

HOW DO WE IDENTIFY, PREVENT AND SHARE KNOWLEDGE ABOUT MENSTRUAL EXCLUSION AND GYNECOLOGICAL HEALTH AMONG YOUNG PEOPLE?

“Empowerment through menstrual health education”

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Introduction

Menstrual exclusion and gynecological health issues are critical aspects of reproductive health that often go unaddressed or stigmatized in many societies. It is imperative to equip youth workers with the knowledge and tools necessary to effectively support young individuals facing these challenges. This toolkit aims to provide comprehensive guidance on understanding menstrual exclusion, promoting gynecological health, and empowering youth workers to address these issues confidently.

Overview of Menstrual Exclusion and Gynecological Health

Menstrual exclusion refers to the systemic discrimination, stigma, and lack of access to resources experienced by individuals menstruating, leading to their marginalization in various spheres of life. This exclusion can manifest in educational settings, workplaces, healthcare systems, and social interactions. Moreover, gynecological health encompasses a range of conditions and concerns related to the reproductive system, including menstruation, sexual health, contraception, and menstrual disorders.

Importance of Youth Workers' Role

Youth workers play a crucial role in addressing menstrual exclusion and promoting gynecological health among young individuals. As trusted mentors and advocates, they have the potential to create safe spaces, foster open discussions, and provide essential support and resources to empower young people in managing their reproductive health. By actively engaging with youth workers, we can bridge gaps in knowledge, break down stigmas, and promote inclusive practices that prioritize the well-being of all individuals.

Objectives of the Toolkit:

- **Raise awareness:** educate youth workers about menstrual exclusion, gynecological health issues, and their impact on young individuals' lives.
- **Provide knowledge:** offer comprehensive information on menstrual health, reproductive anatomy, common gynecological conditions, and available resources.
- **Foster inclusivity:** equip youth workers with strategies to create inclusive environments, challenge stereotypes, and advocate for menstrual equity and gynecological health rights.
- **Support youth empowerment:** empower youth workers with practical tools and techniques to facilitate discussions, provide accurate information, and offer support tailored to the diverse needs of young people.
- **Promote collaboration:** encourage collaboration between youth workers, healthcare professionals, educators, policymakers, and community organizations to develop holistic approaches to address menstrual exclusion and improve gynecological health outcomes.

Glossary

- **Menstrual Exclusion:** The systemic discrimination, stigma, and lack of access to resources experienced by individuals menstruating, leading to their marginalization in various spheres of life. Menstrual exclusion encompasses more than just financial barriers to menstrual products; it also includes a lack of knowledge and education surrounding menstruation, perpetuating stigma and marginalization.
- **Gynecological Health:** The branch of medicine that focuses on the health of the female* reproductive system, including menstruation, sexual health, contraception, and menstrual disorders.
- **Youth Workers:** Professionals or volunteers who work with young people in various settings, such as schools, youth centers, community organizations, or healthcare facilities, to provide support, guidance, and resources.
- **Menstrual Equity:** The concept of ensuring that all individuals have access to the menstrual products, education, and facilities necessary to manage their periods safely, comfortably, and with dignity.
- **Menstruators:** The term "menstruators" is a gender-inclusive term used to refer to individuals who experience menstruation, regardless of their gender identity. It acknowledges that not only cisgender women but also transgender men, non-binary individuals, and others may menstruate.

Using inclusive language like "menstruators" helps to recognize and respect the diversity of experiences related to menstruation. It ensures that conversations around menstrual health are inclusive and do not reinforce gender stereotypes or exclude individuals based on their gender identity. By using gender-neutral terminology, we can create more welcoming and inclusive environments where all individuals feel seen, heard, and supported in discussions about reproductive health.

The term "female**" is often used to describe individuals who are biologically assigned female at birth or who have reproductive anatomy typically associated with the female sex. In the context of gynecological health and reproductive medicine, "female" generally refers to individuals who have ovaries, a uterus, and other internal reproductive organs traditionally categorized as female. However, it's important to note that gender identity may not always align with biological sex, and not all individuals who identify as women or girls may have the reproductive anatomy typically associated with the female sex. Thus, when discussing issues related to gynecological health and menstruation, it's essential to acknowledge and respect diverse identities and experiences beyond biological categorizations.*

2. Understanding Menstrual Exclusion

- Definition and Scope
- Cultural and Social Stigmas
- Economic Implications
- Intersectionality of Menstrual Exclusion

Definition and Scope

To understand menstrual exclusion, first we need to understand the term “Menstrual Health and Hygiene (MHH)” and the term “Menstrual Health”:

According to Sommer et al. (2021), MHH is used to describe the needs experienced by people who menstruate, including having safe and easy access to the information, supplies, and infrastructure needed to manage their periods with dignity and comfort. Menstrual health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity, in relation to the menstrual cycle. Menstrual exclusion occurs when these needs associated with menstrual health management are not met (Global Menstrual Collective, 2021).

In addition to the lack of access to cheap and quality menstrual products, adequate sanitation, or running water, menstrual exclusion also refers to those associated negative and detrimental impacts related to the lack of menstrual education, cultural taboos and social stigmas surrounding menstruating people. These factors are diverse, and could include exclusion in certain places, prohibition from performing certain tasks, and shame or health problems due to lack of access to menstrual health specialists. As a result, menstruating people experience situations of inequity, and are sometimes forced to withdraw from society during menstruation, avoiding school or work because they cannot manage their menstruation properly.

Cultural and Social Stigmas

The word stigma refers to any stain or mark that sets some people apart from others; it conveys the information that those people have a defect of body or of character that spoils their appearance or identity (Goffman, 1963). Cultural and social stigmas and taboos about menstruation are so embedded in societies and cultures that they sometimes go unnoticed. In various parts of the world, there are stigmas associated with menstruation that exclude menstruating people - mainly women-, from the social and cultural life of the populations.

