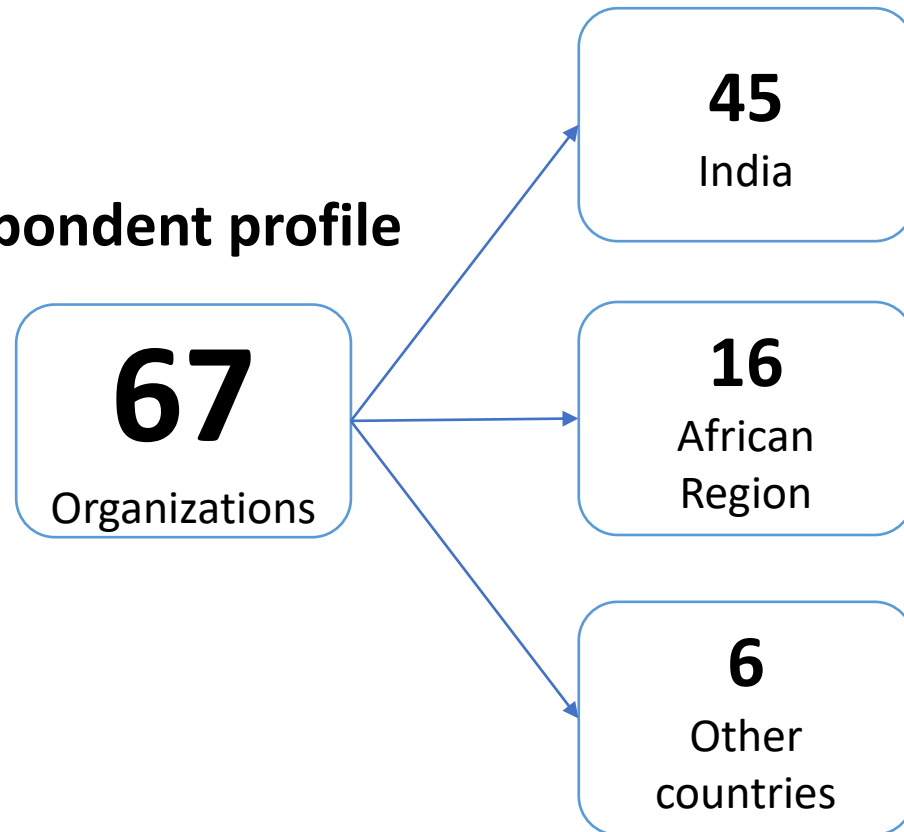


Menstruation in the time of Coronavirus



Rapid survey: menstrual hygiene product supply chain and access to information

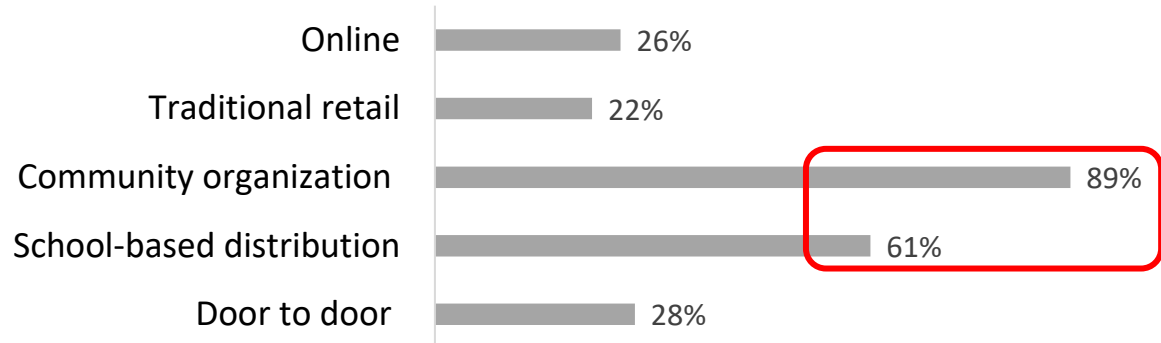
Respondent profile



- Geography focus – 54 rural, 49 urban
- Product Focus - 23 disposable pads, 28 reusable pads, 13 cups
- 19 production (Centralized and decentralized), 24 distribution/sales
- 94% respondents are either in lockdown or state mandated social distancing

Status of production, distribution and access to products

Pre-lockdown distribution channels



Current Status (March - April 2020)

