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Participatory Development and Menstrual Health Management in South Africa: A Case Study of Project Dignity

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PARTICIPATORY DEVELOPMENT AND MENSTRUAL HEALTH MANAGEMENT IN
SOUTH AFRICA:
A CASE STUDY OF PROJECT DIGNITY

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To all, stay well.

Abstract

Menstrual health management (MHM) poses a significant public health concern in many South African communities. Though the national government is beginning to devote attention and resources to MHM, civil society organizations play a critical role in providing menstrual health products and education to female-bodied individuals who may otherwise lack access. This study examines the praxis and impact of Project Dignity, a nongovernmental organization which distributes washable, reusable sanitary pads and panties to students in public schools. The researcher collected qualitative data through participant observation as well as interviews and focus group discussions with Project Dignity's staff and intended beneficiaries. Using participatory development as a theoretical lens, the study evaluates the organization's impact on students' educational experiences and menstrual health practices. Findings illustrate the practicality of the pads and panties and suggest a limited but positive effect on students' understanding of menstruation and ability to manage their periods comfortably at school. The researcher outlines recommendations for Project Dignity and suggestions for further research.

Introduction

Menstrual health management (MHM) has recently gained recognition in international fora as a significant and actionable public health concern (Sommer et. al, 2015). Scholars and activists have forged a space for MHM in discussions around international development and global gender equity, recognizing women’s ability to safely and comfortably manage their periods as a basic human right. Dispelling stigma surrounding menstruation and promoting universal access to menstrual health education (MHE) and menstrual health products (MHPs) requires sustained, transdisciplinary effort, from government to the grassroots. Analysis of MHM practices and interventions presents a rich, burgeoning field of study with potential to improve the lived experiences of female-bodied individuals in low- and middle-income countries (LMICs).

Within the realm of MHM research and activism, a special focus on girls’ education has emerged; recent qualitative and quantitative studies suggest links between improper MHM and school absenteeism, poor academic performance, and general negative psychosocial consequences for female learners (Chikulo, 2015; Oxfam, 2016; Scorgie et. al, 2016; Kirk & Sommer, 2006; Sommer et. al, 2016, Sommer, 2009). Taking schoolgirls as its focus, the South African government joined the international conversation on MHM in 2011 and has since launched initiatives to provide menstrual health products to “indigent” female learners (*Draft Sanitary Dignity Policy Framework*, 2017).¹ However, many South African women continue to

¹ The *Draft Sanitary Dignity Framework* defines “indigent” persons as those who: “Have reached puberty, commenced menstruation and who-

- (a) attend schools ranked at quintile 1, 2 or 3;
- (b) attend state-owned colleges and universities;
- (c) have been admitted to any state owned mental institutions, hospitals, orphanages, places of care and places of safety;
- (d) have been imprisoned; and
- (e) have been identified by an indigent sanitary management committee (ISMC) or provincial sanitary dignity committee (PSDC): Provided that the relevant ISMC

face limited access to MHPs, adequate water, sanitation, and hygiene (WASH) facilities, and menstrual health education (Oxfam, 2016; Chikula, 2015; Scorgie et. al, 2016). Given this reality, civil society organizations have emerged to fill gaps left by new and underfunded government MHM initiatives. NGOs form just one segment of a growing coalition of civil society actors attempting to advance the economic, social, and political development of South Africa's nascent democracy.

This study critically examines Project Dignity, one such nongovernmental organization working to improve MHM practices among South African schoolgirls. The principal objective of this research is to evaluate the extent to which Project Dignity employs participatory methods to make a meaningful, sustainable impact on students' ability to manage their periods and take full advantage of their educational opportunities. Through interviews with Project Dignity staff members and participant observation, the author analyzes the organization's methods and mission. Concomitantly, through interviews and focus group discussions with students and a teacher at a local secondary school, the author seeks to evaluate the organization's impact on intended beneficiaries by centering their self-described experiences with Project Dignity as well as their personal attitudes, experiences, and needs around MHM. Ultimately, by using Project Dignity as a case study, this particular research endeavor can begin to reveal the ways in which civil society can address MHM among low-income South African students in a sustainable, participatory, and culturally appropriate manner.

The paper first includes a background section which provides factual context essential to understanding MHM in South Africa as well as basic information about Project Dignity. The

or PSDC must submit a motivation to the sanitary dignity oversight committee (SDOC) for the inclusion of such persons as beneficiaries of this Policy Framework and such persons may only be provided with sanitary products if so approved by the SDOC.”

literature review summarizes existing research around MHM both globally and in South Africa, situating it within broader theoretical frameworks on participatory development in relation to African communities and African women's bodies. The author's methodology is then outlined, followed by a presentation of findings organized thematically and a set of recommendations for Project Dignity. The final section includes conclusions and suggestions for further research.

Background

Menstrual Health Management as a Public Health Concern in South Africa

South Africa presents a fascinating context to study the relationship between government, civil society, girls' education, and menstrual health management. South Africa's famously progressive 1996 Constitution champions human rights, dignity, and gender equality. The nation has also reaffirmed its commitment to children's rights and gender equity by ratifying international legislation such as the Convention on the Rights of the Child (CRC), the African Charter on the Rights and Welfare of the Child, the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), and the 1995 Beijing Declaration and Platform for Action. However, significant disparities still exist between South Africa's public commitment to gender equity and the lived realities of South African women and girls.

Menstruation, likely due to its taboo nature and its general perception as a "women's issue," went virtually unaddressed by the South African government until January 2011, when former president Jacob Zuma made a campaign trail pledge to support the provision of free sanitary towels to the country's poorest women (Matlala & Mabuza, 2011). After years of relative inaction, the national government took its first tangible step toward legislative MHM reform in June 2017, when it published a *Draft Sanitary Dignity Policy Framework* meant to provide "an integrated policy on the provision of sanitary products to indigent persons in an effort to ensure that such persons are afforded the opportunity to manage menstruation in a knowledgeable, safe, and dignified manner" (*Draft Sanitary Dignity Policy Framework*, 2017, p. 6). The Framework calls for streamlined, government-funded provision of menstrual health products and menstrual health education, to be overseen by a Sanitary Dignity Oversight

Committee in Pretoria as well as Provincial Sanitary Dignity Committees and Indigent Sanitary Management Committees within specific benefitting institutions.

The Policy Framework includes a useful review of the status quo around MHM in South Africa as of 2017, outlining the efforts each province has made to uphold the sanitary dignity of its residents (*Draft Sanitary Dignity Policy Framework*, 2017, p. 20-22). At the time of its publication, each province except the Western Cape had launched a campaign to provide free MHE and MHPs to impoverished adolescent girls. However, the Framework notes that most of the provincial governments either had not set aside a specific budget for their campaign or funded it largely through partnerships with private corporations, social workers, and civil society organizations. The province of KwaZulu-Natal, where this study takes place, expanded its sanitary towel program in 2018, reportedly setting aside a budget of 109 million rand to provide disposable pads to pupils in schools (Macupe, 2018). However, the Department of Education now faces demands for an investigation into the sanitary towel program from the National Teachers Union and South African Democratic Teachers Union, who claim that the pads are over-distributed, do not meet national quality assurance standards, and may even be funded by corrupt means (*Ibid*; Magubane, 2018).

