have been developed. The departmental teams are ready to scale up MHM in the district in close coordination with Jeevika.
- 6. Four cloth pad making centres two in each district was established involving the Jeevika SHG groups. Necessary materials & machines along with skill based training have been provided to 5 SHGs to run the centre. The cost of the cloth pad has been estimated at Rs. 5.00 per unit.
- 7. Establishment of 10 pad banks managed by CM, Jeevika in both the blocks of the two districts for easy access to sanitary pads, undergarments, reusable cotton cloth pads etc. for the women and adolescent girls
- 8. Developed a team of trained nodal teachers and Meena Manch girls on MHM with the education department to create awareness in schools
- 9. To ensure regular sanitary pad availability in the schools for adolescent girls 'Sanitary Pad Banks' have been established in 20 schools of the block in both the districts
- 10. Developed Innovative & Ready to Use Training modules and IEC materials on MHM for demonstration, awareness and training purpose

9. PROGRAMME REACH IN THE BOTH PHASES OF IMPLEMENTATION

The programme implemented in both the districts has been able to link and engage large number of persons directly³ and indirectly⁴ both. These linkages can support in scaling up and spreading awareness on MHM issues in the districts.

District Purnia

	Phase 1	Phase 2
SHG Linked	1685	555
VO Linked	133	46
CLFs Linked	3	1
Total Women Linked	20260	3951

From Trainings and Other Activities

	Phase 1	Phase 2
Direct Reach	397	8288
Indirect Reach	51132	102807

District Sitamarhi

	Phase 1	Phase 2
SHG Linked	2243	854
VO Linked	167	60
CLFs Linked	3	1
Total Women Linked	26916	3319

From Trainings and Other Activities

	Phase 1	Phase 2
Direct Reach	497	8860
Indirect Reach	63840	101570

³ Direct beneficiaries are population groups who are the direct recipients of programme activities.

⁴ Indirect beneficiaries are population groups who are not the direct recipients of programme activities, but may indirectly benefit from it, e.g. HH members of SHG members

10.IMPLEMENTATION STRATEGY

Participation, Involvement and Engagement of the different stakeholders (both government officials and the community level people) has been the highlights of the implementation methodology. NAF has been constant engaging government officials and community members of the districts along with the Jeevika team members through discussions, workshops, trainings, events and awareness drives on this issue of MHHM. The key strategy of this intervention has been the two pillar approach i.e. 1. Strengthening District level convergence for effective MHM programming, 2. Strengthening Jeevika SHGs to mainstream MHM agenda in their periodic meetings to be able to reach the larger population in the State. Some of the key activities in both the phases of implementation has been detailed herewith:

a. District level orientation cum convergence meeting organized with the key line department officials' i.e. Health, Education, Rural Development, ICDS

To make a launch of the program activity in both the districts, a district level orientation cum interdepartmental convergence meeting under the chairmanship of the District Magistrates was held on 9th July and 27th July 2021 in Purnea and Sitamarhi respectively. The participants were from the various departments, i.e. from BRLPS, Education, ICDS, Health, Social Welfare, Panchyati Raj and DPCU. The orientation was facilitated by the representatives from NAF and UNICEF. The one-day orientation workshop led by the District Magistrate and the Deputy Development Commissioner in both the districts helped to sensitize the key government officials of the various departments, understand the need & importance of MHHM issues, implementation and roll out strategy and their roles in taking the issue forward in their own departments. The convergence meeting was successful in officials expressing their support and commitment to the integration of MHM and related components of WASH for public institutions, spaces, schools and the community. The workshop also stressed the need for promoted collaboration and joint action among the government line departments and generated demand for development of a District Level Action Plan (DLAP) on MHM based on the model demonstrated by NAF with Jeevika, along with provisions for capacity building of frontline workers such as ASHA, ANM, AWW, VM and School Teachers.



District Sensitization Workshop at Purnea



District Sensitization Workshop at Sitamarhi

b. Development and Launch of District MHM Action Plan

In both the district of Purnia and Sitamarhi, District MHM action plan was developed through an intensive consultative process with Jeevika, Health, Education and Social Welfare Department from both the districts. The MHM Action plan includes an implementation framework for increasing access to information, sanitary products and female friendly WASH and waste management solutions. It has been proposed to make and work upon a 2 to 3 years MHM Action Plan with specific handholding support along with capacity building on MHM to selective frontline workers of at least five departments (Health, ICDS, SC/ST welfare, Jeevika, and Education). This action plan would strengthen the entire Rural Women/Adolescent in community on Menstrual Hygiene Management and would ultimately accomplish the MHH Mission (Menstrual Health & Hygiene Mission).

The District MHM action plan developed for both the districts focussed on the activities that are needed to be done and emphasized by different departments to improve the health & hygiene conditions of women and adolescent girls, information and awareness strategy, and capacity building of different stakeholders in the district. The preparation of the MHM action plan was done following the two objectives

- Enable all people to make informed decisions about their sexual and reproductive health (SRH) and ensure that their human rights are respected, protected and fulfilled
- Ensure that all people can enjoy the highest attainable standard of menstrual hygiene management and well-being

The MHHM action plan developed in the district was from the consultation process done with different departments and also the organisational experience and UNICEF's technical assistance in doing such an activity. The MHHM action plan focussed on the departmental onus to orient and train their staff on this subject and if required the Master Trainers (Jeevika, Health & ICDS) developed through this project can also be used in imparting the training and orientation

The MHM action plan prepared through the consultative process was launched on the eve of International Women's day i.e, 8 March 2022 by Mr. Rahul Kumar DM & Mr. Manoj Kumar DDC in Purnea and by Mr. Vinay Kumar, DDC, Sitamarhi on the 11 March 2022. Approximately 28 and 40 participants from various departments were present in Purnea and Sitamarhi inaugural events respectively and were oriented on the action plan. The MHM convergent action plan prepared was highly appreciated as this was the first of its kind in Bihar. The DM and DDC of both the districts showed strong commitment to implement the plan accordingly in convergence with other departments. However, they underlined the need for the capacity building training of the frontline workers and Jeevika SHG members on MHM.





Post launch of the MHHM action plan some of the departments (ICDS, Health & Education) had initiated the orientation of their staff but more such orientations are needed to be organised in all blocks for all the staff on MHHM. The actual realization of women and adolescent's girls wellbeing and health improvement can be achieved when all departments converge to promote MHHM down to their frontline workers in all blocks and Gram Panchayats.

c. Handholding support to ICDS, Health and Education department in rolling out MHM action plan in Sitamarhi and Purnia district

NAF has been providing handholding support to the ICDS, Health and the Education department in rolling out the MHM action plan in both the districts. Although the department involvement is low, they are being constantly triggered and motivated to take up issue of MHHM downline.

In Sitamarhi district with the support of education department on **07**th **July 2022**, 51 Nodal teachers from middle school of 17 blocks and 5 already trained high school nodal teachers were trained as master trainers on MHM in a one-day orientation program. Education department requested one more full day orientation program for these 51 middle school nodal teachers. Afte r training a WhatsApp group was created by team NAF where all soft copy of training modules is shared for the nodal teachers so that they can use these contents in their awareness session in schools. Most of the nodal teachers are conducting awareness sessions, MHM friendly activities among the adolescents in their respective schools. This initiative has led to the direct involvement of 57 teachers and 11400 indirect stakeholders.

Similarly, the ICDS department at Sitamarhi organized a one-day master trainers programme for CDPO & LS from all 17 blocks on 08th July 2022 where 60 participants were oriented. These 60 participants went on to disseminate MHHM issues down the line in their meetings and AWC visits. They also assured to celebrate *Mahawari Utsav* in AWCs just like the Godbharai and Annaprasan activities. This initiative has led to the direct involvement of 60 ICDS functionaries and 600 indirect stakeholders.

In Purnia district the health department organised a one-day orientation workshop on 27th July 2022 of the selected BHMs, BCMs and MOICs from all 14 blocks of Purnea. 36 participants participated in the workshop that comprised of 31 male and 05 female participants. This training might create a milestone in the history of women's period as these trained officials of health department will be a big change maker through their open talks on periods by being silence breakers & taboos fighter. They can be good guide on MHM for their subordinating working layers. This initiative has led to the direct involvement of 36 health functionaries and 360 indirect stakeholders comprising of ASHA & ANMs.







d. Training of Trainers of CLF representatives from all the blocks of both Districts

To take the MHHM action plan across all the blocks and departments in the district, one batch of Training of Trainers (TOT) was conducted by NAF in both the districts. A total of 50 participants (all female) each were trained from the two districts. The trainees comprised of

representatives from CLF, CNRP/MRP and representatives from the education department. The objective of the training was to capacitate the Jeevika senior level staff to function as Master Trainers so that they can train other CLFs in the district. The TOT was of two days, and was done in Purnea on 17th and 18th August 2021 and Sitamarhi on the 26th and 27th August 2021. To ensure accountability in the Jeevika meetings and emphasize the additional role of Master trainers for

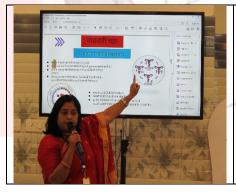


MHM the trained staffs were designated additionally as *Period Coordinators*. The TOT focussed on creating an understanding of the participants on the MHHM issues and also on monitoring and problem-solving skills to mainstream MHM agenda at the community level. In both the district to monitor and provide quick support to the team and the Period Coordinators a What's App group has been formed. The formation of the group ensured connectivity among the trained cadre of the Jeevika as well as promoted cross learning and handholding support as when required.

Refresher trainings was also organised in the 2nd phase of implementation to strengthen the learnings of the first phase and also sensitized the key stakeholders of the CLFs. The refresher training made the CLF representatives more empowered to handle and initiate dialogue on MHHM. 50 CLF members were trained at Sitamarhi district on 16th July 2022 and 50 CLF members were trained at Purnea on 22th July 2022. These already trained Jeevika cadres are being provided handholding support on a continuous basis in mainstreaming MHM agenda in their respective blocks. IEC materials and related stationeries have been provided to these group members such as the MHM calendar⁵, Apron⁶ and Vivran Pustika⁷ etc. for easy facilitation in the community and to maintain records. The NAF team constantly monitors and provides the needed support to these CLF members and the community mobilisers through the What's App group formed and through field visits in the blocks during the monthly meetings. In Sitamarhi this initiative has led to the direct involvement of 50 CLF members and 52500 indirect stakeholders while in Purnia it has involved 50 CLF members directly and 61250 indirectly women members.