Production Units (n=44)	Yes	No	Partial
Units open	25%	25%	50%
Availability of raw materials for 3 months	25%	35%	40%
Can service community demand	24%	30%	46%

- 62% - Access from regular channels for beneficiaries is challenging
- 22% - Beneficiaries have no access
- 52% - Note increased demand as regular channels are restricted
- 58% - Local Government taking few measures to facilitate access
- 19% - Local Government facilitating access

18 organizations engaged in mask production, 11 are planning

Supply chain challenges

Production:

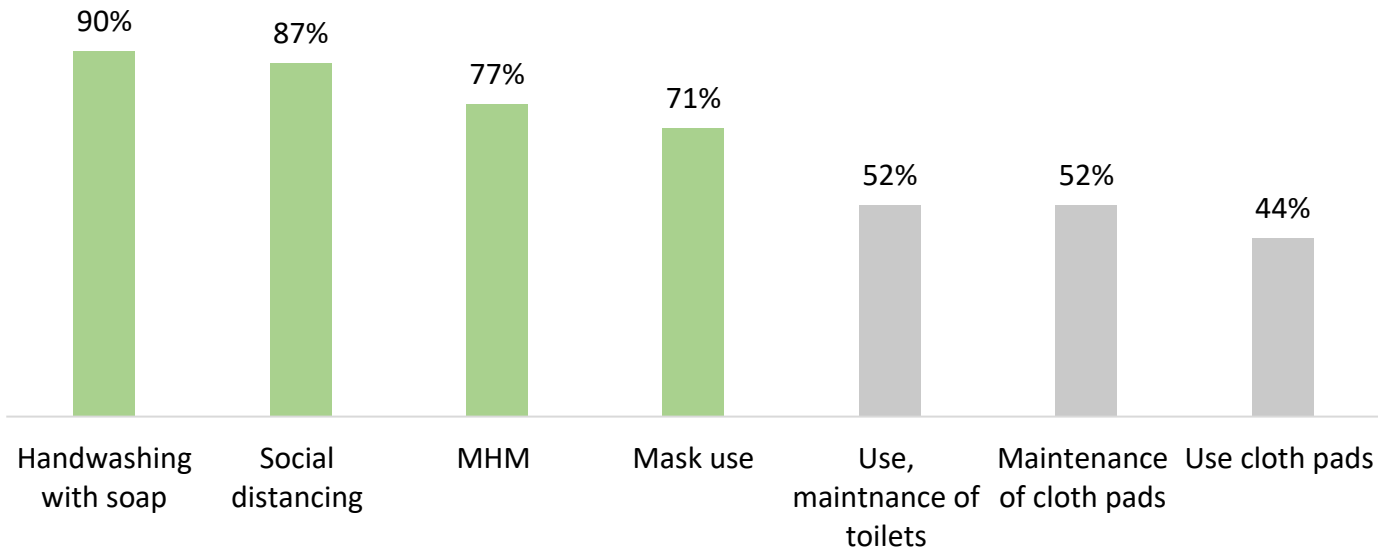
- Renewed production likely to be at limited capacity given social distancing norms for factories, workers return to villages
- Mask production taken priority for many small-scale manufacturers
- Cash flow, especially for SHG units is a looming challenge
- Restricted import of products/raw materials is challenging for menstrual cups and for disposable pads

Distribution and sales:

- Online sales had stopped – few organizations using India Post
- Road transport restrictions constrained wholesale distribution
- Higher transportation costs (road and air freight) can be expected even as restrictions ease
- Limited reach in communities due to restrictions on travel

Community outreach

Key hygiene messages promoted in communities



Most organizations keeping in touch with communities

63% - Phone

55% - WhatsApp groups

29% - Community volunteers

22% - Health workers

- Simple IEC for phone/WhatsApp is required, connectivity is an issue
- Audio messages, IVRS and posters in addition to limited size videos ideal
- Masks are also competing for cotton - **ensuring access to cotton cloth for MHM needs becomes critical** as it may not be a priority within homes/communities