The *Draft Sanitary Dignity Policy Framework* marks a critical step toward true government prioritization of MHM. However, it remains to be seen whether the government's Sanitary Dignity Campaign will actually facilitate a significant increase in access to MHPs and MHE for South Africa's working class and poor female learners. The Framework, as a guiding policy document, does not carry the force of law and is thus subordinate to the Constitution and all relevant legislation regulating health care, education, the environment, human dignity, and which applies to the provision, manufacturing, and distribution of sanitary products.

Comprehensive implementation of the Framework will require sustained coordination, effort, and allocation of resources by both national and provincial government bodies. Though South Africa's government-led journey toward MHM reform has just begun, civil society organizations such as Project Dignity have been organizing around MHM for years, espousing their own visions for how the sanitary dignity of South African women can best be upheld.

Project Dignity: An Overview

I first identified Project Dignity through a web search in 2017 in furtherance of an academic project for my university. Sue Barnes, Project Dignity's founder, provided me with information about the organization's work via an interview in November 2017. After arriving in South Africa in spring 2018, I contacted Sue again, and she agreed to partner with me as I conducted this research project. All aspects of this study were undertaken with Sue's express permission.

Sue founded Project Dignity in 2013 with the mission of decreasing school absenteeism among South African girls through the provision of menstrual health products. Sue, who has a background in clothing design, created and patented a washable, reusable cotton panty with an absorbent attachable pad. Since the organization's founding, Project Dignity has distributed "Subz Packs" containing panties and clip-on pads to schoolgirls in grades eight through twelve at over 150 schools, mostly in South Africa's KwaZulu-Natal province. Each beneficiary receives a pack including two or three pairs of panties and six or nine clip-on pads, which are expected to withstand three to five years of use. The Subz packs also include an educational booklet. Subz pads and panties are manufactured at a local factory staffed predominantly by black African employees.

Project Dignity is a nonprofit nongovernmental organization funded entirely by donor support. Major sponsors include companies such as Hirsh's, Afrisun, and Tsogo Sun.

Organizations and individuals can contribute general donations to the organization as a whole, or donors may specify which school they would like their funds to benefit. Once funding is secured for a particular school, Project Dignity holds an "activation" at the school's campus.

"Activations" include a thirty-minute to one-hour educational presentation and the distribution of Subz packs to students. Donor organizations often send representatives to activations to present alongside Project Dignity staff. The number of Subz packs distributed during each activation is determined by the amount of funding available from the donor organization. Teachers and/or school administrators are often present for activations and assist with distribution of Subz packs to learners.

Literature Review

An analysis of Project Dignity lies at the intersection of existing debates surrounding global MHM strategies, girls' education, the role of civil society in South African development, and the troubling legacy of development projects which center the bodies of African women. Through a review of relevant literature on MHM, gender equity, and participatory development in South Africa, the author seeks to elucidate this locus of convergence and provide an intellectual framework through which to view Project Dignity's work. Evaluating Project Dignity's impact on learners' MHM practices can help researchers gain a clearer understanding of effective MHM intervention strategies and elucidate how civil society actors in South Africa can employ participatory methods to best serve the needs of female-bodied youth.

Menstrual Health Management as a Global Public Health Concern

Over the past decade, academics and activists have elevated menstrual health management to the status of a global public health concern mandating international attention. In "Comfortably, Safely, and Without Shame: Defining Menstrual Hygiene Management as a Public Health Issue," Sommer et. al (2015) describe the ascendance of MHM as a globally acknowledged public health challenge. Sommer et. al detail the concomitant advent of an "informal coalition" of change agents dedicated to dissolving stigma around menstruation in LMICs and providing educational and material resources to female learners. Academics, corporations, government officials, social entrepreneurs, NGOs, and various others are increasingly devoting resources to ensure girls' access to menstruation-related infrastructure and information in accordance with their basic human rights. Sommer et. al attribute the initial development of the global MHM movement to a growing international concern for promoting gender parity in education in LMICs, which was itself bred from research linking girls'

education to an array of positive societal outcomes such as GDP growth, higher female wage-earning, reduced infant mortality rates, and decreased prevalence of HIV (Department for International Development, 2005; Summers, 1994; Somani, 2017; Kaur & Letic, 2012). Sommer et. al trace the ways that, from approximately 2005 onward, a sustained partnership between corporations, researchers, and advocacy organizations led to the re-framing of MHM as a societal rather than individual issue. This re-conception of MHM in international development circles helped shift responsibility for MHM from girls and their families to the institutions tasked with supporting them, such as schools and government. Sommer et. al note the critical role of qualitative research and participatory and feminist methodologies in this process.

Sommer et al.'s delineation of effective practices to frame MHM as a global public health challenge influenced the design and objectives of this particular research endeavor. In this study, I aim to employ participatory, qualitative feminist methodologies in the context of a partnership between myself, a nongovernmental organization, its beneficiaries, and the corporate entities which support it. In this way, this study seeks to effectively further the ongoing coalitional effort to promote institutional and societal responsibility for MHM and draw global attention to the educational empowerment of girls through MHM service provision.

Though international leaders, thinkers, and activists have begun to approach MHM as an actionable public health concern, existing research on the impact of specific MHM initiatives is limited. In a 2016 article entitled "Do Menstrual Hygiene Management Interventions Improve Education and Psychosocial Outcomes for Women and Girls in Low and Middle Income Countries? A Systematic Review," Julie Hennegan and Paul Montgomery provide one of the few detailed analyses of existing research on the ability of MHM initiatives to improve girls' education, work, and psychosocial wellbeing. Hennegan and Montgomery examine eight studies

involving MHM interventions. Five studies include what Hennegan and Montgomery term “software interventions,” which provide menstrual health education to beneficiaries. Two cases include “hardware interventions,” which provide material menstrual health products, and one case includes both. The included studies span six LMICs, and the “hardware” interventions involve both disposable and reusable sanitary products.

Despite the diverse interventions included, Hennegan and Montgomery conclude that insufficient evidence exists to establish their effectiveness. The authors call for increased systematic research on the educational and psychosocial impact of MHM interventions, noting that the paucity of research on MHM makes it difficult to ascertain which types of interventions have the most potential to improve girls’ educational experiences and physical and mental health. Montgomery and Hennegan’s work highlights the need for further case studies, as well as largescale systematic analysis, of initiatives involving both “hardware” and “software” interventions and their ability to meet the educational and psychosocial needs of female adolescent learners. While a case study of Project Dignity may not address the need for a comprehensive analysis of MHM interventions, it contributes a pertinent evaluation of one such intervention involving both “software” and “hardware” methods.

Menstrual Health Management in South Africa

Though the movement to understand and address MHM is global, MHM practices and interventions must be considered within their unique country- and community-specific contexts. Alongside socioeconomic realities, cultural beliefs around menstruation, gender roles, and the importance of education can greatly dictate the degree to which MHPs and menstrual health education is available in a particular community. As one of the most economically unequal countries in the world, South Africa presents a fascinating

context in which to examine access to menstrual health products and education (World Bank, 2018). However, little MHM research specific to South Africa currently exists.