The idea of capacitating CLFs in phase 1 and conducting refresher trainings in phase 2 was to further capacitate them so that they remain aware on MHHM issues and are able to reach out to VOs and SHGs. The training of the CLF members and developing them as Master Trainers on MHHM has supported the program in a big way:

- 1. CLF members are from a wider Jeevika network and their orientation has helped to reach most Jeevika members in a block
- 2. Disseminate MHHM information to large number of VO and SHG members through the monthly meetings
- 3. The training to the CLF members has helped the community mobilisers to get adequate support from them to discuss on the issue of MHHM
- 4. The training of CLF members has initiated a dialogue and discussion agenda on MHHM among the community and group meetings







⁵ MHM calendar: This module has been designed in such a way that keeps track of MHM every month and discuss in their periodic meeting

⁶ Apron: Using this MHM tool which describes the physiology of periods. This helps the CLFs and other trained cadres to easily understand and explain it to the SHGs groups, adolescent girls and women.

⁷ Vivran Pustika: This helps the cadres to keep records of their periodic meeting on MHM and outreach which is the best tracking tool at the block level of Jeevika CLF members.

The challenges and the bottle necks faced during the course of implementation were:

- There were instances when CLF members were repeatedly stopped by their peers to not discuss their personal hygiene in front of others
- Social myths, taboos and customs on menstrual hygiene has deep roots in our community, hence alienating them is a big challenge
- Jeevika's is one of the most apt platform to bring change among women and adolescent girls so, MHHM issues needs to be a regular discussion agenda in meetings at all levels. Lack of discussion and interaction on MHHM shall make them shy to discuss this issue in public and will decrease the gains achieved during the project period

e. Capacity building of Community Mobilizers of Riga & Kasba block of Sitamarhi and Purnia district respectively

Community mobilisers are an integral part of Jeevika who act as one of key human resource between the SHG members and the Jeevika system. The community mobilisers mobilises the Jeevika didis in the villages/community to act progressively towards development schemes

and awareness activities. Taking cue of the importance of community mobilisers in Jeevika, they were duly engaged and trained on MHHM activities. A three-day training of the community mobilisers was organised in both the districts where 167 & 133 members were trained in Sitamarhi & Purnia respectively. The sessions were broadly designed to explain menstrual cycle, menstrual hygiene practices, including range of menstrual products.



The myths and taboos related to menstruation were also addressed during the training. Hygienic use of pads made of cotton cloth and the method of making them were included in

the capacity building sessions of Jeevika workers to overcome the challenges of access and availability of sanitary pads. They were also oriented on the safe reuse and safe disposal of sanitary pads in the training. During the training, food habits at the onset of menstruation was also discussed. 'Poshan Ki Thali' — a source of various nutritious food items that needs to be taken in the diet was prepared and discussed with the participants. Safe



sanitation and hygiene habits that needs to be followed was also a part of the training curriculum of three days.

A Jeevika CM supervises 12 SHGs and 1 VOs. On an average she reaches 168 women. Altogether the program trained and provided handholding support to 300 Jeevika CM who further sensitized directly 50,400 SHG women and 3,000 adolescent's girls on MHM.

Refresher trainings was again provided to the Community Mobilisers during the 2nd phase in both the districts – Sitamarhi on the 6 July 2022 and Purnia on 28 July 2022 where these mobilisers were reoriented on MHHM again.







The idea of capacitating CMs in phase 1 and conducting refresher trainings in phase 2 was very critical to the programme outputs. These capacity development programme helped to further capacitate them and develop their confidence so that they are able to reach out to VOs and SHGs adequately through them. The training of the CMs and developing them as key resource persons on MHHM has supported the program in a big way:

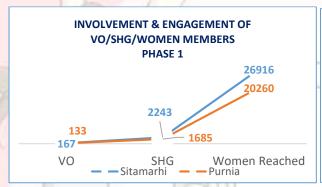
- Community Mobilisers are the frontline workers in the Jeevika chain and their awareness on MHHM has helped to reach most Jeevika members in a block
- 2. It has supported to disseminate MHHM information to large number of CLFs, VO and SHG members through the monthly meetings and community awareness drives/visits
- 3. The training to the community mobilisers has helped the CLF members and vice-versa to get adequate support to discuss on the issue of MHHM
- 4. The training of community mobilisers has opened a new dialogue and discussion agenda on MHHM among the community and group meetings

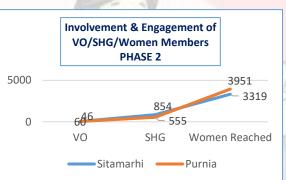
The community mobilisers used different **TLM materials** and ideas shared during the trainings such as Gajara Activity, Red-White Churi Activity, Mahawari Chakr Making, Mahawari Calendar, Oath on Mahawari, Poster Making, Red Dot Challenge, Mahawari Special Salad, Use of Apron etc. in community and VO/SHG meetings to sensitize the group members. Handholding and technical assistance was also provided to the community mobilisers by the NAF team during their meetings and community interactions. These activities done among the women members realized the need and importance of MHHM.

f. MHM awareness, hand holding support and advocacy in the selected Blocks of both the districts through monthly CLF/VO/ SHG meetings

The Village Organization and the Cluster Level Federations of Jeevika are one the pivotal points and platforms for dissemination of messages and programme implementation. To create awareness among the rural women on MHM issues, the VOs and the CLF platform has been extensively used by NAF in both the blocks of Sitamarhi & Purnia. NAF jointly conducted meetings in close coordination and association with the Jeevika CM and provided the necessary advice to strengthen the MHM advocacy and awareness among the groups. The sensitization of the CLF/VO provided an opportunity to reach directly to the community at the grassroots level. CLF/VO meeting are conducted once in a month which has supported to reinforce MHM knowledge on a regular basis and keep high the momentum of imbibing and promoting hygienic practices during menstruation. NAF supported 80 & 65 such meetings in

Riga (Sitamarhi) & Kasba (Purnia) respectively where VO members were suggested and encouraged to share the MHM knowledge regularly in periodic SHG meetings along with health & hygiene issues among women and adolescents and vaccine administration for COVID-19. In Riga itself 167 VO is operational which has helped to reach 2243 SHGs and 26916 women members in Phase 1. Similarly, in Kasba 133 VO is operational which has helped to reach 1685 SHGs and 20260 women members in Phase 1. Hand holding and technical assistance was also provided during the SHG meetings with the CM, CL & VO members where they were informed about menstrual health and hygiene issues and told to reach out to adolescents in the community. In Riga, the SHG members reached out to 53832 adolescents girls in the community while in Purnia 40532 adolescent girls were made aware on menstrual health & hygiene issues.





The SHGs and VOs representatives are important community leaders and have been motivated and capacitated to act as a catalyst in changing negative attitudes and perceptions around MHM through dialogues with the community. To sustain MHM knowledge and practices in community and to replicate this Jeevika model of strengthening MHM knowledge in the community, 5 VOs and 5 SHGs were taken up in the implementation and extensive handholding support were provided during their period meetings. These were developed as model SHGS and VOs. The training modules on 'Mahwari ki jankari' and 'Mahwari par Charcha' were used to promote personal hygiene and myth free practices among the women and girls. During these meetings the use of IEC materials and equipment such as Gajara Activity, Red-White Churi Activity, Mahawari Chakr Making, Mahawari Calendar, Oath on Mahawari, Poster Making, Red Dot Challenge, Mahawari Special Salad, Use of Apron etc. were extensively used to aware and sensitize the community members. Additionally, the thrust was also given on creating access to and promoting use of hygiene products.







g. Skill building training on Cloth pad making

During the course of implementation, a one-day skill building training was organised on making of cloth based reusable sanitary pads. This skill building training was designed for the SHG women on making of reusable menstrual products, made from fabrics that are comfortable, safe and eco-friendly. The skill on sanitary cloth pad making has been provided to 5 SHG women members in each district. Besides, providing tailoring skill it also emphasized to build social marketing strategies to promote the product and inform on menstrual health and sexual reproductive health (SRH) with the ultimate aim to break taboo and stigma around this issue. To develop the SHG members as entrepreneurs in pad making, two centres each has been open in Riga and Kasba block of Sitamarhi and Purnia district respectively. These centres are being managed by the SHG members where one sewing machine has been provided by NAF at each centres. The purchase of cotton cloths and other raw materials required are being procured by the SHG members itself. The estimated cost of one cloth pad developed comes to Rs. 4.00 and the pads are sold @ Rs. 5.00 only. Presently 5 SHG are involved in pad making in both the districts. The production of cloth pads has been linked with the 'Sanitary Napkin Banks' (Pad Banks) for distribution and use by the women and adolescent girls.



h. Establishment of Sanitary Napkin banks/Pad Banks in both the districts

Nav Astitiva Foundation in close coordination with Jeevika established 'Sanitary Napkin Banks' (Pad Banks) in both the districts. This innovative initiative of Pad Bank in the district to provide menstrual hygiene support to the poor and underprivileged women and adolescent girls have been a great act. The Sanitary Napkin Banks has been ensuring the accessibility of sanitary pads at an affordable price among the underprivileged



girls and women. 5 Pad banks were established in each of the two districts and are owned and managed by trained Jeevika CMs. The pads are priced much lower than other brands available in the market to make them affordable to all. The Sanitary Napkin Banks offers a variety of sanitary pads. The cloth made reusable pads are being produced by SHG women who had

received pad making training during the skill development program. Along with the sanitary napkins/pad, a host of other sanitary and hygiene materials are also available in these banks. The reusable cloth pads being developed by the SHG women are procured by Sanitary Napkin Centres. These Sanitary Napkin Banks then sale these pad to the women and adolescent girls upon requirement at a very cheap price of Rs. 5.00 only.

These Napkin Bank also issues passbooks in the names of the customers to maintain the record. The passbook records help the organization know if the concerned girl/woman is using the napkins or not. Thus, based on monitoring of the data collected regarding monthly usage by individuals, NAF staff also counsel those who are facing problems to afford the sanitary pads. During the counselling, the users are informed regarding the importance and benefits of using hygienic sanitary products including cotton cloth and the way to use them. Young girls are educated on menstrual cycle so that they can manage their periods well and to be prepared with menstrual absorbents before next period date. NAF has been working with large manufacturers to obtain sanitary pads in large quantities at a cheaper price too.



These 10 Sanitary Napkin Banks developed in the two districts are growing in popularity among women & adolescent girls and till now 144 women and 76 adolescents are using these services on a regular basis.