Engagement with relief work and identified needs

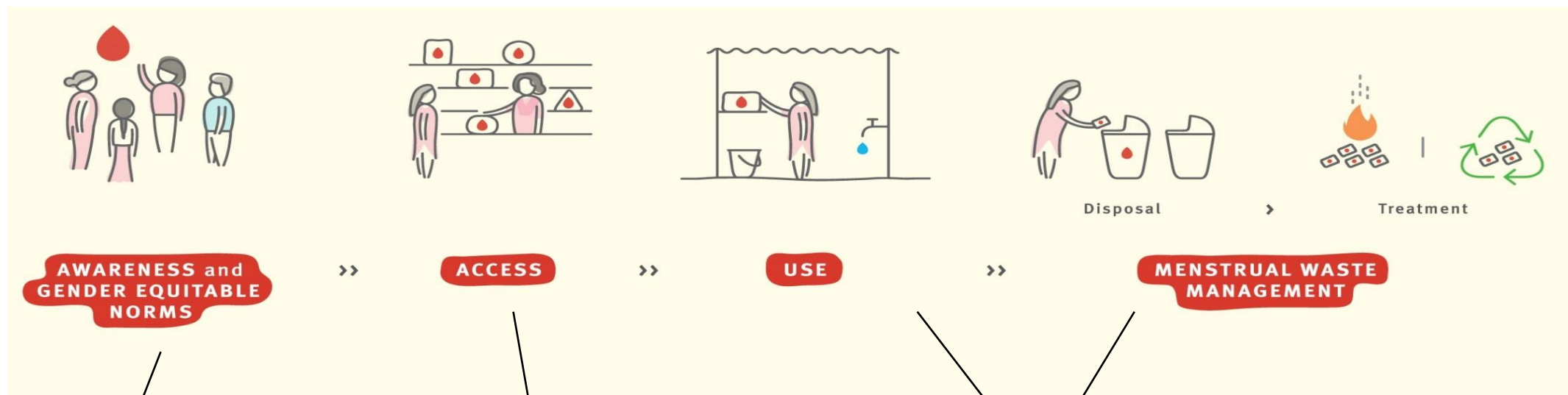
- 30% working with migrants
- 23% working with temporary shelters
- 16% working with quarantine/isolation facilities
- 45% working with women in urban slums

Majority note that challenges have intensified

- No menstrual hygiene materials
- Lack of water for personal hygiene
- Lack of toilets (clean, safe and private)

- Incorporating product access and information with other essential services
- Sharing of existing menstrual health and hygiene awareness materials
- Guidance on how to reach particularly vulnerable groups
- Coordination to release Government stock of products
- Engagement with large manufacturers for support

Back to basics for emergency response and beyond



Hard to reach, most in need

Communicate in **accessible formats**

Appropriateness, choice of menstrual hygiene products

Safety in production, distribution/sale, access

Reproductive health services

Water for personal use

Safe, accessible, private sanitation

Disposal

Recommendations

Information

- How to maintain hygiene during periods, with restricted access to sanitation facilities, water, and hygiene products
- Access to disposable and reusable products
- Hygienic use and maintenance of reusable products
- Health services

Communication

- Digital tools - WhatsApp and YouTube as the main platforms
- Animation and celebrity videos, Voice message, IVR , digital posters
- Radio (FM and community radio)
- Direct communication – frontline workers, SHGs

Recommendations

Access to menstrual management products

- Short term distribution through relief centres and food supply operations
- Facilitate linkages from wholesaler to last mile retailers (community level women entrepreneurs, SHGs) as restrictions ease (in Green Zones)
- Need for regional coordination to allow easy flow of products being manufactured in green zones to red zones where manufacturing is disrupted
- Costs of transportation and raw materials likely to be higher, long-term innovation and investments needed in
 - Substitution of wood pulp with locally available materials like jute, banana fibre
 - SHG models should look at labour reallocation to retail and sales rather than manufacturing, with investments in skills upgradation
- Expand the product landscape to include access to disposable and reusable
 - Districts interested in setting up decentralized mask production centres to consider producing cloth pads as well

Recommendations

Leverage local administrations for

- Distributing menstrual products in storage in schools, CHC/PHC, with ASHAs
- Integrating WASH and hygiene messaging with COVID related messaging on handwashing
- Ensuring gender segregated sanitation facilities are clean, safe and private in quarantine facilities and isolation centres

Sanitation facilities

- Focus on community toilet complexes, public toilets, sanitation facilities in health care facilities, quarantine and isolation facilities and in schools –
 - safe, functional, private, accessible
 - Water for washing, hand washing
- Important to provide guidance on segregation and safe disposal of menstrual products and masks at levels of household, community (Panchayat and ULB) and health facilities

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