Oxfam, in a 2016 report on menstruation and MHM in five schools in South Africa's KwaZulu-Natal province, examined “cultural practices, teachings about menstruation, access to sanitary supplies necessary during menstruation and to sanitation, as well as psychological trauma, particularly at menarche” among adolescent girl learners (Oxfam, 2016, p. 5). The study highlighted the lack of menstrual health education among female learners, especially those in rural areas; 75% of the study's 118 respondents deemed the information they were given about menstruation before menarche insufficient. Oxfam also found that many girls experienced menarche as a somewhat traumatic experience. Notably, the vast majority of the study's respondents (from urban, peri-urban and rural areas combined) reported that menstruation did *not* affect their studies, but 94% of rural respondents reported that they were uncomfortable or only sometimes comfortable going to school while on their periods. The results of the Oxfam study reveal trends divergent from similar research performed in other LMICs, which reports much more intense stigmatization of menstruation and a far direr lack of MHM resources (McMahon et. al, 2011; Mahon & Fernandes, 2010; Crofts & Fisher, 2012). This study aims to expand on Oxfam's work and respond to its call for more qualitative research on girls' education and MHM in KwaZulu-Natal schools.

Though Oxfam (2016) did not find strong evidence to suggest high rates of absenteeism due to menstruation, it did find that schools were making little to no effort to maintain adequate standards for disposal of menstrual hygiene products and upkeep of hygienic water, sanitation, and hygiene (WASH) facilities. Scorgie et. al, in a 2016 study of 21 low-income women in Durban, South Africa, corroborated the widespread lack of access to safe, hygienic means of

sanitary pad disposal. Though the study did not focus specifically on MHM in schools, participants discussed the limited extent to which they learned about MHM as part of their formal education and characterized menstruation as a generally debilitating experience (Scorgie et. al, 2016, p. 166). Participants were taught from a young age to hide menstruation from others, which, in turn, made the use of communal latrines and toilets a humiliating experience. Participants were found to almost exclusively use disposable, single-use MHPs.

Scorgie et. al call for further research to “explore the compatibility of reusable MHPs with women’s apparently strong need for privacy during menstruation when there is relatively little access to water and washing facilities, as well as local cultural attitudes toward menstrual blood and its handling” (Scorgie et. al, 2016, p. 172). How does Project Dignity see its reusable pads and panties fitting into these cultural scripts? Is the provision of reusable, rather than disposable, MHPs enough to make women in low-income settings (in the case of this research, schoolgirls) feel safe and comfortable managing their periods? What reservations might girls have with regard to using reusable products due to individual reservations or cultural beliefs? The author aims to fill gaps in existing research by illuminating the significance (or insignificance) of reusability in protecting the sanitary dignity of participants.

Participatory Development and NGO Practice

In addition to literature specific to MHM, this study is situated within broader theoretical frameworks concerning participatory development among civil society and the politics of NGO practice. “Development,” in South Africa as in any other country, is an amorphous concept with a troubled past. Colonial authorities in African countries often saw themselves—or purported to see themselves—as contributing to the moral “development” of backwards, tribalistic African peoples. The modernization theory of development that emerged in the wake of World War I

stressed the need for “less-developed” countries to progress by following the path forged by capitalist Western nations. “Development” in this age became tied to the notion of achieving “economic takeoff,” a period of rapid and sustained economic growth (Rostow, 1960). Later, as multinational and transnational corporations tightened their stranglehold on newly independent African colonies, Ghanaian prime minister Kwame Nkrumah popularized the theory of African neocolonialism, which acknowledges the continued subjugation of supposedly independent African nations to their former colonial rulers under the guise of “development” (Nkrumah, 1965). The late 1960s also saw the emergence of dependency theory, which attributes the underdevelopment of some countries to a global system of power which subjugates nations on the “periphery” to dominant nations at the “core” (Gunder Frank, 1966). This unequal system of dominance, dependency theory posits, is mirrored at the urban-rural level and in international terms of trade.

In the late 1980s, a new “humanist” strand of theory aimed to cure some of development’s ills by shifting its focus to micro-level, “people-centered” solutions to community issues. The ideal of “people-centered” development is reflected in the post-apartheid South African government’s Reconstruction and Development Program, which stressed the need for an “integrated, people-centered development approach” that centered public participation in decision-making (*White Paper on Reconstruction and Development*, 1994, p. 7). This study employs the notion of participatory, people-centered South African development as a framework through which to evaluate the work of Project Dignity and other civil society MHM initiatives. In doing so, it draws from theory set forth in Ismail Davids, Francois Theron, and Kealeboga J. Maphunye’s *Participatory Development in South Africa* (2005). Davids et. al present a nuanced understanding of development as a people-informed and people-driven process. They rely on

what they term the “building blocks of development”: Public participation, social learning, empowerment, and sustainable development, which they use to evaluate South African development initiatives. The authors also advocate for a post-apartheid reorientation of development thinking in favor of decentralized approaches and bottom-up administration which involves community members at the grassroots and is informed by indigenous knowledge systems (IKS). Though the picture of participatory development developed by Davids et. al is both thorough and impressive, the authors largely stop short of describing specific examples of civil society initiatives which promote participatory development in South Africa. This study aims to further the groundwork laid in *Participatory Development* by applying its principles in a real-life setting, in conjunction with self-defined notions of “participatory development” provided by Project Dignity and its beneficiaries.

In addition to shedding light on the practical manifestations of participatory development, a case study of Project Dignity will contribute to a broader scholarly conversation about the role of NGOs in development practice generally. William Fisher’s “Doing Good? The Politics and Antipolitics of NGO Practices” (1997) presents a slightly outdated yet comprehensive survey of literature on the increasingly significant role of NGOs in a globalized world. Fisher insightfully weighs competing arguments about NGOs, acknowledging their ability to bolster local initiatives and social movements and provide needed services as well as their capacity for nefarious government and corporate co-optation and condescension to beneficiaries. Ultimately, Fisher seeks to break down the homogenous notion of the NGO as a “fixed and generalizable entit[y] with essential characteristics” that can be accurately perceived as “doing good, unencumbered by the politics of government or the creed of the market” (Fisher, 1997, p. 442). Rather, Fisher pushes for contextualized, detailed analyses of NGOs and a concomitant acknowledgement of

the fact that each NGO will conceive of terms like “empowerment” and “participation” in its own way. This study takes as an objective a similarly balanced analysis of a particular NGO that constitutes one part of a complex, transnational network. Bearing in mind that “the power to do good is also the power to do harm” (Friedman, 1962), I aim to recognize the successes of a particular organization while acknowledging the sociopolitical implications of NGO work on a local and transnational scale.