Researchers and scholars from various and diverse backgrounds (Bobel, 2006; Brooks-Gunn and Ruble, 1982; Golub, 1992; Johnston-Robledo et al., 2003; Stubbs and Costos, 2004; Ussher, 1989) have long discussed the degree to which society views women’s menstruation as taboo, shameful, disgusting, and consequently is shrouded in secrecy.

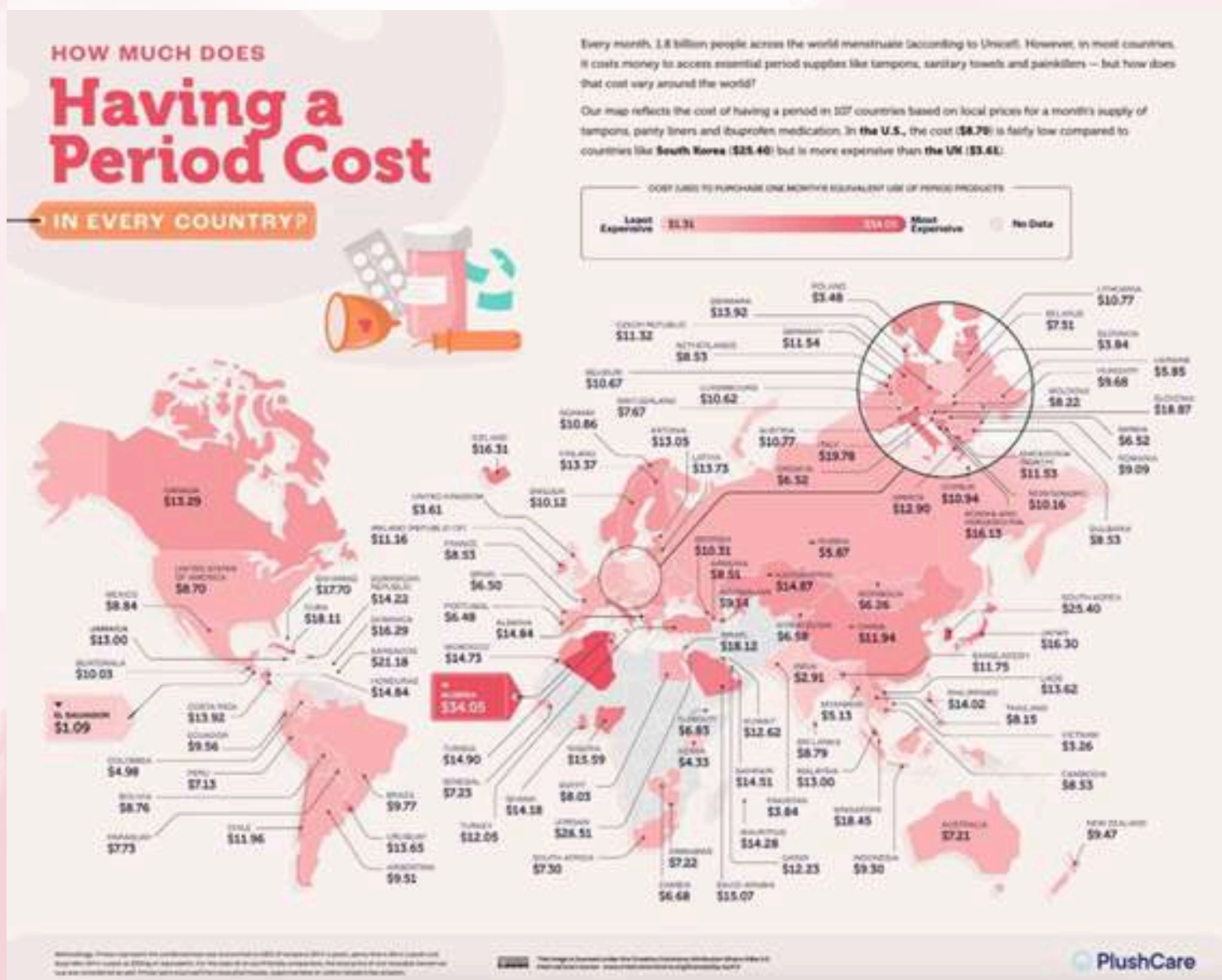
As an example, we can focus on Nepal, where menstruating people cannot cook, cannot wash, cannot enter places of worship, and must sleep in separate huts. According to Olson et al. (2022), these ingrained customs in societies have been used to provoke inequalities and discrimination, avoiding the inclusion of menstrual health as an important part of the social and health policies of the countries and relegating the problems associated with menstruation to a status of invisibility and dehumanization.

Economic Implications

Menstrual exclusion means that menstruating people often find themselves on the margins of society. This exclusion is closely related to menstrual poverty, which, in turn, is a reflection of the economic difficulties experienced by some of those who menstruate, being the level of affordability of menstrual products one of the direct causes.

Although everyone who menstruates may be affected, most are girls and women. Period poverty is a barrier to girls and women all over the World, affecting their academic performance and putting them at risk of dropping out of school, further reducing their future economic opportunities, as they may be less academically qualified for high-paying jobs (Moutinho, 2023).

The level of affordability of menstrual products is one of the direct causes of period poverty. PlushCare has gathered data on “month’s supply of period products costs locally in 107 countries” (15), illustrating the results in this map.



It is important to highlight that period poverty is not an issue that occurs exclusively in developing countries, because “the stigma of menstruation remains even in more advanced nations”, where “low-income women have difficulty affording menstrual products” (Jaafar, Ismail & Azzeri, 2023).

Some measures such as eliminating taxes on menstrual products help to change this reality, but it should not be forgotten that menstrual poverty is also related to lack of access to adequate infrastructure, as well as lack of menstrual information and education.