With the support of the education department, nodal teachers and the Meena Manch girls 20 Pad Banks have also been established in 10 schools in Riga and Kasba blocks of the two districts respectively. The pad banks established in these

schools are ensuring the availability of sanitary absorbent in these selected schools. Efforts are on to scale it up in other schools of the block.

i. Training of Nodal teachers and Adolescent girls of Meena Manch at schools on MHHM

Schools are an important platform to disseminate information and also create awareness among the children on related subject. The middle and the high schools has also the group of adolescent girls in them who are called as 'Meena Manch'. These Meena Manch members generally creates awareness in their families and their neighbours on various social issues such as child marriage, domestic violence, sanitation & hygiene etc. NAF used this Meena Manch and the school platform to create knowledge and awareness on MHHM. In coordination with the education department in both the districts, 25 nodal teachers of Riga block and 25 nodal teachers from Kasba block were oriented for a day on MHM. Along with the teachers 100 Meena Manch girls from both the districts were also part of the training. This training not only eliminated the misconception but also tried to break the silence around menstruation. Post training the girls opined that the training improved their knowledge on MHM and are now

empowered to manage their period safely, hygienically and with confidence. The nodal teachers trained on MHHM shared that they make people aware and discuss this issue with others when they visit child's house (if the girl child is absent from school for some days), cluster meetings and PTA meetings. The Meena Manch students also aware their other friends and family members at home and community on MHHM.





j. Observation of MH Day in both the districts

MH Day which falls on the 28th May every year was celebrated in both the districts and also in the two designated blocks to raise awareness and knowledge on MHHM. In both the year (2021 & 2022), functions were organised in coordination with the district administration and block level teams from Jeevika, Education, ICDS and Health department. Several activities were done at the district level and also at the block to create awareness, sensitize and generate a buzz around MHHM. Along with the one-day celebration activity in the district and block, a week long activity on MHHM was also done by NAF in the two blocks with the concerned departments and Jeevika team.







On the 28th May 2021, MH day was celebrated in both the districts where in addition to the celebration of MH day other activities were also done. The activities done has been highlighted in the box below:



Due to the COVID 19 pandemic and restrictions in place, the MH day was celebrated virtually in both the districts. The entire event was conducted through zoom digital platform with good participation by Jeevika in the block - Riga and Kasba, Health, Education and ICDS departments. The event directly reached out to Jeevika Didis, Anganwadi Sevikas, ASHA, and adolescent girls. The total outreach during the year 2021 on the occasion of MH Day were 1142 in which 174 people were directly reached and 968 were indirectly reached. During the year 2022 when there was relaxation in the pandemic, MH Day was celebrated physically where lots of above activities were done. During this occasion of MH Day 27328 persons were reached in which 3763 were directly reached while 23565 were indirectly reached in both the districts.

k. Development of Training Modules and IEC materials

During the implementation of the project activities several IEC materials and training modules have been developed for awareness creation and for the training purpose. The two Training Modules namely "Mahavari ke jankari badlegi dunia sari" and "Mahavari par charcha" was developed. The training module developed for providing training to the Community mobilizers informs participants about the importance of menstruation, biological process of menstruation particularly explaining the stages of menarche, menstruation and menopause; bodily changes during puberty; physiology of female reproductive organs and their functioning during pregnancy, facts and data from National Health and Family Survey; celebrating menstruation across the world, and sharing relevant case studies. In addition, it shares MHM knowledge including nutrition intake and technical aspects of environment-friendly disposal. It also underlines the accessibility of menstrual absorbents and emphasises regular saving habits to overcome the challenges of affordability of the products.

Along with the modules⁸ several IEC materials were also developed which was used to

sensitize the community and the stakeholders during meetings & trainings. The IEC materials was very beneficial and was used extensively during the inter personal communication (IPC) and focussed group discussions (FGD) by the NAF team. It is estimated that 5000 adolescent girls and boys and 2000 men have been reached out with MHM messages with the activities that has been carried out in the community. These



adolescent girls and boys along with the men have been reached through the community meetings carried out in both the district, awareness rallies, meeting held with the Jeevika CMs with adolescent girls. HH visits were also done along with Jeevika CMs and Meena Manch members for awareness and sensitization using the IEC materials. Some of the IEC materials and modules developed has been given herewith. These IEC materials are readily available and can be used for MHHM trainings and social mobilization activities. A **Shapath** (Oath) was also developed which has been extensively used during programs, meetings and campaigns to take oath by different stakeholders on MHHM.



⁸ The modules developed on MHM has been annexed as Annexure.

I. Capacity building of front line workers [ASHA, ANM, AWW, PRIs and Vikash Mitra] of key line departments

Nav Astitiva Foundation has been constantly sensitizing different stakeholders in both the districts and providing the handholding assistance. In the two blocks the frontline workers that included ASHA, ANM, AWW, PRIs and Vikash Mitra were sensitized and trained on MHM issues and developed as Master trainers. 200 frontline workers, 100 each in the two districts have been developed whom the department can use to roll out MHHM training, sensitization and awareness activities in their respective departments and field areas. The availability of sensitized ASHA, ANM, AWW, PRIs and Vikash Mitra on MHM can support mainstreaming of MHM agenda in community and spread awareness on menstruation during their community interactions. The concerned department now have the trained and sensitized manpower to reach a major part of rural women community on MHM.

11.KEY LEARNINGS & CHALLENGES

The negative impacts of a lack of good menstrual health and hygiene cut across sectors, so UNICEF, Nav Asitiva Foundation and Jeevika has taken a multi-sectoral, holistic approach in working to improve menstrual hygiene in its operations across different stakeholders. The key learnings and the challenges from the implementation in the two phases has been based on the two important criteria - 1. District level facilitation for bringing coordination and convergence among key line departments for effective menstrual hygiene management programs, 2. Strengthening SHGs to mainstream MHM agenda in their periodic meetings.

A. Learnings

The key learnings from the implementation of the project in both the districts are:

- Development of District MHHM action plan has been one of the highlights of the project but the implementation of MHHM action plan needs to be implemented by the concerned departments
- Convergence between departments increases the reach of beneficiaries and spreads awareness with greater frequency when the same messages are shared on different platforms. This needs to be strengthened
- State and District leadership is very critical to implement MHHM activities in different programs and departments
- Jeevika's reach and association with most families in a village made the dissemination and information flow much easier within a short span of time

- The Master Trainers developed for the departments (Education, Health and ICDS) needs to be engaged in facilitating trainings of other staffs and at the block and GP level functionaries
- The training of Jeevika team (CLFs and CM) developed as Master Trainers has been instrumental in taking forward MHHM agenda in community and group meetings
- The emotional attachment of Jeevika didis, women & adolescent girls on the issue of MHM, health and wellbeing made them take interest to it
- Creation of sanitary pad banks for easy availability of sanitary napkins at low rate for women and use of MKUY funds for adolescent girls can address MHHM issues
- More of SHG women can be trained on the skills of sanitary cloth pad making that can be developed as an enterprise and livelihood opportunity.
- VHSND platform can also be used to spread awareness on MHHM issues in the community.

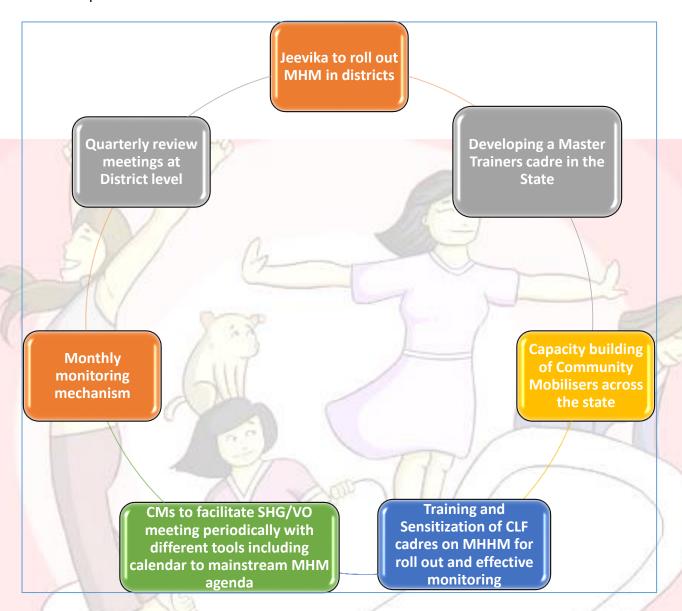
B. Challenges

- Low priority and departmental will on MHHM by concerned departments
- Government guidance to mainstream MHHM in its policy in different programs is not available
- Low education, awareness and financial capabilities among Mahadalits and vulnerable communities poses a challenge for MHHM implementation
- Social customs, traditions and taboos on menstruation still prevails in large portion of our population that hinders breaking the barriers on MHHM
- Jeevika cadres/staffs are overloaded with prior tasks that makes them less interested in taking up of another work on MHHM
- The belief of making of low cost cloth pads as an entrepreneurial activity which can serve as a business opportunity needs to be developed among the groups
- Lack of MHM friendly toilets in schools, offices & institutions
- Purchasing sanitary pads from markets is difficult for low income families having more women and adolescent girls
- Proper & safe disposal of sanitary napkins is a weak link. Awareness and appropriate measures for disposal needs to be adopted

12. SCALING UP STRATEGY

The implementation of menstrual hygiene management in both the districts has resulted in bringing a positive change in the life style of the women and girls in the project area. The males are also taking this as a major issue for the proper and healthy development of women and girls in their family. Since this was taken up as a pilot work in two districts that resulted in excellent outcomes and now it is needed to be scaled up across the districts to make people aware and sensitize on this very hush-hush subject. To scale up the MHHM interventions it is

needed to be mainstreamed into the VO and SHG meetings in Jeevika. The following strategy can be adopted:



a. Jeevika to roll out MHM in districts:

The availability of Jeevika in all the 38 districts of Bihar makes it one of the foremost institutions to roll out community level interventions benefiting their stakeholders, cadres and the community. Today Jeevika has almost 1066628 SHG, 71907 VO, 1552 CLF and 5284 PG in the districts reaching out to 12799536 populations approximately in the state. Considering the scale and outreach, Jeevika could be an appropriate platform to mainstream and promote Menstrual Hygiene Management. The Health, Nutrition and Sanitation (HNS) vertical of Jeevika also has the prime objective of better health and wellbeing of the members hence, taking up menstrual hygiene will be a stepping stone in improving the health conditions and breaking the social taboos & customs of lakhs of women of Bihar leading to their empowerment.

b. Develop a Master Trainers Cadre in the State

A team of master trainers needs to be developed that can facilitate MHHM trainings and handholding support to the district and block level cadres. The master trainers can be picked from each district and also from the state and provide them a TOT (Training of Trainers) on MHHM. These master trainers can facilitate district trainings in a cascading mode and other support activities on MHHM in the state.

c. Training and Sensitization of CLF cadres on MHHM for roll out and effective monitoring

CLF cadres are an important institution in Jeevika set up. Along with the financial prowess they possess they also command several decision making process in the SHGs. Hence, the CLF cadres in the districts needs to be trained, oriented and sensitized on the MHHM issues. The CLF cadres are mostly the representatives of VO's and SHGs from villages so these cadres post training can disseminate key messages and information to the women and adolescent girls on MHM. Trained CLF cadres can devise strategies for implementation of MHHM activities in the cluster/area and also monitor the work being done for its promotion. Jeevika can identify key CLF members from each district and those identified CLF members can also be developed as Master Trainers. These master trainers can take forward training of other CLF members in the districts on MHHM.