Development Projects and African Women

Though the ideal of participatory development aims to incorporate voices from all swaths of society, special attention must be paid to the historical and sociological positionality of development projects centered on the bodies of African women. In "Definitions of Development: An African Perspective" (1977), Achola O. Pala notes the unique ways in which “development” has been used as a tool for African women’s oppression, both historically and in the present day. British colonial officials, Pala explains, commissioned studies to examine African women like scientific specimens, purportedly out of concern for their educational and vocational “development.” She traces these trends through to their present-day, neocolonial manifestations, specifically within the academic realm:

“Like educational systems inherited from the colonial days, the research industry has continued to use the African environment as a testing ground for their ideas and hypotheses... For this reason, the primary orientation to development problems tends to be created on the basis of what happens to be politically and/or intellectually significant in the [Western] metropolises... Such a redefinition of research problems and programs concerning Africa sometimes manifests itself in the emphasis of research orientations which have little to offer African women” (Pala, 1977, p. 10).

Pala goes on to assert that research and development efforts focused on African women should be formulated based on the lived experiences and socioeconomic realities of women themselves. She raises suspicion about those who celebrate the “integration” of African women into global

movements for “development” largely shaped by organizations such as the UN and international aid agencies. She notes that many African women, because they exist in dependent nations and economies, simply do not have the desire or energy to enact the broad-based forms of resistance that Western activists and academics deem suitable for a global “women in development” movement. Rather, they often focus on meeting the immediate basic needs of themselves and their families and seek to participate in their cultures in an autonomous, self-determined manner.

It is clear that African women hold multiple identities which render them vulnerable on a local and transnational scale; thus, development initiatives which aim to benefit African women confront an immense risk of harm. Any project centering African women must acknowledge the history of epistemological, mental, and physical violence committed by academics, researchers, and activists in the name of African women’s “development.” This is particularly true for NGOs that seek to challenge African cultural practices. Obioma Nnaemeka, in “African Women, Colonial Discourses, and Imperialist Interventions: Female Circumcision as Impetus,” critiques the way global human rights discourse has flattened and decontextualized the unique, context-laden struggles of African women, creating a global intellectual framework in which “human rights become a cure-all for all African women’s problems” (Nnaemeka, 2005, p. 29-30). Using female circumcision as a potent example, Nnaemeka illustrates how Western NGOs working within this homogenizing human rights discourse objectify, dominate, and exploit African “beneficiaries.” With a wanton disregard for the needs of women they purport to serve and the cultural complexities surrounding practices such as female circumcision, Western NGOs and activists make African women’s bodies the site of an orientaling, commodifying quest for donations and clout within development circles. “In effect,” Nnaemeka explains, “African women are doubly victimized: first from within (their culture) and second from without (their

‘saviors’)” (Nnaemeka, 2005, p. 30). Through advertisements, works of film, and intrusive interviews, African women’s bodies are put on display to shock Western audiences into absolving their white guilt with their wallets. Meanwhile, sustainable grassroots movements against female circumcision struggle to gain resources and recognition.

African NGOs which engage in truly participatory development practices must actively overcome the global, local, and racial power imbalances in which their work is situated. “African women do not lack agency,” Nnaemeka writes. “What they lack may be the material and structural conditions necessary for the accomplishment of their goals” (Nnaemeka, 2005, p. 39). With this in mind, African NGOs such as Project Dignity which engage the culturally sensitive and intimate topic of menstruation must acknowledge the agency of women at every turn. Truly participatory methods of addressing MHM in the South African context must actively center the voices of beneficiaries with the ultimate aim of creating the structural and material conditions for those women to accomplish their own MHM-related goals.

Summary and Implications for Research

The budding menstrual health management movement aims to incite actors from across sectors to action in furtherance of the physical and mental wellbeing of females worldwide. Research is needed both to elucidate the cultural, social, and economic realities surrounding girls’ experiences of menstruation and MHM practices and to evaluate the impact of specific MHM interventions on girls’ educational experiences and physical and mental wellbeing. While existing research suggests that millions of girls in LMICs lack the education and resources to safely and comfortably manage their periods, effective means of improving MHM must be identified through contextually-informed, sustained research. Academics, activists,

policymakers, and grassroots actors must understand and prioritize MHM before they can implement sustainable, largescale projects or policy solutions.

In South Africa, girls' MHM practices are informed by cultural norms as well as the nation's history of inequality and resultant socioeconomic realities. While the government has recognized the importance of "sanitary dignity," civil society has a large role to play in both promoting proper MHM and pushing policymakers in Pretoria to fulfill their legislative promises. NGOs such as Project Dignity can aid this effort by promoting bottom-up methods of development informed by the desires, opinions, and needs of girls in South African communities. NGOs aiming to aid South African female learners in this regard must also avoid perpetuating a re-colonization of African women's bodies through exploitative, one-sided praxis. A case study of Project Dignity, situated within the rich mosaic of South African society, serves to bolster and connect growing bodies of research regarding menstrual health management, civil society, and participatory development.

Methodology

This study relies on mixed-method collection and analysis of qualitative data over the course of a four-week period. I employed three primary methods of data collection: participant observation, individual interviews, and focus group discussion. I supplemented qualitative data collection with web-based and open source research.

Semi-structured interviews were conducted with two members of the Project Dignity staff and one part-time volunteer who aids the organization in preliminary monitoring and evaluation work. These interviews were conducted in Durban, South Africa, at local coffee shops and malls chosen by participants and, in one case, over Skype. Each participant affiliated with Project Dignity plays a vastly different role in the organization, allowing me to gain a holistic picture of Project Dignity's work informed by various stakeholders.

In addition to interviews, I engaged in participatory observation at four Project Dignity visits to local public schools. During these "activations," Project Dignity gives an educational presentation to female students on reproductive health, sexuality, and menstruation, and then distributes Subz packs. At these visits, I witnessed intended beneficiaries' first contact with the organization, interacted with Project Dignity staff, assisted with distribution, and gained firsthand exposure to the educational component of Project Dignity's work. I also interacted with representatives from the donor organizations which funded the activations at the schools.

Students and one staff member from a local secondary school (hereafter referred to as Participating Secondary School) constituted the second main source of data. Participating Secondary School is a public, co-ed secondary school in Durban with approximately 1,100 students in grades eight through 12. I selected this school because of its proximity to the city center and because Project Dignity distributed Subz packs to almost every female student at the

school in May 2017, providing a large sample of students with almost a year of exposure to the product. A Project Dignity staff member willingly supplied the contact information of the teacher who served as my primary contact at the school. Semi-structured individual interviews were conducted with the teacher as well as two eighth grade students. Due to logistical constraints which rendered further individual interviews infeasible, one focus group discussion was conducted with five students between the ages of 15 and 17. All participants in the focus group knew each other personally and were thus comfortable speaking openly about their experiences with menstruation and Project Dignity's Subz packs. Consent to conduct research in the school was obtained by the school principal and informed consent was obtained by the parents or legal guardians of all participants as well as participants themselves.