Intersectionality of Menstrual Exclusion

Menstrual exclusion happens everyday all over the world, and we cannot forget that when we talk about menstrual exclusion, we have to think about injustice and discrimination. Lack of menstrual justice occurs due to a number of intersectional factors related to menstruation that menstruating individuals have to deal with, which leads to discrimination.

Intersectionality is an analytical tool for studying, understanding and responding to the ways in which gender intersects with other identities and how these intersections contribute to unique experiences of oppression and privilege.

Some of these identities would include transgender, and non-binary people, who are often excluded as menstruators. In addition and according to Johnson (2019), we must also take into account the strategic and systematic exclusion that some people suffer because they are racialized, because of class, or because they are in a situation of deprivation of liberty.

3. Identifying Signs and Symptoms

- Common Gynecological Health Issues.
- Recognizing Physical and Emotional Indicators.
- Age-Appropriate Discussions on Reproductive Health.
- Importance of Early Detection.

Common Gynecological Health Issues

- 1. Endometriosis** is a condition where the inner lining of the uterus starts growing outside the walls of the uterus. Commonly, it starts growing on the ovaries or the fallopian tube, however, it can even grow on the cervix, bladder, bowel, or rectum. Nevertheless, even today the exact cause of Endometriosis is not known. The symptoms include; pelvic pain (especially during period), pain with bowel movement and urination, difficulty getting pregnant, , pain during penetrative sex, heavy periods and breakthrough bleeding and even digestive problems. There is no cure for endometriosis, but there are treatment options for related pain and infertility.
- 2. Ovarian cysts** are fluid-filled sacs in various sizes that develop on and around the ovaries. Sometimes women live their whole life in a healthy manner without even realizing that they have ovarian cysts. These cysts may or may not be tumors. Usually, they dissolve on their own or your doctor may prescribe OCPs or oral contraceptive pills to help them dissolve. However, they should be monitored closely. Large ovarian cysts may cause pelvic pain, bloating and irregular periods.
- 3. Dysmenorrhea** is one of the gynecological disorders that involves menstrual pain severe enough to interfere with daily life. In addition to severe cramping, other symptoms like: nausea, fatigue and diarrhea can occur. There are two types of dysmenorrhea: primary and secondary. Depending on the cause of painful periods, treatment may consist of diagnosing and treating the underlying cause of the pain through medications, urogynecological physiotherapy or, less commonly, surgery.
- 4. PCOS [polycystic ovary syndrome]** is one of the most common gynecological problems affecting young women. Genetic and environmental factors are considered the main cause of PCOS. Patients usually suffer from weight gain, irregular periods, infertility, hirsutism, and skin issues such as acne. They often become more susceptible to diabetes and develop insulin resistance. Most of the PCOS symptoms is caused by too high levels of androgens (group of hormones eg. testosterone) and to low levels of estrogen. Due to a surplus of androgens, ovaries become enlarged and contain many follicles that surround the egg cells. Currently, there is no cure for PCOS and treatment aims to ease symptoms.
- 5. Pelvic Inflammatory Disease** is a condition that affects the upper genitourinary system. Most cases of PID are caused by bacterial infection (eg. gonorrhoea or chlamydia) that's spread from the vagina through the cervix to other reproductive organs. Pain in the lower abdomen and pelvis, painful penetrative sex, excessive or atypical vaginal bleeding and discharge, fever, fatigue, and headache are all possible symptoms. Risk factors include: engaging in unprotected sexual contacts, washing and irrigating the vulval vestibule and vagina, having a history of PID and living in a region with a high rate of STIs. In rare cases, infection can occur as a result of insertion of an IUD (intrauterine device). Pelvic Inflammatory Disease is considered a major cause of tubal (ectopic) pregnancy.

Recognizing Physical and Emotional Indicators

In the 21st century in Europe, we unfortunately continue to encounter many taboo topics when it comes to gynecological health and prevention. The lack of population-based HPV vaccination, the downplaying of ailments with which patients report to gynecologists.

Symptoms that should not be underestimated are menstrual disorders- irregular cycles, excessive pain experienced during penetrative sex/period, bleeding between cycles, excessive bleeding, excessive discharge, change in consistency/odor of vaginal discharge, itching or skin changes in the vaginal area (i), burning sensation in the vulva and vagina, lower abdominal pain unrelated to menstruation, and after menopause, as well as other symptoms that worry the patient.

They can be the first signs of vaginal infections, cancer and sexually transmitted infections and diseases. None of these symptoms should be underestimated and an appointment with a gynecology specialist should be made when they appear.



Age-Appropriate Discussions on Reproductive Health

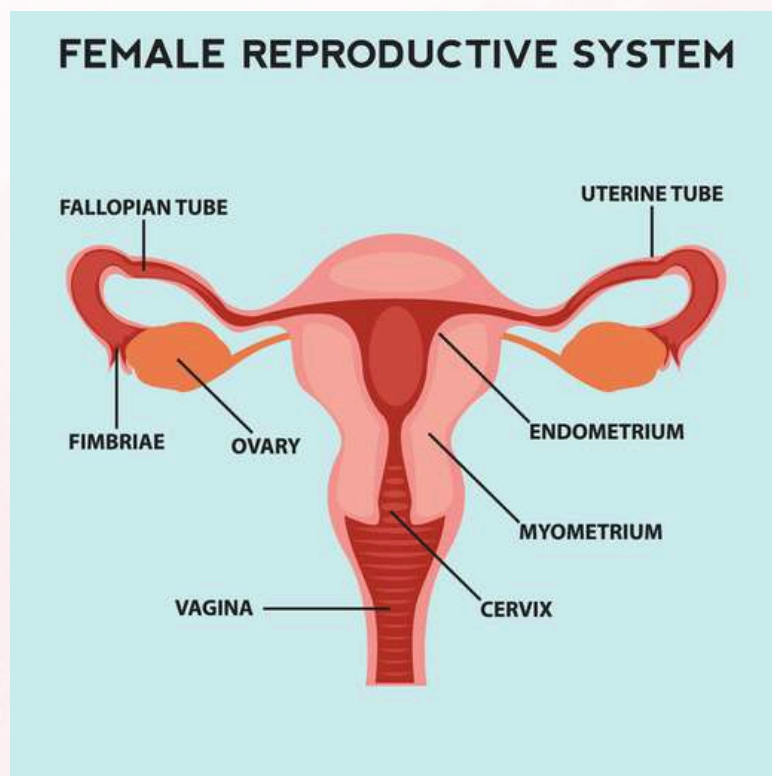
Reproductive health knowledge should be provided from an early age, tailoring the information and delivery to the age of the audience. The World Association for Sexual Health asserts that sexual rights, essential for optimal sexual health, are based on universally recognized human rights found in international and regional documents, national laws, human rights standards, and scientific knowledge on sexuality and health.