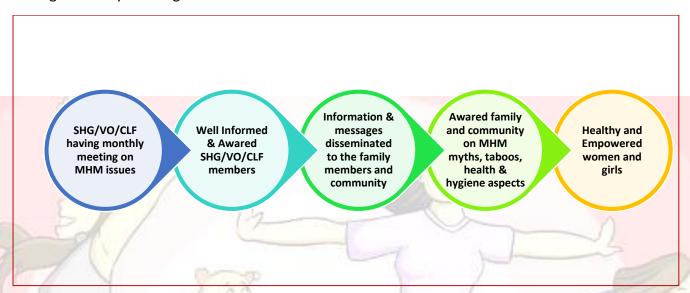
d. Training of Community Mobilisers as Master Trainers and facilitate trainings in districts in a cascading mode

A community mobilizer (CMs), is the grassroots functionary of JEEViKA and is responsible for managing 10-12 SHGs in a village. She/he is the convener of weekly SHG meetings, manages the financial books of each of the SHGs, links the groups to local banks and is the liaison of the SHGs to JEEViKA. She/he also has the upward (VO/CLF) and downward linkages too. Hence the community mobilizer is the ideal person and focal point to mainstream MHM issues in the SHG and community. To develop the community mobilizer as the point persons to deliver MHM related awareness and information to the SHG and community they are needed to be trained and oriented.

e. Mainstream MHM agenda in the monthly Jeevika meetings of CLF/VO/SHG

Another effective mechanism to scale MHM across the women and adolescent girls is to mainstream the MHM agenda in the monthly meetings of CLFs, VOs and the SHGs. The discussion on MHM in the monthly meetings will make the issue more vibrant and bring more women to raise their concern on it. CMs to facilitate SHG/VO meeting periodically with different tools including calendar to mainstream MHM agenda in its program. Different activities can be planned on MHM during the monthly meetings to create awareness among the women members and they can carry it forward to their families and community. Since

Jeevika has covered mostly all HHs in a village and one or the other member of the HH in a village are directly or indirectly associated with Jeevika hence, information dissemination and awareness creation on MHM can happen quickly. The process of information dissemination through monthly meetings has been shown in this flow chart below.



During the course of implementation several IEC materials and TLMs have been developed which can be used extensively to discuss on MHM issues during the monthly meetings, community meetings and discussions. If mainstreaming of MHM is introduced it will act as boon for the millions of women and adolescent girls of Bihar on their reproductive health and wellbeing.

f. Training of CLF cadres/SHG women on Sanitary Pad production

The Jeevika is a women's organisation and has its spread in all the blocks of 38 districts. If the development of cloth pads by some CLFs can be initiated in select districts, it can support lakhs of women to avail sanitary pads at a very low cost. We have observed that during the COVID pandemic, the masks prepared by Jeevika SHGs were so helpful in providing the population a beautiful and low cost mask. The masks not only provided safety to the users but also generated lots of business opportunity for the SHGs. Similarly, sanitary pad making will also support lots of poor women and adolescent girls with cloth pads who can't afford high cost market pads. This will also lead to a substantial business opportunity for the SHGs too. Hence, training on cloth pad making, pad production and maintaining the sanitary standards etc. if taken up as an enterprise development will support many SHG members and groups.

12.1 Availability of Training Package, IEC and Learning Materials

Good menstrual hygiene management (MHM) plays a fundamental role in enabling women, girls, and other menstruators to reach their full potential. NavAstitva Foundation has facilitated several trainings of the Jeevika and the government functionaries to mainstream MHHM across both the districts. The organisation has developed different training modules

for different stakeholders and several IEC materials that can be used in scaling up the strategy across. These training modules and materials are readily available and can be used for training purpose. Some of the resource materials available for different stakeholders have been listed herewith:

1. Training of Community Mobilisers

Community mobilisers are an integral part of Jeevika who act as one of key human resource between the SHG members and the Jeevika system. A three-day training of the community mobilisers was organised in both the districts and refresher training was also done in the 2nd phase of implementation. The module of the training along with the IEC materials developed and used in the training were:

- Training module for CM on MHHM
- Pre & Post Questionnaire
- Mahawari Ki Jaankari Badlegi Saari Jaankari
- Charcha Mahwari Ki
- Myths and Facts of Menstruation
- Seekh Pate Ki
- MHM Cards: Brief Information on Periods
- Weekly Activity Calendar on MHM
- MHHM Oath
- Poster on MHM Awareness
- Poster on Mahawari Charcha

2. Training of CLF Members

CLF cadres are an important institution in Jeevika set up. Along with the financial prowess they possess they also command several decision making process in the SHGs. Hence, the CLF cadres in the districts needs to be trained, oriented and sensitized on the MHHM issues. In both the district, CLF members were trained for two days using the training module and IEC materials developed by the organisation. The materials developed and used for the training are:

- Training module for CLF members on MHM
- Pre & Post Questionnaire
- Menstrual Hygiene Management Calendar
- Use of MHM Apron
- The Period Book
- Poster on Mahawari Charcha
- Poster on MHM Awareness
- Vivran Pustika Record of Activities & Meetings
- Pad Bank Register & Passbook

3. Training of SHG Members

The SHGs of Jeevika are one the pivotal points and platforms for dissemination of messages and programme implementation. To create awareness among the rural women on MHM issues, the SHG platform has been extensively used by NAF in both the blocks of Sitamarhi & Purnia. NAF conducted sensitization workshops and meetings with the SHG members to spread awareness on MHM and sensitize the women members. In both the district, SHG members were trained for one day using the training module and IEC materials developed by the organisation. The materials developed and used for the training are

- Seekh Pate Ki
- MHM Cards: Brief Information on Periods
- Weekly Activity Calendar on MHM
- Poster on MHM Awareness
- Poster on Mahawari Charcha
- MHHM Oath

13. Recommendations

The MHHM interventions in both the districts have been implemented with the support of the district administration, government departments, Jeevika and UNICEF was bringing a positive change in the socio and behavioural aspects in the targeted people and the community. Since this was done at a very small scale, the outputs were really encouraging and positive. Some of the key recommendations from the experience of the implementation are

- Sensitization and Orientation of departmental staff such as Health, Social Welfare, Education, ICDS, RDD etc. on MHHM to be done on a regular basis
- ♣ It is recommended to integrate or strengthen the MHM agenda in the existing programs of the departments and can be achieved through building capacities of their staffs and frontline workers on MHM so that the program reaches out to the last mile
- A **nodal department (RDD-Jeevika)** may take the lead in promoting and encouraging MHHM in the state
- Jeevika having its presence in all villages of all the 38 districts needs to develop and promote MHHM awareness in their CLF, VO and SHG meetings. Mainstream MHHM agenda in the regular meetings of the groups
- Develop a cadre of Master Trainers on MHHM to capacitate the stakeholders down the line
- MHHM monitoring and review at the district level can support the program and the wellbeing of women and adolescent girls

- Special focus for improving MHM practices in the vulnerable communities, minorities, mahadalit communities (mushahar communities in Bihar), migrating groups and daily wage workers etc. through capacitating the responsible cadres
- Awareness drives and events on MHHM needs to be organised on a regular basis so that it becomes a point of discussion and people feel free to talk on it
- ♣ Facilitating the availability of sanitary napkins and other relevant products by establishing adequate sanitary napkin banks/Pad bank through SHGs or trained resource persons is recommended. Schools can be mobilized to ensure the availability of sanitary napkins at a low cost so that the students can use the support price received for purchasing sanitary napkins through Mukhya Mantri Kanya Uthhan Yojna etc.
- Along with the promotion of sanitary pads, the disposal of the used sanitary pads needs to be focussed. Safe disposal of sanitary pad needs to be ensured through awareness using various platforms

14. Conclusion and Way Forward

The MHHM interventions in both the districts went well with the support from the district administration, block administration and the Jeevika team. The interventions facilitated has sensitized lot of women and men in both the districts. During the course of implementation, it was understood that Interdepartmental collaboration and convergence is significant to mainstream MHM at the community level. It is also recommended to integrate or strengthen the MHM agenda in the existing programs of the government departments focussing gender and equity. It can be achieved through building the capacities of their staffs and frontline workers as Master Trainers and community level resource persons on MHM so that the program reaches out to the last mile. Jeevika is the appropriate platform for the roll out of this MHHM agenda in the entire state as it comprises of women groups, has a proper and efficient management and monitoring system and more important it has the capacity and experience to implement community based projects focussing on improving the health and hygiene of women in the community. Approximately 48% of the population as per Census 2011 are female so, taking up of menstrual hygiene by the government departments will certainly benefit the women and the adolescents to lead a healthy life. The availability of sanitary pads is also very critical to the women and adolescents hence, the SHG members gets into the business of preparing sanitary cloth pads will certainly fetch them with ample livelihood opportunity and will also have a direct impact on the health of women and adolescents.

15. Annexures

Annexure 1: Human Interest Stories

a. Breaking the Social Taboos & Traditions:

नामः उषा कुमारी ब्लाकः रुपौली जिला : पूर्णिया

मेरा नाम उषा कुमारी है मैं रुपौली ब्लॉक में जीविका की जननी सीएलएफ की HNS हूं और जीविका में मैं 2019 से काम कर रही हूं एक बार मैं अपनी भगिनी के घर गई थी | मेरी भगिनी का नाम जूही कुमारी है वह 18 से 19 साल की है | मैंने उसको शाम में पूजा करने के लिए कहा उसने कहा कि वो पीरियड हुए हैं और पूजा पाठ नहीं करेंगी | तब मैंने उसको बताया कि मेरा नव अस्तित्व फाउंडेशन एवं यूनिसेफ बिहार की तरफ से 2 दिन का महावारी स्वच्छता प्रबंधन पर ट्रेनिंग हुआ था | उस ट्रेडिंग में हमको बताया गया था कि पहले के समय जब महिलाओं को पीरियड होता था तो उस समय पैड या कपड़े का उस तरीके से प्रबंध नहीं था और मंदिर बह्त ऊंचे ऊंचे स्थान पर होते थे, जिसके कारण महिलाएं जब वहां पर पूजा करने आती थी माहवारी के समय खून की स्गंध से हिंसक जानवर उन महिलाओं पर हमला कर देते थे | तब माहवारी के समय महिलाओं को पहाड़ पर या ऊँचे स्थान पर मंदिर में जा कर पूजा करने को मना किया गया था और उनको घर पर रहकर ही पूजा-पाठ करने को कहा जाता था । पर इस प्रकार समाज में गलत परंपरा बना दी गई कि यदि लड़की या महिला को माहवारी होगी तो वह उस समय पूजा पाठ नहीं कर सकती है | मैंने उनको बताया कि आप पूजा पाठ कर सकते हो माहवारी एक प्राकृतिक प्रक्रिया है, इसी माहवारी के खून से हमें संतान की प्राप्ति होती है, तो यह खून अशुद्ध कैसे हो सकता है | मेरे समझाने पर उसने एक दिन मंदिर में पूजा किया पर नानी को पता चला तो नानी ने उसको पूजा करने से मना कर दिया । तब मैंने उनको अपनी ट्रेनिंग में हुई सभी बातों को बताया और मैंने कहा यदि छठ पर्व पर आप माहवारी हो जाते हैं तो क्या आप छठ पर्व नहीं करिएगा, जो कि एक महापर्व है | तब नानी ने कहा कि हां हम लोग छठ करेंगे हम लोग छठ कैसे छोड़ सकते हैं | तब मैंने नानी से कहा यह तो छोटी मोटी रोज की पूजा है तो आप यह पूजा को क्यों नहीं कर सकते हैं | पर मेरे समझाने पर भी वह नहीं समझी और कहा कि तुम हमको बता रही हो कि माहवारी के समय पूजा कर सकते हैं पर तुम खुद तो नहीं करती होगी मैंने उनको कहा कि पहले माहवारी के समय मैं भी पूजा नहीं करती थी पर जब से मैं ट्रेनिंग लेकर आई हूं और मुझे सही जानकारी प्राप्त हुई है तब से मैं माहवारी के समय भी अपने घर के मंदिर में हर प्रकार की पूजा पाठ करती हूं | इस बार जब मुझे महावारी आई तो मैंने नानी और भगिनी दोनों को ही बताया कि मुझे माहवारी आई है और मैं अपने घर के मंदिर में पूजा कर रही हूं वह आकर देख सकती हैं | उन्होंने देखा कि अरे इसको तो महावारी आई हुई है और यह अपने घर में पूजा पाठ सब करती है, तब वह लोग समझ गई और मेरी भगिनी भी यह देखकर अपने घर की मंदिर में महावारी आने के बाद भी पूजा पाठ करने लगी | जैसे मैंने ट्रेनिंग लेने के बाद अपने जीवन से भ्रम और भ्रांति को हटाया और मेरे समझाने के बाद मेरी भगिनी ने भी अपने जीवन से माहवारी को लेकर भ्रम और भ्रांति को हटाया है ठीक इसी प्रकार में अपने समूह में, परिवार में और समुदाय में महावारी स्वच्छता प्रबंधन को लेकर और इसकी भ्रम भ्रांतियों को लेकर प्रत्येक महिला और लड़की को जागरूक करती रहंगी।

a.1 Profile Photo and Consent Form of Usha Kumari



NAME :- USHA KUMARI
POST:- HNS JEEVIKA
BLOCK:- RUPOLI
DISTRICT:- PURNEA

(सम्पादकीय) व्यक्ति अनुमति फॉर्म (नमूना) युनिसेफ – संयुक्त राष्ट्र बाल कोष फोटाग्राफी व्यक्ति अनुमति फॉर्म

(यह अनुमित व्यवसायिक उपयोग के लिए नहीं है) इस अनुमित फॉर्म पर हस्ताक्षर करके में एतद्द्वारा संयुक्त राष्ट्र बाल कोष (युनिसेफ) को यह अधिकार देता/देती हूं कि वह शांति, सहनशीलता और बच्चों के अधिकारों को बढ़ावा देने के उद्देश्य से नीचे वर्णित फोटोग्राफ में दिखाए गए मेरे प्रतिरूप को किसी भी पारम्परिक या इलैक्ट्रॉनिक मीडिया प्रारूप में दोबारा तैयार, प्रदर्शित या प्रचारित कर सकता है। यह फोटोग्राफ युनिसेफ की सम्पत्ति हैं।

मेरे प्रतिरूप वाले ये फोटोग्राफ (तारीख) <u>a ि।।।२२</u> को (शहर/देश का नाम सहित जगह) को में प्रकाश हारा (फोटोग्राफर का नामें खींचे गए। मैं यह भी पुष्टि करता करती हूंयह चित्र मेरा सच्चा प्रतिरूप है और इन्हें मेरी पूरी जानकार में और मेरी सहमित से खींचा गया है।

उधा <u>भूभारा</u> ग्रिश्च । १८१० | १८१० । १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० | १८१० |

यदि व्यक्ति की आयु 18 वर्ष से कम है मैं पुष्टि करता/करती हूं कि मैं उपर्युक्त बच्चे का/की वैद्य अभिमावक हूं, अतः बच्चे की ओर से इस व्यक्ति अनुमति के जिए स्वीकृति देता/देती हूं।

कानूनी अभिभावक का नाम/बच्चे से संबंध	तिथि	अभिभावक के हस्ताक्षर
गवाह का नाम/ संम्बद्ध संगठन का नाम	तिथि	गवाह के हस्ताक्षर

नाम- दिनेश कुमार पता:- योगवाना मध्य विद्यालय योगवाना प्रखण्ड-रोगा, जिला- सीतामढ़ी

मेरा नाम दिनेश कुमार है। मैं प्रखण्ड रीगा मध्य विद्यालय योगवाना का प्रधानाचार्य हूँ। मैं अपने स्कूल के कार्य के प्रति हमेसा तत्पर रहता हूँ। ताकि हमारे स्कूल के बच्चों को भी अच्छी सीख मिले। क्योंकि जैसा स्कूल के शिक्षक व्यवहार रखेंगे वैसा ही बच्चे भी सीखते है। लेकिन माहवारी एक ऐसा विषय है जिसपे कोई भी खुल कर बात नहीं करना चाहता है। हमारे स्कूल मे भी बच्चियाँ इस विषय से झिझक करती थी। क्योंकि स्कूल के शिक्षक भी उनसे इस विषय पर बात नहीं करते थे। ना वो लोग अपने घर मे खुलकर बात की क्योंकि इस विषय को शुरू से ही कोई महत्व नहीं दिया गया। हमारे घर की भी महिलाएं छपकर बात करती थी कही घर के प्रूष न स्नले। बहुत शर्म और झिझक का ये विषय मानते थे। और पुरुष भी यही समझते है की ये सिर्फ महिलाओं का ही विषय है इसलिए पुरुष भी ज्यादातर इसको नजर अंदाज करते है। लेकिन जबसे नव अस्तित्व फ़ाउंडेशन के द्वारा बच्चियों से स्कूल का मॉडल बनवाया गया, उनके द्वारा प्रशिक्षण दिया गया, माहवारी से संबन्धित सारी जानकारी दी गयी तभी से माहवारी शर्म का नहीं बल्कि गर्व का विषय है। स्कूल के मॉडल को माहवारी दिवस के अवसर पर सीतामढ़ी में पेश किया गया। उप विकास आयुक्त श्री विनय कुमार के द्वारा स्कूल के मॉडल विजेता को सम्मानित किया गया। वहाँ और भी स्कूल के मॉडल थे लेकिन हमारे स्कूल के मॉडल को सम्मानित किया गया और नव अस्तित्व फ़ाउंडेशन के द्वारा उपहार स्वरूप पैड वेंडिंग मशीन दिया गया जिसमे बच्चियाँ पाँच रुपये डालकर अपने लिए एक पैड ले सकती है और स्कूल मे इस्तेमाल कर सकती है। इस वजह से बच्चियों का मनोबल भी बढ़ा। इससे बच्चियों को लगा की माहवारी शर्म नहीं बल्कि गर्व का विषय है। अब तो स्कूल मे सप्ताह मे एक दिन नोडल शिक्षिका के द्वारा बच्चियो को माहवारी के ऊपर शिक्षा दी जाती है और बच्चियाँ भी अब बेझिझक बात करती है।

b.1 Profile Photo and Consent Form of Dinesh Kumar



NAME:- DINESH KUMAR

POST:- TEACHER

VILLAGE:- YOGWANA

BLOCK:- RIGA

DISTRICT:- SITAMARHI

(सम्पादकीय) व्यक्ति अनुमति फॉर्म (नम्ना) युनिसेफ - संयुक्त राष्ट्र बाल कीष फोटागाफी व्यक्ति अनुमति फॉर्म (यह अनुमति व्यवसायिक जपयोग के लिए नहीं है) इस अनुमति फॉर्म पर हस्ताक्षर करके मैं एतद्द्वारा संयुक्त राष्ट्र बाल कोष (युनिसेफ) को यह अधिकार देता / देती हूं कि वह शांति, सहनशीलता और बच्चों के अधिकारों को बढ़ावा देने के उद्देश्य से नीचे वर्णित फोटोग्राफ में दिखाए गए मेरे प्रतिरूप को किसी भी पारम्परिक या इलैक्ट्रॉनिक मीडिया प्रारूप में दोबारा तैयार, प्रदर्शित या प्रचारित कर सकता है। यह फोटोग्राफ युनिसेफ की सम्पत्ति हैं। मेरे प्रतिरूप वाले ये फोटोग्राफ (तारीख) 19/19/19 को (शहर/देश का नाम सहित जगह). में द्वारा (फोटोग्राफर का नामें खींचे गए। मैं यह भी पुष्टि करता / करती हूं यह चित्र मेरा सच्चा प्रतिरूप है और इन्हें मेरी पूरी जानकार में और मेरी सहमति से खींचा गया है। Diresh Kumar 19/12/2000 व्यक्ति का नाम आयु (यदि 18 वर्ष से कम है) तिथि हस्ताक्षर पता व सम्पर्क के लिए अन्य सूचना यदि व्यक्ति की आयु 18 वर्ष से कम है मैं पुष्टि करता / करती हूं कि मैं उपर्युक्त बच्चे का / की वैध अभिभावक हूं अतः बच्चे की ओर से इस व्यक्ति अनुमति के जिए स्वीकृति देता/देती हूं। कानूनी अभिमावक का नाम / बच्चे से संबंध तिथि अभिभावक के हस्ताक्षर गवाह का नाम/ संम्बद्ध संगठन का नाम तिथि गवाह के हस्ताक्षर

नामः पारवती कुमारी
प्रखंडः कसबा
पंचायतः घोरदौर
माहवारी वाली गुल्लक



पूर्णिया जिला के कसबा प्रखंड के घोरदौर पंचायत में जीविका एवं नव अस्तित्वा फाउंडेशन द्वारा महिलओं एवं किशोरियों के बीच जीविका समूहों एवं ग्राम संगठनों के माध्यम से माहवारी स्वच्छता प्रबंधन की जानकारी पहुचाने का कार्य किया जा रहा है माहवारी स्वच्छता प्रबंध | न की जानकारी पहुचाने के लिए सत्यम जीविका महिला संकुल स्तरीय संघ ,पंचायत मलहरिया 4 गढ़बनैली के अंतर्गत आने वाले , कम्युनिटी मोबिलाइजर को 50 लखना और बोचगांव में जीविका परियोजना के कार्यरत ,घोड़दौर प्रशिक्षण के बाद कम्युनिटी मोबिलाइजर प | प्रशिक्षित किया गया है।वंती कुमारी माहवारी के दौरान पैड एवं अन्य सामानों पर होने वाले खर्च के लिए खुद गुल्लक में सिक्के जमा करने लगी एवं समूह के दीदियों को भी इसके लिए जागरूक करने लगी |