Interviews and focus group discussion with students and the teacher at Participating Secondary School took place on campus during school breaks so as not to interfere with learning or instructing. While the school environment provided a useful degree of familiarity to participants, the limited time frame of the daily academic break hindered sustained discussion. Interviews and focus group discussion were based off of prepared sets of questions, but I allowed conversation to flow naturally and permitted tangential conversation in order to build rapport and foster a relaxed atmosphere. At all points, I prioritized the comfort and privacy of participants; for this reason, not all student participants in focus group discussion provided answers to every question. Nonetheless, I was able to gather a significant amount of data pertaining to the students' attitudes regarding menstruation and experiences with Project Dignity. All participants from Participating High School are referred to by pseudonyms to preserve their anonymity.

Limitations of the Study

This study was subject to a range of limitations which influenced the quality and breadth of data collected and, thus, the generalizability of conclusions drawn. The first 11 days of the research period coincided with South African schools' Easter academic break, which further condensed an already narrow three-week timeframe for fieldwork. Additionally, the necessity of gaining informed parental consent for student participation limited the number of schools in which I could work and the number of students whom I could interview. A comprehensive study including many of the schools in which Project Dignity works could provide a clearer picture of the organization's impact on beneficiaries. Though they may certainly inform the work of Project Dignity and other organizations, conclusions drawn from this study regarding best practices in MHM initiatives cannot appropriately be generalized to all South African civil society actors.

In terms of the quality of data collected, the short time frame of the study prohibited me from forming meaningful or sustained relationships with participants, which may have hindered their desire to share personal information concerning menstruation, their bodies, and their beliefs. Though the research aims to make a positive impact on participants by aiding Project Dignity to best serve its beneficiaries, an ideal research endeavor would involve long-term interaction and connection with the school community.

To an extent, language barriers and cultural differences may have prevented me from fully understanding the experiences of student participants, all of whom come from black African, Zulu-speaking families. Though all participants provided information freely and without pressure, students most likely would have felt more comfortable speaking in Zulu with a local researcher.

My limited understanding of the intricacies of South African society and socioeconomic dynamics likely constrained the nuance of my analysis. Additionally, my own conceptions of terms such as ‘dignity,’ ‘equality,’ ‘empowerment,’ ‘development,’ and ‘feminism,’ largely informed by Western academia, may differ from the conceptions of individuals in South African communities. Though every attempt was made to provide a contextually-informed, objective analysis, subconscious implicit biases and my positionality as a white, Western researcher may have influenced my evaluation of the data.

Findings and Analysis

Evaluation of Hardware Intervention

Project Dignity utilizes both “hardware” and “software” interventions in its efforts to promote proper MHM practices among South African learners (Hennegan and Montgomery, 2016). The “hardware” intervention, or the provision of the Subz packs containing panties and attachable reusable sanitary pads, constitutes the central (though not only) element of the organization’s work. The organization’s chief objective, as stated on its website and in its publically available materials and as corroborated by founder Sue Barnes, is to reduce school absenteeism among students through the provision of its reusable sanitary products (Project Dignity, 2014; Barnes, S., personal interview, April 5, 2018). The following section analyzes the effectiveness of Project Dignity’s hardware intervention and its impact on beneficiaries as evidenced by the qualitative data collected.

Use of Product by Beneficiaries

Before one can evaluate the impact of a product on its beneficiaries, it is necessary to interrogate whether and how often beneficiaries are utilizing the product at hand. All five of the participants who had received a Subz pack reported using the product. However, the majority indicated that they only use the product sometimes and often use them in conjunction with disposable sanitary pads. Nqobile, a focus group participant from Participating Secondary School, explains her “strategy” for managing her period:

I usually use [the Subz packs] when I’m out of pads... Last year I think I used them thrice or four times... I thought that maybe if I use the disposable pads, then in [a] time of need I [will] use the [Subz pads], not to waste them, but, yeah.

Other focus group participants who received Subz packs agreed with Nqobile, indicating that they used both sanitary pads and Subz packs to manage their periods. These results are consonant

with those obtained from preliminary monitoring and evaluation efforts undertaken by Emily Burnett, an auxiliary volunteer member Project Dignity’s staff; Emily conducted surveys in three schools which had received Subz packs and found that, of the 263 girls surveyed, 51% used the pads (see Appendix F). However, the students’ responses were at odds with information provided by Miss Sibaya, a teacher at Participating Secondary School, who insisted that many girls at the school do use the Subz pads quite consistently.

During activations at schools, girls appeared excited and eager to use the Subz products, even scrambling to get their Subz packs. When asked in passing whether they planned to use the products, students consistently responded that they would. The disjunction between the learners’ first impressions of the product and their actual rates of usage indicate potential flaws in product distribution and design; these will be delineated later in this section.

Impact on Access to Menstrual Health Products and Rates of School Absenteeism

Project Dignity’s work is premised on the notion that lack of access to MHPs prevents a significant number of adolescent girls in South Africa from attending school and completing their secondary education. All student participants reported having consistent access to some form of menstrual health product before receiving Subz packs. However, participants did acknowledge lack of access to MHPs as a significant issue in their communities. When asked whether statistics claiming that up to 25% of girls in Africa miss or drop out of school because of their periods are likely to be true, participants responded:

Nqobile: It’s half of the truth. ‘Cause it depends on the... on the [economic] state of the family that the girl comes from... Some girls usually come to me to talk about that stuff. So they will tell me that they actually took cloth and cut the cloth and then put—
Sne: Toilet paper!
Nqobile: Yes, and toilet paper... I remember one time ...I actually took cloth myself—I actually took a cloth and then put it.”

One student recounts her friend's refusal to attend school while menstruating:

There are some [girls who don't attend school] ... Yeah, like my friend's friend. She was afraid to go... because she thought the blood would come out of her skirt and everyone would see and be ashamed of her. And she would sit at home until she's finished.

Miss Sibaya also reported that “quite a lot” of students at Participating Secondary School would miss school because of their periods prior to the distribution of government-provided sanitary pads and, later, Subz packs. Though student participants indicated that they were almost always able to obtain sanitary pads from friends, family, or their school, they did acknowledge financial difficulties of obtaining MHPs and the positive impact of Subz packs in this regard. Londile, a grade eight student, noted:

I feel happy about [the reusable pads], because [they] help us. I think that it would help me a lot because my mother sometimes do not have monies to buy for me, and [now] I get it in the school and I love it.

Zama, another student, reported that her family “saves a lot of money” because of the Subz pads. Overall, the data suggest that the Subz packs have a positive, albeit not dramatic, impact on girls' level of access to some form of MHP and related rates of school absenteeism.

Impact on Educational Experiences and Comfort at School

While the Subz pads and panties may not have a significant impact on keeping girls in school, the data collected suggest that Subz reusable pads have a substantial effect on girls' levels of comfort attending school while menstruating. Students expressed a sense of security due to the fact that Subz pads fasten directly onto the accompanying panties. Londile remarks:

Londile: I love [the Subz packs] ... because this one has a panty and [a disposable pad] doesn't have it. And it help[s] us, because with that one you feel like it's going to fall... And this one, you feel like you are wearing just a panty.

Interviewer: You feel relaxed.

Londile: Yes.

During focus group discussion, Nqobile expressed similar sentiment:

[The Subz products] affected me good, 'cause, like, I get to be comfortable and flexible. 'Cause when you're wearing the disposable pads, they move—they literally move. So the panty-pads, they are comfortable, they're fitting well, and you can go on with the day without having worries.