No matter how advanced parental control of Internet access is, studies show that the average age of children exposed to pornography is now 13, and some children are exposed as early as age 7. Digging deeper, 60% of children between the ages of 11 and 13 are exposed to adult content by accident. And 93% of men and 64% of women under the age of 18 have intentionally accessed pornography. All these statistics correlate with the increasing use of smartphones by young people. With this in mind, the truism **“teach your kids to have sex, because the internet will do it”** has never been truer. According to a Mayo Clinic study, the foundation of age-appropriate sexual health education should be to introduce the topic of consent early on. This should occur at age 5 during medical examinations. Topics related to sexual and reproductive health should then be introduced later during the medical examination at age 7.

Importance of Early Detection

Early detection of the disease guarantees more effective treatment. Regularly performed cytological examinations (pap smear), breast ultrasounds or mammograms in the case of the existence of vagina infection or cancer allow us to start treatment earlier, and thus a greater chance of complete cure or inhibition of disease progression. Do not forget that the basis should be pro-health education as well as prevention - for example, vaccination against HPV virus of girls and boys before the beginning of intercourse, affects the decrease in the incidence of cervical cancer.



4. Promoting Inclusivity and Awareness

- Creating Safe Spaces for Discussions.
- Tackling Myths and Misconceptions.
- Fostering Inclusive Language and Practices.
- Educational Initiatives for Peers and Community.

Creating Safe Spaces for Discussions

In order to address the importance of menstrual health in our societies, it is imperative that we first take into account the different realities in which inclusion and knowledge about menstrual health will be promoted.

Every society and every country has its own culture and customs which may mean that the way these issues are dealt with may require greater sensitivity or a specific way of handling them. It is therefore essential to bear in mind that menstrual health management is surrounded by taboo and stigma, which is directly related to the secondary role that menstruating people occupy in society, and in health systems.

The main focus should be on ensuring that all populations feel comfortable enough and prepared to welcome workshops and lectures to improve their knowledge about menstruation, to share their experiences, their questions and doubts, and feel motivated about knowing more of it. This is the way to have an impact on their lives, to help them understand the importance of menstrual health and to have an impact on people, which would lead to change social and cultural stigmas and myths about menstruation.

Tackling Myths and Misconceptions

Menstruation and the menstrual cycle are biological processes to which humanity has associated different meanings rooted in culture and society. These false beliefs have fueled the association of menstruation with negative terms, and we often refer to it through euphemisms and metaphors.

As a result, menstruation became taboo, and this silence was reinforced by fear, and the rejection caused by prohibitions and discrimination among menstruating people themselves. We must not forget that anything that does not enter the public sphere is not treated as natural, and does not occupy a place in social debate, so it becomes invisible. The stereotypes and myths surrounding menstruation have their origins in Ancient Rome, and have survived to the present day, promoting harmful ideas such as menstruation being incompatible with water, and causing generations of health problems associated with these bad practices to impact negatively on the health of menstruating people.

Furthermore, it should be noted that menstruation has been used over the centuries to influence the lives of girls and women, dictating their behavior, controlling their decisions and limiting their ability to make decisions about their own lives. Through it, and with the intention of forcing them to comply with cultural and social rules based on patriarchy, a natural and biological process has been instrumentalized to assign girls and women a secondary role, away from public life, and giving them the role of submissive and pregnant women. Menstruation and the hormonal changes that women experience throughout their lives have been used as a method of oppression.

Fostering Inclusive Language and Practices

It is important that we use inclusive language that is also carried into the activities that take place. We must avoid generalising and using classist, sexist or offensive language and practices that may make different groups or people with an established culture or religion uncomfortable. We also have to think about people with disabilities and include their necessities when we prepare the workshops and activities.

In order to be as inclusive as possible, the false belief that "menstruation is a woman's thing" must also be addressed.

It is likely that this term began to be used to make this natural process invisible again, with the excuse that it does not affect the whole population, and therefore it may be uncomfortable or inappropriate to have conversations about it in our day-to-day lives. Be that as it may, the reality is that menstruation is a public issue, and should be treated as such.

Over the years there is also a growing awareness that this connection between women and menstruation is not the only one that exists, and we cannot forget that not all women menstruate, and that there are people who are not women who also menstruate, such as some transgender and non-binary people.


That is why when we talk about menstruation, we need to use inclusive language that reflects all realities, and that in the implementation of workshops, activities or discussions, the language and practices we use need to provide a comfortable, safe and adapted place for all.

Educational Initiatives for Peers and Community

In order to have a real impact on communities, menstrual health education needs to be embedded in education systems.