पार्वती कुमारी के परिवार में कुल इनके परिवार की आर्थिक स्थित कमजोर है | महिला सदस्य है 5 प्रत्येक माह इनके घर में माहवारी | छोटे का खर्च के लिए भी सोचना पड़ता है-घर के कई छोटे | से 50 स्वच्छता हेतु₹-कभी | के बीच माहवारी में इस्तेमाल होने वाले बेड पर खर्चा हो जाता है 250 | कभी तो पैसे के अभाव में इसे खरीदना भी मुश्किल हो जाता है

कुछ माह पहले नव अस्तित्व फाउंडेशन द्वारा माहवारी स्वच्छता प्रबंधन पर दिए गए प्रशिक्षण में बताया गया कि किस तरह से छोटीछोटी बचत करके प्रत्येक महीने होने वाले खर्च को पूरा किया जा सकता - "माहवारी के दौरान | हैमहावारी वाली गुल्लक" के बारे में बताया गया कि परिवार के लोग मिलकर प्रत्येक महीने इसमें छोटे एवं 1,2 छोटे बचत कर के जैसे-₹का सिक्का को गुल्लक में डालकर बचा 5 प्रशिक्षण समाप्ति उपरांत पार्वती कुमारी अपने घर आकर | कर इस खर्च को कैसे पूरा कर सकते हैं एवं 2 ,1 महावारी गुल्लक को अपने घर में बनाई और₹का सिक्का बचाकर इस मे 5ं डालने लगी | इस तरह प्रत्येक माह बचत करके पार्वती कुमारी अपनी | समूह में दीदियों को भी इसके बारे में बताई इस बचत से पार्वती कुमारी के परिवार के | माहवारी में होने वाले खर्च को आसानी से उठा रही है बचत से | लिए महावारी के लिए खर्च उठाना और भी आसान हो गया है माहवारी के दौरान इस्तेमाल होने वाले पैड के अलावा अन्य सामान भी खरीद पा रही है वह समूहों के बैठक में जीविका दीदियों | को भी महावारी गुल्लक के बारे में विस्तार से बता कर महावारी स्वच्छता के बारे में जागरूक कर

c.1 Profile Photo of Parvati Kumari and Consent Form



NAME:- PARWATI KUMARI

POST:- CM JEEVIKA

VILLAGE:- GHORDHOR

BLOCK:- KASBA

DISTRICT:- PURNEA

(सम्पादकीय) व्यक्ति अनुमित फॉर्म (नमूना)
युनिरोफ — संयुक्त राष्ट्र बाल कोष
फोटागफी व्यक्ति अनुमित फॉर्म
(यह अनुमित व्यवसायिक उपयोग के लिए नहीं है)
इस अनुमित कॉर्म पर हस्ताक्षर करके में एतद्द्वारा संयुक्त राष्ट्र बाल कोष (युनिरोफ) को यह
अधिकार देता / देती हूं कि वह शांति, सहनशीलता और बच्चों के अधिकारों को बढ़ावा देने के
उद्देश्य से नीचे वर्णित फोटोग्राफ में दिखाए गए मेरे प्रतिरूप को किसी भी पारम्परिक या
इतैक्ट्रॉनिक मीडिया प्रारूप में दोबारा तैयार, प्रदर्शित या प्रचारित कर सकता है। यह फोटोग्राफ
उनिरोक की सम्पत्ति हैं।
मेरे प्रद्विरूप वाले ये फोटोग्राफ (तारीख) 16/11/2-2 को (शहर/देश का नाम सहित जगह) 2007 का
निर्मेशक हारा (फोटोग्राफर का नामें खींचे गए। मैं यह भी पुष्टि करता/करती ह्यह बित्र नेस
सच्चा प्रतिरूप है और इन्हें मेरी पूरी जानकार में और मेरी सहमित से खींचा गया है।

पार्वी क्रमारी (1989) 16/11/2% Poade Morron व्यक्ति का नाम आयु (यदि 18 वर्ष से कम है) तिथि हस्साक्षर

पता व सन्पर्क के लिए अन्य सूचना

यदि व्यक्ति की आयु 18 वर्ष से कम हैं मैं पुष्टि करता/करती हूं कि मैं उपर्युक्त बच्चे का/की वैध अभिभावक हूं, अतः बच्चे की ओर से इस व्यक्ति अनुमति के जिए स्वीकृति देता/देती हूं।

कानूनी अभिनायक का नाम/बच्चे से संबंध विश्वि अभिभायक के हस्साक्षर गयाह का नाम/ सन्बद्ध संगठन का नाम विश्वि गयाह के हस्साक्षर

नाम- विभा देवी पता:- संग्राम फँदह, रीगा प्रखण्ड- रीगा, जिला- सीतामढ़ी

मेरा नाम विभा देवी है। मैं जीविका मे CM के पद पर कार्य करती हूँ। मैं प्रखण्ड रीगा गाँव संग्राम फँदह की रहनेवाली हूँ। मैं चौदह समूह को देखती हूँ। मैं ग्रामीण क्षेत्र की रहनेवाली हूँ। हम जीविका मे काम करते है तो इसमे भी स्वास्थ्य से संबन्धित ट्रेनिंग हमलोग को दी जाती है। लेकिन कभी भी माहवारी से संबन्धित कोई ट्रेनिंग नही मिली और हमलोग भी इस विषय पर बात नहीं करते थे। नव अस्तित्व फ़ाउंडेशन के द्वारा जब पहला ट्रेनिंग दिया गया था। तो उस समय हम छुट्टी पर थे। हम अपने मायके गए हुए थे। इस वजह से पहला ट्रेनिंग तो हम नहीं ले पाये थे। लेकिन ज्योति दीदी हमारे समूह के मीटिंग मे आती थी तो माहवारी पर चर्चा करती थी। तो थोड़ा बह्त जानकारी उनसे मिली। लेकिन जब दूसरा बार ट्रेनिंग हुआ सारे CM का तो हम उसमे थे। मैम के द्वारा बहुत सारा जानकारी मिला। फिर उसके बाद हम अपने समूह मे बात करने लगे। ज्योति दीदी माहवारी पर कुछ बताती थी तो समूह की दीदी लोग पाँच मिनट स्नती भी थी। लेकिन जब ज्योति दीदी नहीं आती थी तो हम खुद से बताते थे तो दीदी लोग सुनती भी नहीं थी। तब हम क्या करने लगे की पहले समूह मे चर्चा ही करने लगे की दीदी लोग कुछ देर बैठ कर सुने। उसके बाद समूह के बचत का काम करते थे। इस वजह से दीदी लोग कुछ देर बैठ कर बात करने लगी। धीरे - धीरे दीदी लोग का भी झिझक खत्म होने लगा। कुछ दीदी ऐसी है जिनको अभी भी झिझक होता है माहवारी पर बात करने में फिर भी उनको समझाते है की दीदी ये हमारे स्वास्थ्य से जुड़ा है इसमे शर्म का क्या बात है। क्या कोई समस्या होता है तो हमलोग से नहीं बताते है? क्या डॉक्टर से शर्माते है ? बस वैसे ही खुल कर आपस मे बात कीजिए। क्योंकि माहवारी से ही तो एक महिला का अस्तित्व है। अगर ये न हो तो स्त्री कभी माँ नहीं बन सकती है। इसलिए अपने बहु या बेटी या समूह की दीदी से ही खुलकर बात कीजिये। मेरी भी चूप्पी टूटी है इस विषय पर अब आपलोग भी चूप्पी तोड़े क्यूकी माहवारी शर्म नहीं गर्व का विषय है। अब तो कुछ दीदी को या उनके घर के बेटियों को माहवारी संबन्धित कोई समस्या होती है। तो वो मुझसे बात करती है। धीरे-धीरे और दीदी लोग का भी चूप्पी टूट जाएगा। हमलोग कोशिश मे लगे हुए है।

d.1 Profile Photo of Vibha Devi and Consent Form



NAME:- BIVHA DEVI

POST:- CM JEEVIKA

VILLAGE:- SANRAMFANDA

BLOCK:- RIGA

DISTRICT:- SITAMARHI

(सम्पादकीय) व्यक्ति अनुमति फॉर्म (नमूना) युनिसेफ – संयुक्त राष्ट्र बाल कोष फोटाग्राफी व्यक्ति अनुमति फॉर्म

(यह अनुमित व्यवसायिक उपयोग के लिए नहीं है)

इस अनुमित फॉर्म पर हस्ताक्षर करके मैं एतद्द्वारा संयुक्त राष्ट्र बाल कोष (युनिसेफ) को यह अधिकार देता / देती हूं कि वह शांति, सहनशीलता और बच्चों के अधिकारों को बढ़ावा देने के उद्देश्य से नीचे वर्णित फोटोग्राफ में दिखाए गए मेरे प्रतिरूप को किसी भी पारम्परिक या इलैक्ट्रॉनिक मीडिया प्रारूप में दोबारा तैयार, प्रदर्शित या प्रचारित कर सकता है। यह फोटोग्राफ यनिसेफ की सम्पत्ति है।

मेरे प्रतिरूप वाले ये फोटोग्राफ (तारीख) 10.12.902... को (शहर/देश का नाम सहित जगह)...... में......द्वारा (फोटोग्राफर का नामें खींचे गए। मैं यह भी पुष्टि करता/करती हूंयह चित्र मेरा सच्चा प्रतिरूप है और इन्हें मेरी पूरी जानकार में और मेरी सहमति से खींचा गया है।

विमा हैनी

13:12.2022

Ado Dai

व्यक्ति का नाम

आयु (यदि 18 वर्ष से कम है)

तिथि

हस्ताक्षर

पता व सम्पर्क के लिए अन्य सूचना

यदि व्यक्ति की आयु 18 वर्ष से कम है

में पुष्टि करता / करती हूं कि मैं उपर्युक्त बच्चे का / की वैध अभिभावक हूं, अतः बच्चे की ओर से इस व्यक्ति अनुमति के जिए स्वीकृति देता / देती हूं।

कानूनी अभिभावक का नाम/बच्चे से संबंध तिथि अभिभावक के हस्ताक्षर गवाह का नाम/ संम्बद्ध संगठन का नाम तिथि गवाह के हस्ताक्षर नाम- पूजा कुमारी प्रखण्ड- बी. कोठी, जिला- पूर्णिया