Other student participants corroborated these remarks, explaining that the pads made them “happy,” made them “feel good,” and that the pads would not fall when they played outside. The Subz packs appear to have a positive psychosocial impact on the students as they go about their daily school routines. This is consistent with studies suggesting that MHM initiatives involving a blend of hardware and software interventions may reduce feelings of shame, lack of confidence, insecurity, and difficulty concentrating in school (Montgomery et. al, 2012; Dolan et. al, 2013).

A Sustainable Alternative to Disposable Sanitary Pads

Interviews, participant observation, and focus group discussion indicated that Subz pads and panties provide a sustainable and practical alternative to disposable sanitary pads, and, more specifically, government-issued sanitary pads. Principals at three observed schools indicated that their schools received sanitary pads from the national Department of Education and/or the KwaZulu-Natal provincial government, as envisaged by the *Draft Sanitary Policy Framework*. However, service delivery is flawed; two of the principals indicated that the government provides only one pack of pads per learner, per term, which is not nearly sufficient for the four or five menstrual cycles a typical female learner will experience during a semester. Contrastingly, Subz pads and panties, which can be used for up to five years, provide a long-term medium of menstrual health management. Not only is the reusability of Subz product practically useful, but students noted that it can alleviate negative psychological consequences that can accompany requesting disposable pads from teachers:

Nqobile: Some girls usually come to me to talk about [their periods] ... I usually ask them, why don't you go to the to the office and ask [them] to give you some pads? And they usually say that they are scared because they are scared of saying that they are poor and all that stuff. But so I usually go and ask for them so that, like, I usually try to keep it a secret for them. 'Cause they're really scared.

Given that Subz distributes pads and panties to as many girls as possible at each school, there is likely a lower risk of students feeling embarrassed or needy in relation to their peers and educators. Data also point to Subz packs' particular usefulness in schools with inadequate water, sanitation, and hygiene (WASH) facilities. Miss Sibaya stated that Participating Secondary School only provides five toilets for its approximately 600 female learners, only two of which were working at the time of her interview. She explains the impact of Subz packs at her school:

Yeah, in the toilets there's no sanitary pad bins, so they throw their pads on the floor. It's unhygienic. And there's a lot of airborne diseases because of that... There's been a huge change since Project Dignity came. Because, before, we would have problems with the toilets being stuck—[the girls] would flush their pads in the toilet... [but now] it's not as frequent as before. So what happens is that the toilets are much cleaner [and] the girls are not always asking for sanitary pads anymore.

In light of existing research in KwaZulu-Natal regarding the dearth of adequate WASH facilities in low-income communities (Scorgie et. al, 2016), the ability of Subz pads to reduce students' use of disposable MHPs is particularly significant. These data highlight the potential for reusable MHPs to serve as a sustainable alternative to government-granted disposable pads in low-income South African communities.

Areas for Improvement

Though students expressed general satisfaction with Subz products and described them as easy to use, interviews and focus group discussion revealed areas for improvement in both the design and delivery of Subz pads and panties. In terms of product design, focus group participants noted that the panties are “too light” and expressed apprehension that they would

“tear up and fall” during the course of the day. Another main frustration expressed by students was an issue of service delivery; though every female student at Participating High School was supposed to receive a Subz pack, two of the five focus group participants reported that they never received the product. The students explain:

Interviewer: For those of you who didn't receive the Subz packs, do you know why you never got them?

Sne: There were not enough pads...Yes. There were a lot of us who didn't get them. [Project Dignity] said—they said they would come back and give [pads to] those who didn't get them but, um, they didn't come back.

Interviewer: Okay. And would you want a pair if you had the option?

Sne: Yeah, I would. Yes.

Nqobile: I think it depended on the size. 'Cause there were different sizes. So, uh, there were more small, small sizes and there were less bigger sizes.

Interviewer: And does it make you feel at all upset that you weren't able to get the packs?

Sne: I was so upset.

The described lack of properly sized panties comports with my own observations. Project Dignity currently does not have a process to discern how many of each panty size a given school needs. As a result, several girls at each activation received an inappropriate size due to insufficient stock. Students at activations appeared disappointed and frustrated when they were told that they would not receive pairs of panties in their size. These observations are in line with survey results from Project Dignity's pilot monitoring and evaluation surveys; when asked why they did not use Subz pads to manage their periods, an unspecified but likely significant number of girls cited the fact that the panty was “too big” or “too small.”

In addition to issues with product design and sizing, participants' main point of dissatisfaction with Subz was the necessity of washing the used pads themselves. Though two of the interviewed students reported that they did not mind washing the pads, several focus group participants cited the “yuckiness” of washing the bloody pads as the main impediment to their consistent use of Subz products. This was corroborated by Miss Sibaya, who stated that “some of

the [girls] refused to take [the Subz packs], because they said that they [were] not going to wash blood.” Focus group participants also reported embarrassment related to hanging the pad outside on the clothesline where it might be seen by neighbors.

Summary

Overall, beneficiaries expressed general satisfaction with the Subz products, ranging from tempered appreciation to outright enthusiasm. Though the data suggest that the Subz pads and panties have had a significant impact on the girls’ level of comfort at school, evidence concerning the impact of the Subz hardware intervention on rates of school absenteeism remains inconclusive. Though beneficiaries often preferred to use Subz packs in conjunction with, rather than as an alternative to, disposable sanitary pads, the data suggest that they appreciate Subz packs and view them as helpful to themselves and their communities. Additionally, data gleaned from school staff members suggest that the reusable Subz packs can provide a useful alternative to disposable pads in schools with inadequate WASH and/or waste disposal facilities.

Evaluation of Software Intervention

In addition to the distribution of Subz pads and panties, Project Dignity provides a “software” intervention in the form of educational presentations at schools during activations. At each school, Project Dignity’s outreach facilitator, Nokwazi (Kwazi) Thabethe, gives a thirty-minute to one-hour presentation to students who will receive the Subz packs. The presentation covers topics such as menstrual health, puberty, Project Dignity, and Subz packs.

Though Project Dignity’s main stated goal is to reduce school absenteeism, observations and interviews with staff members revealed a more nuanced vision for the organization centered on holistic empowerment of women through the cultivation of self-awareness and self-respect.

The educational component of the organization's work is intimately tied to this goal, and staff members acknowledge it as central to the organization's mission. The following section presents an evaluation of Project Dignity's software intervention, specifically in relation to its psychosocial impact on learners (both reported and perceived) and the extent to which it embodies ideals of participatory development as outlined by Davids et. al (2005).

Addressing the Need for Menstrual Health Education

Interviews with students revealed a clear need for comprehensive menstrual health education. All but one student participant described menarche as a traumatic experience for which they did not feel prepared. When asked how they felt when they menstruated for the first time, focus group participants replied:

Sne: I was twelve years old. I was scared to tell my mother because I didn't know what she was going to say to me.

Nqobile: I was twelve years old, too. And I was scared. I didn't even tell my mom.