The efforts being made by feminist organizations seek to bring the reality of menstruating people into the public and social sphere, to monitor and protect the rights of menstruating people and to ensure adequate menstrual health management and universal access to menstrual health.





5. Supportive Strategies cases of Poland, Lithuania and Spain

Psychological Support for Individuals Facing Gynecological Health Challenges

The intricate relationship between gynecological health and mental health is often underestimated but plays a crucial role in overall wellness. Menstruation undeniably affects the quality of our mental health and well-being. All of the changes in our bodies caused by the endocrine system, the body's preparation for reproduction, then menopause and the changes in our mood are associated with menstruation cycle. Therefore, we must not underestimate the psychological changes during menstruation cycle. In each of the selected countries, basic psychological care should be provided at the general public level by state institutions. Such psychological care should primarily be provided in schools, universities, hospitals, and other public institutions. In addition to psychological care provided at the state level, each of the selected countries (Poland, Lithuania and Spain) guarantees other possibilities of obtaining psychological, for example:

POLAND

- Polish Crisis Helpline;
- Crisis Intervention Centers;
- Emergency rooms at a hospital psychiatric ward;
- Mental health clinics.

Navigating Healthcare Systems

Based on the experience of the presented countries, the availability of gynecological care depends on the place of residence and wealth.

People living in rural areas or smaller cities have significantly less access to gynecological care than residents of large cities and metropolitan areas. A similar relationship can be seen in the degree of availability of gynecological care among the wealthy and poor. Given examples of specific practices in the countries studied, it is apparent that private gynecological care is at a much higher level than public care.

The average waiting time for an appointment with a gynecologist under the National Health Fund in Poland is 18 days, regardless of whether one is pregnant or not. At half of the facilities, the wait is no longer than 7 days (median 7). The results these are relatively indicative of access to this service nationwide, although compared to the waiting time for a private appointment at the same same facilities, averaging 3 days, they are significantly worse.

No referral is needed for gynecological and obstetric appointments. Also, there is no regionalization, so you can make an appointment at any of the clinics in the country.

LITHUANIA

In Lithuania, individuals facing gynecological health challenges can access various forms of psychological support to help them cope with their experiences. Here are some resources and options available:

- **Public Healthcare System:** the Lithuanian public healthcare system provides access to gynecological healthcare services, including psychological support. Patients can consult with gynecologists who may refer them to psychologists or counselors for additional support.
- **Private Healthcare Providers:** private clinics and healthcare providers in Lithuania may offer gynecological services with integrated psychological support. These facilities may have psychologists or counselors on staff who specialize in providing emotional and mental health support to individuals facing gynecological health challenges.
- **Psychological Counseling Centers:** there are counseling centers and mental health clinics throughout Lithuania where individuals can seek psychological support for a wide range of issues, including gynecological health challenges. These centers may offer individual therapy, support groups, and psychoeducation sessions tailored to the needs of the patients.
- **Hotlines and Helplines:** some organizations and mental health institutions operate hotlines or helplines that provide support and guidance to individuals facing various health challenges, including gynecological issues. These services offer confidential support, information, and referrals to appropriate resources.

It's essential for individuals facing gynecological health challenges in Lithuania to explore these available resources and seek support from healthcare professionals, counselors, support groups, and other relevant organizations to address their emotional and psychological needs effectively.

SPAIN

The differences in gynecological check-ups in the public health system and in the private sector are notable.

It must be understood that in the public health system the demand for care is much greater and on occasions there are delays or bottlenecks in making appointments or receiving test results. This is perhaps the biggest difference: the waiting time.

First of all, you must go to your general practitioner or primary care doctor. He or she will assess your symptoms (if any) and, at his or her discretion, make a referral or request a consultation with a gynecology specialist. There is currently a certain amount of overcrowding in this specialty in most Spanish hospitals.

The Spanish public health system makes every effort to equip all hospitals with the latest technology. However, there are many public centers and not all of them can be equipped with state-of-the-art technology.

It is important to highlight the frequency with which persons with disabilities attend a gynecological consultation. A third of women with intellectual disabilities in the Community of Madrid have never attended a gynecological consultation, according to a study carried out by Plena Inclusión Madrid and the Faculty of Psychology of the Autonomous University of Madrid (UAM).

According to the results, a third of women with intellectual disabilities have never attended a gynecological consultation, and there are several causes behind this phenomenon. In addition to fear and shame, there is the belief that it is not necessary for them or that their families or legal guardians will not allow it. *(Una de cada tres mujeres con discapacidad intelectual no ha asistido nunca al ginecólogo – SID, s. f.)*

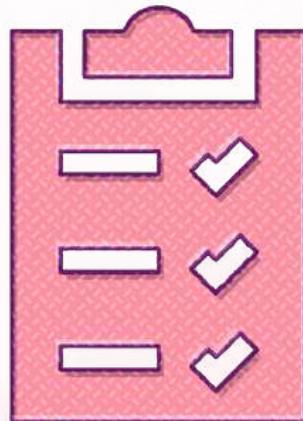
6. Preventive Measures for Menstrual Exclusion and Gynecological Health

- Importance of Regular Check-ups.
- Nutrition and Exercise for Gynecological Well-being.
- Hygiene Practices and Myths.
- Advocacy for Accessible Healthcare.

In this chapter, we will delve into detailed preventive measures aimed at combating menstrual exclusion and promoting gynecological health among young individuals. By focusing on regular check-ups, nutrition and exercise, hygiene practices, and advocating for accessible healthcare, we can empower youth workers to make a meaningful impact on the lives of the youth they serve.