मेरा नाम पूजा कुमारी है। मैं बी. कोठी प्रखंड के सीएलएफ चांदनी में 2020 से जीविका में सी एन आर पी पद पर काम कर रही हूं। मेरा कार्य है स्वास्थ्य से संबंधित सभी विषयों पर जीविका दीदियों के समूह में और बैठकों में जाकर जागरूक करना एक | दिन मैं एक SHG के बैठक में गई हुई थी वहा सभी दीदी बैठी हुई थी ,मैं माहवारी स्वच्छता प्रबंधन ट्रेनिंग में मिले सामान को लेकर गई थी | उनमें से एक दीदी ने मेरे पास पड़े सभी किताबों को मीटिंग खत्म होने के दौरान पढ़ने लगी और उन्होंने कहा कि आप थोड़ा रुक कर जाइएगा, तो हम मीटिंग के बाद वहां पर दीदी के आंगन में रुक उसके बाद दीदी हमारे पास आई और उन्होंने कहा कि मेरी एक समस्या है जो मैं आपको बताना चाहती हूं | उन्होंने कहा कि मेरी एक बेटी है वो 15 साल की हो गए हैं और अभी तक माहवारी उसको नहीं आई है | मैंने उनकी बातो को सुना क्योंकि मैं नव अस्तित्व फाउंडेशन एवं यूनिसेफ बिहार से माहवारी स्वच्छता प्रबंधन पर तीन बार ट्रेनिंग ले चुकी हूं और इस विषय में मुझे बहुत अच्छे से पता था कि दीदी को क्या सलाह देनी है। मैंने दीदी को बताया कि हर लड़की को माहवारी आने की उम्र सीमा 9 से 16 साल होती है और अभी आपकी बेटी को 15 साल हुए हैं। यदि आपको फिर भी लगता है कि उसको महावारी अभी तक नहीं आई है तो आप एक काम कर सकती हैं ।आप इसके लिए डॉक्टर से संपर्क कर सकते हैं, यदि डॉक्टर आपको कुछ सलाह देते हैं तो आप हमको भी बताईये | दीदी को सलाह देकर हम वहां से चले गए कुछ दिनों के बाद हम बैठक करने के लीये उसी SHG में गए तो मैंने दीदी से बात की और कहा क्या आपने अपनी बेटी को डॉक्टर से दिखाया है तो उन्होंने कहा कि दीदी आपके बताने के बाद मैंने अपने घर परिवार में बात की और सब ने मन बनाया कि हां एक बार हम इनको डॉक्टर को दिखा सकते हैं पर देखिए हम लोगों को डॉक्टर के पास जाना ही नहीं पड़ा क्योंकि मेरी बेटी को माहवारी आ गई। तब मैंने उन्हें समझाया कि मैंने आपको कहा था 9 से 16 साल की वर्ष तक माहवारी आती है पर फिर भी आप बह्त ज्यादा चिंतित लग रही थी इसलिए मैंने कहा कि आप डॉक्टर को दिखा दीजिए पर अब उसको माहवारी आ गई है तो अच्छी बात है आप माहवारी के समय साफ,सफाई का किस प्रकार ध्यान रखना है- खानप-ान का क्या ध्यान रखना है, यह सब मैंने आपको बैठक में बताया ही है। तो आप अपनी बेटी से इस बात पर जरूर से चर्चा करिएगा तब दीदी ने सुनकर हां कहा और मुस्कुरा कर चली गई।

e.1 Profile Photo of Puja Kumari and Consent Form



NAME:- PUJA KUMARI

POST:- CNRP JEEVIKA

BLOCK:- B.KHOTHI

DISTRICT:- PURNEA

(सम्पादकीय) व्यक्ति अनुमति फॉर्म (नमूना) युनिसेफ – संयुक्त राष्ट्र बाल कोष फोटाग्राफी व्यक्ति अनुमति फॉर्म

(यह अनुमित व्यवसायिक उपयोग के लिए नहीं हैं) इस अनुमित फॉर्म पर हस्ताक्षर करके में एतद्वारा संयुक्त राष्ट्र बाल कोष (युनिसेफ) को यह इस अनुमित फॉर्म पर हस्ताक्षर करके में एतद्वारा संयुक्त राष्ट्र बाल कोष (युनिसेफ) को यह अधिकार देता / देती हूं कि वह शांति, सहनशीलता और बच्चों के अधिकारों को बढ़ावा देने के अधिकार देता / देती हूं कि वह शांति, सहनशीलता और बच्चों के अधिकारों को बढ़ावा देने के उद्देश्य से नीचे वर्णित फोटोग्राफ में दिखाए गए मेरे प्रतिरूप को किसी भी पारम्परिक या इलैक्ट्रॉनिक मीडिया प्रारूप में दोबारा तैयार, प्रदर्शित या प्रचारित कर सकता है। यह फोटोग्राफ

युनिसेफ की सम्पत्ति हैं।
भरे प्रतिरूप वाले ये फोटोग्राफ (तारीख) को प्रहर वेश का नाम सहित जगह) को प्रहर वेश करता / करती हूं यह चित्र मेरा सच्चा प्रतिरूप है और इन्हें मेरी पूरी जानकिए में और मेरी सहमित से खींचा गया है।

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प्राचा भागारी		02/11/2022	पुजा कुमारी	
व्यक्ति का नाम	आयु (यदि 18 वर्ष से कम है)	तिथि	हस्ताक्षर	

पता व सम्पर्क के लिए अन्य सूचना

यदि व्यक्ति की आयु 18 वर्ष से कम हैं मैं पुष्टि करता/करती हूं कि मैं उपर्युक्त बच्चे का/की वैध अभिमावक हूं अतः बच्चे की ओर से इस व्यक्ति अनुमति के जिए स्वीकृति देता/देती हूं।

कानूनी अभिभावक का नाम/बच्चे से संबंध	तिथि	अभिभावक के हस्ताक्षर
गवाह का नाम/ संम्बद्ध संगठन का नाम		गवाह के हस्ताक्षर

नाम ओनिमा कुमारी -: पता -:बरैटा, कसबा प्रखण्ड- कसबा,जिला -पूर्णिया

निस्तारण का सही तरीका

निस्तारण का सही तरीका मेरा नाम ओनिमा कुमारी है और मैं जीविका मे पिछले तीन सालो से बरैटा मे CM पद पर काम करती आई हूँ | मैं 12 SHG की समूह बैठक करती हूँ जिसमे 150 जीविका दीदियाँ आती हैं । मुझे एक दिन मेरे CLF ऑफिस से पता चला की सहेली CLF की सभी CM की तीन दिवसीय माहवारी स्वच्छता प्रबंधन पर नव अस्तित्व फाउंडेशन के द्वारा एक करवाया जा रहा है। जिसमे मैंने भी भाग लिया। प्रशिक्षण में इस विषय पर हमें काफी जानकारी मिली । जिसमें हमें पता चला पैड इस्तेमाल कर इसका निस्तारण किस प्रकार से करते हैं और माहवारी के समय हमे ज्यादा तेल मशालों से बने खाने का सेवन नहीं करना चाहिए प्रशिक्षण से पहले मैं माहवारी मे पैड को इस्तेमाल करके उसको इधर -उधर फेंक देती थी प्रशिक्षण मे हमे समझाया गया की यह निस्तारण का सही तरीका नही है उसे आप कागज मे लपेट कर पन्नी में बांध कर उसको क्रेदान में फेंकना होता है जो की मैं पहले नहीं करती थी।प्रशिक्षण के बाद से मैंने अपने इस व्यवहार को बदला और अब हम उसे कागज और पन्नी में लपेटकर कूड़ेदान में फेंकते हैं | इसके अलावा माहवारी के समय में तेल मशालों से बना खाना खा लेती थी। जिससे मेरे पेट मे दर्द रहता था | जैसा की मैम हमको प्रशिक्षण मे बताई थी की उस समय हमे कम तेल मशालों का सेवन करना चाहिए क्योंकि हमारा पाचन तंत्र उस समय कमजोर रहता है । अब मैं माहवारी के समय काम तेल मशालों का खाना खाती ह जिससे मुझे काफी आराम है और दर्द ना के बराबर होता है । माहवारी स्वच्छता प्रबंधन के प्रशिक्षण में सीखी गई बात को मैं अपने समूह की बैठक में जीविका दीदियों को भी बताती हूँ जिससे उनको भी सही जानकारी मिले और उनके भी व्यवहार में माहवारी स्वच्छता प्रबंधन को लेकर बदलाव लाया जा सके।