Pume: I was scared of seeing the blood come out from me! I was scared to see my blood.

The girls' reactions echo the sentiment of participants in the Oxfam (2016) study of menstrual health management in five KwaZulu-Natal schools, who also recalled feeling confused and frightened at menarche. Only one participant, Zama, stated that she was not scared when she menstruated for the first time:

I was thirteen years old, but, uh, I wasn't scared, 'cause I was actually taught about it from my mom and my sisters and my granny...[they] asked me, "When are you going to getting your period?"

Zama's statement indicates that communication and education on the topic of menstruation can make menarche a much less frightening experience for young women. This is consistent with existing research on MHM software interventions which found that feelings of confusion and fear at menarche were lower for girls who received the educational intervention (Djalalinia et. al,

2012). When asked about exposure to menstrual health education prior to menarche, one participant, Londile, reported that she knew nothing about her period before she began menstruating. The other student participants indicated that they received information about menstruation from a variety of sources, including friends, family, peers, and Life Orientation classes at school. One participant learned about menstruation from a largescale producer of sanitary products that came and led an educational workshop at her primary school. However, participants' statements revealed the limited nature of the information they received:

Interviewer: In general, what do you remember from the Life Orientation classes... About what to expect for your period?

Londile: They told us that if you are in the periods, don't ever sleep with a man because you can get a baby.

The fact that this was Londile's sole takeaway from her Life Orientation lessons indicates that information about the biological process of menstruation or on how to safely and comfortably manage one's period was likely underemphasized. Other participants describe the information they received about menstruation in school and from friends and family:

Nqobile: Um, I was told by my friends... They were older than me. So they told me that getting your period it's like blood gushing out of you, like... Nasty blood... They told me that if you're on your period and no longer a virgin, you can just bring a baby like that [snaps fingers]... Just like Maria [sic]. And I was like [gasps] are you serious? But then my mother actually told me and I got to understand better than what they told me.

Pume: It was a Life Orientation period. Where we were taught about how—how does girls to go on menstruation, what age did they start on, and my friend, she was doing grade six when she was on her period and [I was] asking her how it's like to get your period. I asked her—is it sore? Is it painful? And then she said, "No, when you're on period you'll find out yourself." She didn't tell me any more information about it.

Interviewer: For the people who learned about it first from family members, did they explain to you, like, "Oh, the egg gets released and then it goes, and your period is, like, the [uterine] walls coming off...?"

Sne: [Laughing] They don't explain it like that.

Thembeke: They told me that when you're getting period, if you sleep with a man you will get pregnant.

The students' efforts seek out multiple sources of information about menstruation suggests that academic lessons on the topic failed to meet their needs. Taken together, the participants' comments concerning reactions to menarche and knowledge about menstruation signals a lack of comprehensive menstrual health education. The data affirm the salience of Project Dignity's software intervention and highlight its potential to address real, actionable issues within school and local communities. They also suggest that Project Dignity's educational presentation may often serve as first source of comprehensive information about menstruation for many beneficiaries; this further underscores the potential significance of the software intervention to participants and, thus, the critical importance of its design and delivery.

Promoting Participatory Social Learning

Project Dignity's educational presentation constitutes a major strongpoint of its organizational praxis. I observed and participated in four such presentations, each of which took place at a rural or peri-urban school with an almost entirely low-income, black African student body. Kwazi, Project Dignity's outreach facilitator, presents orally while other members of the Project Dignity staff use visual aids to display the female anatomy and reproductive system. Participant observation and feedback from beneficiaries suggest that the educational presentations are an effective means of promoting participatory social learning within school communities. "Social learning" here refers to the process of "learning how to use oneself and one's environment to better meet one's needs and those of others" (Davids et. al, 2005, p. 20).

The potency of the presentations is a direct result of Kwazi's ability to facilitate an engaging, thorough conversation which situates menstruation and Subz products within the broader topics of puberty, bodily awareness and health, and self-confidence. With a joyful candor, Kwazi speaks to the girls about everything from the anatomy of the female reproductive

system to the realities of growing pubic hair. Traversing the room and engaging each student directly, she stresses the importance of waiting until one is emotionally, physically, and financially ready to have a child, conveys the excitement of noticing one's body change during puberty, and even emphasizes the importance of wiping properly when one defecates. She does not simply explain how to use Subz products, but rather chooses to provide a much broader lesson about what it means to grow older, begin menstruating, and confront the challenges and excitement of womanhood.

In addition to introducing and cogently connecting a wide range of topics, Kwazi actively employs techniques that enable her to connect with learners on a peer-to-peer level. Incorporating humor, wit, and the use of isiZulu slang words for terms such as 'vagina' and 'breasts,' Kwazi has students giggling moments after her presentation begins. At rural schools with fewer English-speaking students, Kwazi gives the presentation entirely in isiZulu. As a black African, isiZulu-speaking young woman raised in a local township, Kwazi can communicate with girls in their first language and can relate to them via a certain degree of shared experience. However, she views her ability to connect with the girls not as a result of her identity but as a result of her willingness to approach the young girls as peers and equals:

Most girls have received me very, very well. You've just got to have a way of talking to them at their level. I am friends with them, you know? If we are cool... If I tell them that you guys are my friends, you're my skeem-saam,² then they kind of relax, you know? And they open up and they ask questions... I don't think it's really about cultural background... It's all in you... It's just about—you understand that these are teens [and that] they know what you're gonna say to them. They already know more than you know. You can't come there and be like, "You know nothing." They know everything... So the more you ask about what they know, the more they open up and tell you what they know.

Kwazi's remarks reflect the agency she attributes to student beneficiaries. Indeed, she encourages the active participation of the students by asking them questions throughout the

² "Skeem-saam" is a slang word which refers to one's friends or pals.

presentation, soliciting their input, and choosing two students to come forward and demonstrate how to use and wash the Subz pads for their peers. Though some of the girls at the observed activations seemed perplexed by the idea of a reusable sanitary pad, the vast majority of reactions I observed conveyed amusement and excitement. When I asked students in passing how they felt about the presentation and whether they planned to use the product, they expressed approval and an eagerness to use the Subz packs. Student interviewees and focus group participants at Participating Secondary School expressed similar enthusiasm for the Subz educational presentation. Focus group participants recall:

Nqobile: I was impressed [with the presentation], 'cause it actually helped a lot of girls... I was like "Oh, [the] girls are concentrating, [they're] all like 'Yeah, this is really good.'

Sne: Yeah, [they were] asking questions. And they answering.

Nqobile: It was more fun than a usual presentation, 'cause they made jokes about girls being on their periods and girls actually laughed and, like, actually enjoyed themselves.

Literature on social learning and participatory development praxis points to the centrality of building trust with beneficiaries and using multilateral, non-directive development planning methodology (Nnaemeka, 2005; Davids et. al, 2005). Kwazi's reflections, coupled with those of the student participants, illustrate her ability to foster participatory social learning around menstruation by presenting information in ways that are accessible and meaningful to students themselves. In addition to engaging students on a peer-to-peer level, Kwazi and the Project Dignity staff make a concerted effort to collaborate with teachers and principals. At one observed activation, the school principal himself spoke about the importance of menstrual health management, and multiple teachers were present at all four presentations observed. Social learning is necessarily a multistakeholder process; given that teachers and administrators know their school communities best, their engagement with the material presented by Project Dignity is critically important.