Importance of Regular Check-ups

Regular check-ups are not only crucial for maintaining overall health but are especially important for gynecological well-being. Youth workers can encourage young individuals to schedule annual visits with healthcare professionals, which may include gynecologists, nurse practitioners, or primary care physicians. These check-ups provide opportunities for comprehensive assessments of reproductive health, including pelvic exams, breast exams, and screenings for STIs. For example, in many countries, organizations like Planned Parenthood offer confidential and affordable reproductive healthcare services tailored to the needs of young people. Additionally, youth-friendly clinics equipped with knowledgeable staff and comfortable environments can encourage adolescents to seek regular check-ups and address any concerns they may have about their reproductive health.

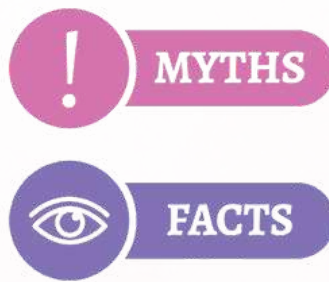


Nutrition and Exercise for Gynecological Well-being

Nutrition and exercise play integral roles in promoting gynecological health among young individuals. Youth workers can provide guidance on adopting a balanced diet rich in nutrients essential for hormonal balance and menstrual regulation. For instance, incorporating foods high in omega-3 fatty acids, such as salmon and flaxseeds, may help alleviate menstrual cramps and reduce inflammation associated with conditions like endometriosis. Similarly, engaging in regular physical activity not only supports overall well-being but can also alleviate menstrual symptoms and improve mood. Youth workers can organize workshops or physical activities that promote healthy eating habits and provide opportunities for young individuals to participate in enjoyable forms of exercise, such as dance classes or sports teams.

Hygiene Practices and Myths

Maintaining proper hygiene during menstruation is critical for preventing infections and promoting gynecological health. Youth workers should address common myths and misconceptions surrounding menstrual hygiene and provide accurate information on best practices. For example, debunking the myth that menstrual blood is "dirty" or "impure" can help reduce stigma and empower young individuals to manage their periods with confidence. Additionally, promoting the use of environmentally friendly and affordable menstrual hygiene products, such as reusable cloth pads or menstrual cups, can help reduce waste and increase accessibility. Youth workers can also emphasize the importance of regular hand washing and proper genital hygiene to prevent bacterial overgrowth and maintain vaginal health. Providing educational materials and organizing interactive sessions on menstrual hygiene can help dispel myths and promote hygienic practices among young individuals.



Advocacy for Accessible Healthcare

Ensuring access to affordable and culturally sensitive healthcare services is essential for promoting gynecological health and menstrual equity. Youth workers can advocate for policies and initiatives that prioritize accessible healthcare for all young individuals, regardless of socioeconomic status or background. This may involve partnering with local healthcare providers, advocacy groups, and policymakers to identify and address barriers to care, such as lack of insurance coverage, transportation challenges, or language barriers. For example, advocating for the implementation of school-based health centers or mobile clinics can increase access to reproductive healthcare services for students in underserved communities. Additionally, supporting initiatives that provide free or low-cost menstrual hygiene products, such as period poverty programs, can help address financial barriers to menstrual health management. By advocating for accessible healthcare, youth workers can contribute to the creation of inclusive and supportive environments where all young individuals can access the resources they need to maintain optimal gynecological health.

Preventive measures play a vital role in addressing menstrual exclusion and promoting gynecological health among young individuals. By focusing on regular check-ups, nutrition and exercise, hygiene practices, and advocating for accessible healthcare, youth workers can empower young people to take control of their reproductive health and lead healthier, more inclusive lives. Through education, support, and advocacy, we can work towards a future where menstrual equity and gynecological health rights are upheld for all.

7. Communication and Knowledge Sharing

- Effective Communication with Youth.
- Utilizing Technology and Social Media.
- Conducting Workshops and Training Sessions.
- Collaborating with Educational Institutions.

Collaborating with Educational Institutions

Effective communication with youth about gynecological health is crucial for promoting their overall well-being and fostering a positive attitude towards their bodies. Here are some tips to facilitate productive conversations:

- **Create a comfortable environment:** ensure that the setting is private, comfortable, and free from distractions. This can help alleviate any anxiety or embarrassment the youth may feel about discussing gynecological issues.
- **Use age-appropriate language:** tailor your language and explanations to the youth's age and level of understanding. Avoid using medical jargon and instead opt for simple, straightforward terms. At the same time, pay attention to the accuracy of the language, especially in the context of the anatomy of the external and internal reproductive organs.
- **Encourage questions and active participation:** let the youth know that it's okay to ask questions and express concerns. Encourage them to actively participate in the discussion by listening attentively and providing thoughtful responses.
- **Normalize discussions about gynecological health:** normalize discussions about gynecological health by emphasizing that it's a natural part of life. Assure them that it's important to take care of their bodies and address any issues that may arise.
- **Discuss consent and healthy relationships:** discuss the importance of consent, healthy relationships, and boundaries in the context of gynecological health. Empower youth to make informed decisions about their bodies and relationships.
- **Use visual aids and resources:** incorporate visual aids such as diagrams or illustrations to help explain anatomy and processes. Additionally, provide reliable resources such as pamphlets, books, or reputable websites for further information.
- **Address common concerns and misconceptions:** address common concerns and misconceptions that youth may have about gynecological health, such as menstruation, hygiene, contraception, and sexually transmitted infections (STIs).
- **Be non-judgmental and supportive:** approach the conversation with empathy, understanding, and non-judgment. Create a safe space where youth feel comfortable sharing their experiences and seeking guidance without fear of criticism or stigma.
- **Highlight the importance of regular check-ups:** emphasize the importance of regular check-ups with healthcare providers, such as gynecologists or primary care physicians, for preventive care and early detection of any potential health issues.
- **Follow-up and provide continued support:** offer ongoing support and follow-up after the initial conversation. Let youth know that they can always come to you with questions or concerns, and be proactive in providing additional resources or referrals as needed.