f.1 Profile Photo of Onima Kumari and Consent Form



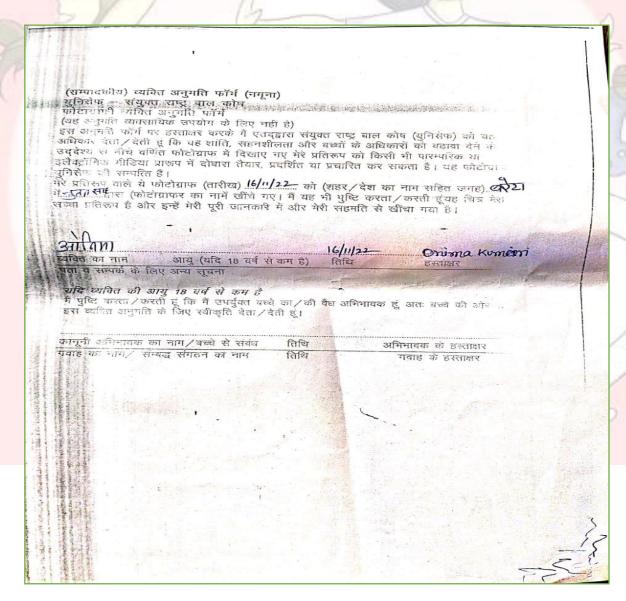
NAME: ONIMA KUMARI

POST:- CM JEEVIKA

VILLAGE:- BARETHA

BLOCK:- KASBA

DISTRICT:- PURNEA



नामः चंद्रमणि देवी ब्लाकः रिगा जिलाः सीतामढ़ी पंचायत1-रीगा -, गाँवः संग्राम फँदह

सभी को नमस्कार रीगा में,मैं चंद्रमणी देवी जीविका ,CNRP के पद पर कार्यरत हूँ आज मैं माहवारी से संबंधित बातें आपसे करने जा रही हूँयहाँ |मैं अपने सस्राल में रहती हूँ और यह ग्रामीण क्षेत्र में पड़ता है | पर पैड की उपलब्धता की कमी होने के वजह से मुझे अपने पित से पैड मँगवाने पड़ते थे कई बार उनके मैं ज्या ,मना करने और नहीं लाने के वजह से मुझे कपड़े का इस्तेमाल भी करना पड़ता थादातर कपड़े का ही इस्तेमाल करती थी क्योंकि ससुराल होने के वजह से मैं खुद खरीद कर नहीं ला सकती थीजब मुझे जिसमें ,नव अस्तित्व फाउंडेशन और यूनिसेफ़ के द्वारा माहवारी स्वच्छता प्रबंधन पर प्रशिक्षण दी गई माहवारी के दौरान पैंड की इस्तेमाल की महत्व को भी बताया गयाऔर कपड़े का पैंड बनाने की विधि भी बताई गई थीमें दीदी के द्वारा बताए गए तरीके और दीदी से एक कपड़े का पैड घर ले जाकर दूसरे दिन जीविकोपार्जन के लिए पैड बनाना तथा सस्ते दामों में समुदाय की महिलाओं को उपलब्ध । बनाकर लाई प्रशिक्षण के बाद मैंने | करवाना बताया गयापैड बनाने की श्रुआत की और मैं खुद इस्तेमाल करने लगी और अब मुझे अपने पति से पैड मँगवाने की आवश्यकता नहीं पड़ती है ,जो बहुत ज्यादा ही अच्छा लगा और अब सभी जगहों से सूती कपड़े को लेकर कपड़े का पैड ,यह पैड घर के सूती कपड़ों से ही बन जाती है बनाती ह 25-20 हर सप्ताहरूँ और समुदाय की महिलाओं को बांटती हूँ तथा बैठक के दौरान पैड बनाने की विधि को भी बता रही हूँ मेरे द्वारा लिए गए इस निर्णय से और भी महिलायें प्रेरित हुई हैं और वह भी मेरे द्वारा कपड़े का पैड बनाकर सभी को सस्ते दामो | पैड बनाने के लिए मुझसे संपर्क करती हैंं में उपलब्ध करवाने से बहुत सारी महिलाओं के बीच पैड की महत्वता को दर्शाने लगा हैजब भी उन्हे पैड चाहिए होता , है वह मुझसे खुद संपर्क करती हैं और खरीदती हैं इससे आशा है मुझे आने वाले समय में हमारे जीविकोपार्जन जीविकोपार्जन के लिए कप | में भी मदद मिल सकती हैड़े का पैड बनाने की सुझाव अच्छा तरीका है जिससे महिलाओं को विमारियों से ग्रसित होने से भी बचाया जा सकता है और कुछ पैसे कमाने का साधन भी बनाया जा सकता हैसमुदाय में कपड़े का पैड बनाकर उपयोग करने से बदलाव आएगा तो इस बदलाव के | लिए मैं हमेंशा सबकी मदद करने के लिए तैयार हुँमैं धन्यवाद करना चाहुँगी की हमलोगों के बीच इस । तरह की प्रशिक्षण कार्यक्रम आयोजित कर हमें जागरूक करने के लिए और हमें सशक्त बनाने के लिए

सारमाहवारी स्वच्छता प्रबंधन के लिए सामग्री की उपलब्धता स्थानीय और घरेलू तरीकों से करना ग्रामीण - क्षेत्रों की महिलाओं के लिए आसान, कम खर्च में तैयार करना एक नई और क्रांतिकारी कदम साबित हो मकता है।

g.1 Profile Photo of Chandramani Devi and Consent Form

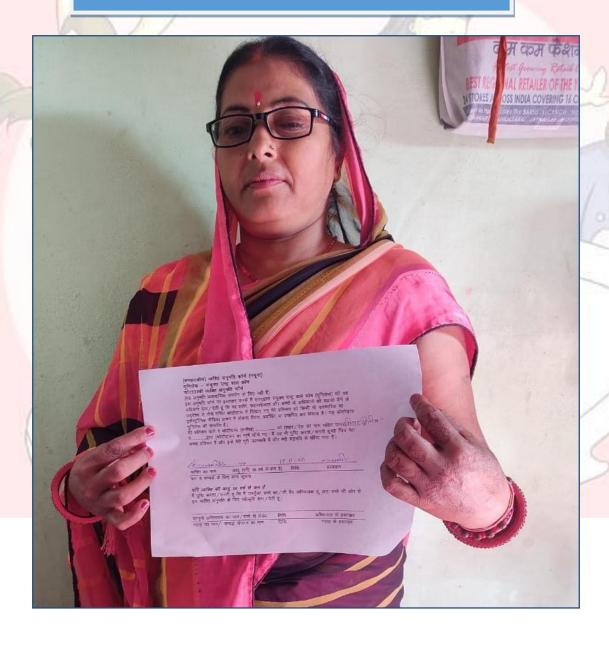
NAME:- CHANDRAMANI DEVI

POST:- CNRP JEEVIKA

VILLAGE:- RIGA 1

BLOCK:- RIGA

DISTRICT:- SITAMARHI



Earning Livelihood from Cotton Cloth Pads

नामः सुशीला देवी

प्रखंड: कसबा

पंचायतः घोरदौर

सूती कपड़े का पैड

मेरा नाम सुशीला देवी है, मैं घौरदौड़ पंचायत के कसबा प्रखंड में रहती हूं। मैं जीविका में सीएम पद पर पिछले कई सालो से कार्य कर रही हूं और समूह की देखरेख भी करती हूं। 12 नव अस्तित्व फाउंडेशन और यूनिसेफ बिहार के द्वारा स्किल ट्रेनिंग प्रशिक्षण के दौरान कपड़े | का पैड बनाने की विधि बताई गई थीजिससे हम कपड़े का पैड बनाना सीखे। वैसे तो मैं सिलाई का काम थोड़ा बहुत कर लेती हूं पर सूती कपड़े का पैड किस तरह से बनाना होता है इसकी सही जानकरी मुझे पहले नही थी। प्रशिक्षण के दौरान मैंने इसको विधिवत तरीके से बनाना सीखा और सीख कर उसे अपने समूहों की महिलओं को भी सिखाती हूँ और साथ ही मैं कपड़े का पैड भी बनाती हूं। मार्केट के साथ साथ मैं-कपड़े के पैड को अपने समूह की महिलओं को भी पैड देती 5 रु में 20 हूं | जिससे कि मैं अपने जीविकोपार्जन को और बेहतर बना सकूं।

h.1 Profile Photo of Sushila Devi and Consent Form



NAME:- SHUSHILA DEVI

POST:- CM JEEVIKA

VILLAGE:- GHORDHOR

BLOCK:- KASBA

DISTRICT:- PURNEA

(सम्पादकीय) व्यक्ति अनुमित कॉर्म (नमूना) युनिशंफ — संयुक्त राष्ट्र बाल कोष फोटाग्राफी व्यक्ति अनुमित फॉर्म (वर्ष अनुमित फॉर्म (यह अनुमित कॉर्म (यह अनुमित कॉर्म पर हस्ताक्षर करके में एतद्द्वारा संयुक्त राष्ट्र बाल कोष (युनिशंफ) को यह इस अनुमित फॉर्म पर हस्ताक्षर करके में एतद्द्वारा संयुक्त राष्ट्र बाल कोष (युनिशंफ) को यह अधिकार देता / देती हूं कि वह शांति, सहनशीलता और बच्चों के अधिकारों को बढ़ावा देने के अधिकार देता / देती हूं कि वह शांति, सहनशीलता और बच्चों के अधिकारों को बढ़ावा देने के अधिकार देता / देती हूं कि वह शांति, सहनशीलता और प्रतिरूप को किसी भी पारम्परिक या उद्देश्य से नीचे वर्णित फोटोग्राफ में दोबारा तैयार, प्रदर्शित या प्रचारित कर सकता है। यह फोटोग्राफ युनिशंफ की सम्पत्ति हैं। अपिरूप वाले ये फोटोग्राफ (तारीख) (वारीख) (वारीखीखीखीखीखीखीखीखीखीखीखीखीखीखीखीखीखीखीख			
द्विहा जा द्वी जायु (यदि 18 वर्ष र पता व सन्पर्क के लिए अन्य सूचना यदि व्यक्ति की आयु 18 वर्ष से कम हैं मैं पष्टि करता / करती हैं कि मैं उपर्यक्त बच्च	ं	16-11-2622 हस्ताक्षर Su	
इस व्यक्ति अनुमात क जिए स्वाकृति ६ता/	٠	7	
इस व्याक्त अनुमात के जिए स्वाकृति बता/ कान्नी अभिभावक का नाम/बच्चे से संबंध	तिथि	अभिभावक के हस्ताक्षर	
इस व्यक्ति अनुमात क जिए स्वाकृति ६ता/	٠	7	es (a)
इस व्याक्त अनुमात के जिए स्वाकृति बता/ कान्नी अभिभावक का नाम/बच्चे से संबंध	तिथि	अभिभावक के हस्ताक्षर	*** (w)
इस व्याक्त अनुमात के जिए स्वाकृति बता/ कान्नी अभिभावक का नाम/बच्चे से संबंध	तिथि	अभिभावक के हस्ताक्षर	- w
इस व्याक्त अनुमात के जिए स्वाकृति बता/ कान्नी अभिभावक का नाम/बच्चे से संबंध	तिथि	अभिभावक के हस्ताक्षर	
इस व्याक्त अनुमात के जिए स्वाकृति बता/ कान्नी अभिभावक का नाम/बच्चे से संबंध	तिथि	अभिभावक के हस्ताक्षर	
इस व्याक्त अनुमात के जिए स्वाकृति बता/ कान्नी अभिभावक का नाम/बच्चे से संबंध	तिथि	अभिभावक के हस्ताक्षर	-
इस व्याक्त अनुमात के जिए स्वाकृति बता/ कान्नी अभिभावक का नाम/बच्चे से संबंध	तिथि	अभिभावक के हस्ताक्षर	
इस व्याक्त अनुमात के जिए स्वाकृति बता/ कान्नी अभिभावक का नाम/बच्चे से संबंध	तिथि	अभिभावक के हस्ताक्षर	
इस व्याक्त अनुमात के जिए स्वाकृति बता/ कान्नी अभिभावक का नाम/बच्चे से संबंध	तिथि	अभिभावक के हस्ताक्षर	
इस व्याक्त अनुमात के जिए स्वाकृति बता/ कान्नी अभिभावक का नाम/बच्चे से संबंध	तिथि	अभिभावक के हस्ताक्षर	
इस व्याक्त अनुमात के जिए स्वाकृति बता/ कान्नी अभिभावक का नाम/बच्चे से संबंध	तिथि	अभिभावक के हस्ताक्षर	
इस व्याक्त अनुमात के जिए स्वाकृति बता/ कान्नी अभिभावक का नाम/बच्चे से संबंध	तिथि	अभिभावक के हस्ताक्षर	

Annexure 2: Development of Training Modules/ IEC Materials

CLF TRAINING	CM TRAINING	SHG TRAINING
Menstrual Hygiene Management Calendar	Mahawari Ki Jaankari – Badlegi Saari Jaankari	Seekh Pate Ki
Use of MHM Apron	Charcha Mahwari Ki	MHM Cards: Brief Information on Periods
The Period Book	Myths and Facts of Menstruation	Weekly Activity Calendar on MHM
Poster on Mahawari Charcha	Seekh Pate Ki	Poster on MHM Awareness
Poster on MHM Awareness	MHM Cards: Brief Information on Periods	Poster on Mahawari Charcha
Vivran Pustika – Record of Activities & Meetings	Weekly Activity Calendar on MHM	Oath Formation Format
What's App Groups	Oath Formation Format	
Pad Bank Register & Passbook	Poster on MHM Awareness	A Property
	Poster on Mahawari Charcha	1 (100)