Utilizing Technology and Social Media when talking about gynecological health

Utilizing technology and social media can be powerful tools for engaging youth in conversations about gynecological health. Here's how you can effectively incorporate these platforms:

- **Social Media Campaigns:** Create or share social media campaigns focused on gynecological health awareness. Use platforms like Instagram, TikTok and others to share educational content, personal stories, and tips for maintaining reproductive health. Utilize hashtags to increase visibility and encourage participation.
- **Live Q&A Sessions:** Host live Q&A sessions on platforms like Instagram Live or Facebook Live where youth can ask questions anonymously or openly about gynecological health. Invite healthcare professionals or experts to participate and provide accurate information and advice.
- **Online Forums and Support Groups:** Facilitate online forums or support groups where youth can connect with peers who may have similar experiences or questions about gynecological health. These platforms can provide a sense of community and enable participants to share resources and support one another.
- **Interactive Webinars and Workshops:** Organize virtual webinars or workshops on topics related to gynecological health, such as menstruation, contraception, STI prevention, and reproductive rights. Use interactive features like polls, surveys, and breakout rooms to engage participants and encourage participation.
- **Personal Experiences or Narratives:** Share personal narratives or stories from individuals who have navigated issues related to gynecological health. These stories can be shared through blog posts, videos, or social media campaigns to help youth feel less alone and more empowered to seek help and support.
- **Gamification:** Develop gamified platforms or apps that educate youth about gynecological health through quizzes, challenges, and rewards. Gamification can make learning fun and engaging while reinforcing key concepts and behaviors.
- **Peer Education Programs:** Empower youth to become peer educators by providing them with training and resources to educate their peers about gynecological health. Encourage them to create social media content, host workshops, or lead discussions within their schools or communities.

By leveraging technology and social media platforms effectively, you can reach youth where they are most active and provide them with accurate information and support regarding gynecological health.

How can youth workers and youth organizations collaborate with educational institutions on the topic of gynecological health?

- **Develop Educational Programs:** Work with educators and healthcare professionals to develop comprehensive educational programs on gynecological health tailored to different age groups and educational levels. These programs can cover topics such as anatomy, menstruation, contraception, STI prevention, and reproductive rights.
- **Guest Speaker Presentations:** Offer to conduct guest speaker presentations or workshops on gynecological health at schools and colleges. Invite healthcare professionals, gynecologists, or experts in the field to share their knowledge and expertise with students.
- **Health Fairs and Awareness Campaigns:** Collaborate with educational institutions to organize health fairs, awareness campaigns, or special events focused on gynecological health. Set up booths with informational materials, interactive activities, and resources for students to learn more about reproductive health.
- **Teacher Training and Professional Development:** Offer training sessions or workshops for teachers and school staff on how to effectively teach gynecological health topics and address students' questions and concerns. Provide resources, lesson plans, and strategies for creating inclusive and supportive learning environments.
- **Parent Education Workshops:** Organize parent education workshops or information sessions on gynecological health to engage parents and caregivers in supporting their children's reproductive well-being. Provide resources, tips, and guidance on how to talk to their children about topics related to puberty, sexuality, and reproductive health.
- **Collaborate with School Medical Staff:** Partner with school nurses or health professionals within educational institutions to provide access to confidential and youth-friendly reproductive health services. Offer referrals, information, and support for students who may need additional assistance or medical care.

There can be additional ways which could be useful while collaborating with educational institutions, however, these ones are more complex and not always in the hands of youth workers and/or youth organizations focusing on this topic. Below are few examples:

- **Incorporate Gynecological Health into Curriculum:** Advocate for the inclusion of gynecological health education in school curricula, health classes, or sex education programs. Provide resources, lesson plans, and training for teachers to effectively teach these topics in a sensitive and age-appropriate manner.
- **Advocate for Policy Changes:** Advocate for policy changes at the institutional or governmental level to prioritize gynecological health education in schools and colleges. Work with policymakers, administrators, and community stakeholders to develop and implement policies that support comprehensive reproductive health education for youth.



By collaborating with educational institutions, you can help ensure that youth have access to accurate information, resources, and support to make informed decisions about their gynecological health and well-being.

Tips for Conducting Workshops and Training Sessions on Gynecological Health

Conducting workshops and training sessions on gynecological health requires careful planning, preparation, and delivery to ensure effectiveness and engagement. Here are some tips for conducting successful workshops and training sessions on this topic:

1. **Define objectives:** clearly define the objectives and goals of the workshop or training session. Identify what specific topics will be covered, the target audience, and the desired outcomes.
2. **Know your audience:** understand the background, knowledge level, and needs of your audience. Tailor the content, language, and approach to be appropriate for the participants' age, cultural background, and educational level.
3. **Provide accurate information:** ensure that the information presented is accurate, up-to-date, and evidence-based. Use reputable sources and cite references to support key points.
4. **Use interactive methods:** incorporate interactive methods such as group discussions, case studies, role-playing exercises, and hands-on activities to engage participants and encourage active learning.
5. **Create a safe and supportive environment:** foster a safe and supportive environment where participants feel comfortable asking questions, sharing experiences, and expressing concerns. Respect confidentiality and sensitivity around personal health issues.
6. **Address myths and misconceptions:** address common myths and misconceptions about gynecological health in a non-judgmental and factual manner. Provide clarification and dispel misinformation with accurate information.
7. **Encourage participation:** encourage participation from all participants by asking open-ended questions, soliciting opinions, and inviting sharing of personal experiences (if comfortable). Facilitate discussions to promote learning and peer interaction.
8. **Use visual aids and resources:** utilize visual aids such as slideshows, diagrams, videos, and educational materials to enhance understanding and reinforce key concepts. Provide handouts or resources for participants to refer to after the session.
9. **Include time for questions and answers:** allocate sufficient time for questions and answers at the end of the session to address any lingering concerns or clarify information. Encourage participants to seek clarification or additional information if needed.
10. **Follow-up and evaluation:** follow up with participants after the workshop or training session to gather feedback and assess the impact of the session on their knowledge, attitudes, and behaviors related to gynecological health. Use this feedback to improve future sessions and initiatives.

By following these tips, you can effectively conduct workshops and training sessions on gynecological health and empower participants to make informed decisions about their reproductive well-being.



8. Case Studies and Success Stories from all around the world

Real-life Examples of Positive Impact

Two years ago, Sonakhi Rumi, an 18-year-old ranger (senior guide) from India, had her period when she was taking her 10th grade exam.

The severe cramps that followed were the worst. She could not complete her exam and had to leave the examination hall an hour before the end. She felt embarrassed in front of her friends, so much so that the experience was like a nightmare. She could not face anyone until her mother helped her understand what the period was.

“That is when I realized how misinformed I was about my own body and the process it goes through. Stories of other girls like me were the same. I wanted to help these girls, who like me would feel ashamed for something very natural and normal.” says Sonakhi, *“After that day, every day for me became menstrual hygiene day.”*

Sonakhi, in her endeavor to help girls in a similar situation started the Facebook page **Reboot of thoughts on Menstruation**, where she posts videos daily of people speaking about menstruation, a topic people continue to treat with shame and hesitate to talk about. Sonakhi's work has given her a strong reputation on this subject. She is invited to schools and camps and conducts street plays and performs at various functions to talk about periods. Recently she was delighted to be mentioned by **Menstrual Hygiene Day's twitter handle**, applauding her work. Going forward, she is planning to organize a red day festival. But reputation is not what Sonakhi is looking for. She wants a bold, positive conversation and approach to the discussion on periods with girls, as well as more respect and care from boys.

Challenges Faced and Overcome

From period stigma to peer support

How a pilot initiative in Uttar Pradesh is helping adolescent girls take charge of their menstrual health.

Across Chandauli district, in the northern state of Uttar Pradesh, India, adolescent girls are speaking up about a subject once considered unmentionable – their periods. With support from a new initiative promoting menstrual health and hygiene, they're working to challenge misconceptions and stigma that have been passed down through generations of women.

Although menstrual hygiene products are available in abundance in open markets, limited awareness of safe hygienic methods, hesitation among girls in conservative families to ask for money to buy products, and unaffordability continue to cause barriers to access.

In March 2020, Nutrition International launched a menstrual health and hygiene pilot initiative in Chandauli, building on its work with the state government to address adolescent anemia through weekly iron and folic acid supplementation (WIFAS) and nutrition education.

The pilot project aimed to increase knowledge of menstrual hygiene practices among teachers and health workers, thus improving their capacity to support adolescent girls through this critical life stage.

As a first step, Karmakar's team worked with the state departments of health and education to develop training materials and establish selection criteria for trainers as well as participating teachers – one from every school in the district. Trainers were asked to take on a mentorship role and were required to have experience in the promotion of menstrual health and hygiene at a community level, while teachers needed to have an open mind and a degree of comfort in addressing the issue with students.

Mentors were tasked with guiding teachers through the curriculum and demonstrating counseling techniques. They would also engage staff at anganwadis (community outreach centers), equipping them with the knowledge and skills to reach out-of-school adolescents. Once teachers and health workers were trained, they would be able to hold regular group counseling sessions with adolescent girls across Chandauli.

From these lessons, girls are now not only better at managing their menstrual health, but are sharing this knowledge with their families, and even making dietary changes that support their menstrual health, like the incorporation of iron-rich leafy vegetables, pulses and beetroot in her cooking.

The Important Role of The Internet

Participants identified the internet as an important educational source when it came to menstruation. Alongside being used to find out about alternative products, it can also be used as a platform for attempting to resist and challenge traditional norms about menstruation, through online interactions with peers on forums, blogs and social media. Online, some girls are talking openly about menstruation, providing peer support and offering validation of experiences as online chat rooms provide an anonymous space to talk about taboo subjects. Samaira, 17, mentioned that she ***“watched this YouTuber who made a video about all alternative period products, she tried them all... there were knickers that had pads in them, all sorts...I think YouTubers are so good, they have a platform for education.”***

Hannah Witton was cited by several groups as an influencer who broaches this topic on YouTube. However, Chella Quint, menstrual researcher, ***#periodpositive***, highlights that although ***“YouTube is a good source and there are great resources out there”***, there is also a need ***“to vet the resources”*** to ensure that factual knowledge is being transferred to young audiences. Girls and young people also mentioned Snapchat, BuzzFeed, period tracker apps and online articles as useful ways to explore and learn about menstruation. Kellie, 15, discussed reading about the lived experience of menstruation online: ***“I remember reading one about just how much blood you lost.”*** This real-life information is what girls felt their menstrual education was lacking, and the internet was viewed as a space for learning and sharing experiences. Eimear, 16, explained that learning about the facts online ***“makes me feel more comfortable”***.

Inspirational Stories of Empowerment



1. Menstruation without stigma: Dispelling myths about the menstrual experience and making women feel safe and at ease with their body's natural processes are the aims of a group of volunteers in the state of Zulia. For the past two years they have joined forces to help minimise the effects of menstrual poverty in the poorest sectors of their region.
2. Cloth towels are no longer an embarrassment: The production of handmade sanitary napkins is just a first step for women in poor areas of Venezuela to resolve their menstrual hygiene in a dignified way, and to understand their cycle as a renewal and not as a punishment. What they learn in these sewing workshops can change their lives.
3. Cups that transform: In La Dolorita, a very humble sector of Caracas, several civil society organisations joined forces to curb menstrual poverty through donations of menstrual cups, a programme still nascent but with potential for replication in other regions of Venezuela.

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