The Persistence of Stigma and Shame around Menstruation

Project Dignity’s software interventions aim not only to educate girls about menstruation, but to dispel taboos and secrecy around it. Kwazi incorporates an invigorating degree of forthrightness in her presentations, celebrating terms like “vagina,” and encouraging girls to speak candidly about their experiences, questions and concerns. However, eradicating stigma around menstruation is a feat requiring sustained effort and intervention. Almost one year after the presentation at their school, students at Participating Secondary School reported a persistent sense of shame around menstruation and a general unwillingness to talk openly about it with peers and family members. Participants related this secrecy to embedded cultural norms which tie menstruation to female sexuality and virginity:

Interviewer: Why do you think it is that people feel uncomfortable talking about [menstruation] openly?

Nqobile: I think because of the family and I think because of the history. ‘Cause [Zulu] families usually pressure girls to always be perfect. And, uh, talking about periods usually brings those feedbacks that says, ‘Ah, my family, they are just on and on and on about me being perfect and being a virgin until 21 and then get married before I actually have sex, and the responsibilities that I have to take.’ And, uh, the yuckiness.

Interviewer: Do you think that people don’t really like to talk openly about their period—do you think that’s related to sex? Or do you think the two things are seen as separate?

Nqobile: I think it’s related to sex. Because others don’t want anyone to talk about sex. And others are scared to tell us that they’re no longer virgins, or ‘cause some other girls usually gloat about being a virgin... It’s just a shame to not be a virgin in South Africa.

Other focus group participants corroborated Nqobile’s input. Miss Sibaya offered somewhat contradictory information regarding secrecy around menstruation at the school; when asked if Project Dignity stimulated a change in how students feel about their periods, she replied:

Before it was a secret, you know? You would only speak to your mother about it. But now, because there’s all these products available at school, they’re more open about it. They even make jokes about it at school—in class, you know? ... So, um, they’re more open about it and... it’s just an open secret, you know?

Miss Sibaya’s remarks point to a positive progression in conversation around menstruation at the school; however, an “open secret” is still a secret. Collectively, data from Miss Sibaya and

student participants portray menstruation as a somewhat shrouded topic in their school environment. This is especially evident with regard to the participants' male peers; one student remarked that boys at the school were "disgusted" by sanitary pads. Though Project Dignity's educational intervention likely inspired girls to be more open about their periods, they may not feel fully empowered to discuss menstruation in the long run.

Summary

Project Dignity's software intervention takes the form of an engaging, playful, and thoroughly educational presentation. Data suggest that Project Dignity's presentations may often provide valuable information about menstruation, self-care, and womanhood that students have not previously received. This is consistent with existing research which finds that software interventions generally improve knowledge of menstruation and, at times, improve menstrual management practices (Hennegan & Montgomery, 2016). The comprehensiveness of Project Dignity's presentations reflects the organization's mission to develop students' self-esteem and pride in their bodies in addition to improving their menstrual health practices. Data suggest that students and teachers find the presentations enjoyable, impressive, and informative. However, it is unclear whether the presentations instigate a long-lasting shift in the culture around menstruation at schools.

Moving Forward: Recommendations

A major objective of this study is to help Project Dignity refine its practices to best serve the needs of its intended beneficiaries. Based on the qualitative evidence analyzed above, as well as input from Project Dignity staff, I have identified short-term and long-term goals that the organization may wish to pursue. Though they are by no means comprehensive, the

recommendations are intended to help the organization bring its practices even more in line with ideals of sustainable participatory development.

Short-term and Technical Recommendations

In the near future, Project Dignity may wish to consider minor improvements to the design and delivery of Subz pads and panties. Based on feedback from participants, a panty composed of thicker fabric would better meet students' needs. Additionally, improvements should be made to streamline the distribution of packs and ensure that each student receives an appropriately sized panty. Student participants agreed that the Project Dignity staff should coordinate with teachers or administrators to assess how many of each size of panty are needed at each school. This could be accomplished via a written or electronic form. In the context of schools with large student bodies, multiple teachers could ask the female students in their classes which size they would prefer and compile responses. Participants noted that this process should be undertaken privately, due to the fact that many students may be uncomfortable discussing the pads or their preferred panty size in front of their male peers.

Given that students cited reluctance to wash their used Subz pads as a main reason why they did not consistently use the product, Project Dignity should place more emphasis in its educational presentation on the fact that menstrual blood is natural and not a cause for repulsion. Project Dignity staff could also present alternative means of washing the pads. Emily Burnett, who has performed preliminary monitoring and evaluation work for the organization, explained to me that one can wash the pads by placing them in an opaque plastic container (such as an empty yogurt container), shaking the container, and then rinsing the pad in clean water (E. Burnett, personal interview, April 16, 2018). Students may be more open to this method of

washing the pads than the one Project Dignity currently advocates, which involves rinsing and then massaging the used pads under the tap.

Inciting Action: From Social Learning to Empowerment

Though “empowerment” is an amorphous term, Davids et. al (2005) describe it as the development of the “power to” exercise control over one’s life, which stems from a “power from within,” or a conception of oneself as capable and able to occupy space in decision-making. Project Dignity, which uses the tagline “empowering girls to reach their full potential” in its work, clearly recognizes the value of holistic empowerment of young women. Its current work focuses mainly on fostering “power from within,” in that its educational component aims to help young girls realize their own beauty, worth, and ability to succeed. In the context of the high school observed, this work undoubtedly addresses a need in a community where many young women face financial insecurity, teenage pregnancy, sexual violence, and parental absence (Miss Sibaya, personal interview, April 23, 2018).

Project Dignity should take as a long-term goal, however, a shift from developing girls’ “power from within” into the “power to” instigate positive change in their lives and communities. Data collected from students suggest that they often turn to their peers for support around menstrual health management. When asked about their vision for the organization, Project Dignity staff members expressed support for developing a peer-led component of their programming, which would involve students themselves presenting at activations, leading educational discussions or workshops in their communities, and engaging with extracurricular programming around menstruation. If and when resources allow, Project Dignity should work to facilitate this type of participatory, peer-to-peer learning, potentially through the establishment of Project Dignity clubs or chapters at individual schools. Project Dignity staff could develop

conversation guides and informational resources which student leaders could use to facilitate healthy conversations about puberty, gender equality, and menstruation within their own communities. This would expand and prolong the effect of Project Dignity's educational intervention and empower the girls to actively promote their own right to manage their periods with dignity. The establishment of intra-school chapters would also aid Project Dignity in forging sustained, meaningful relationships with schools and individual students after initial activations.

Educators, who are also directly impacted by Project Dignity's work, can play an important role in this empowerment process. Given that beneficiaries described a lack of comprehensive MHM education in their Life Orientation classes, Project Dignity should consider holding workshops with teachers and administrators to discuss teaching about menstruation in a way that fosters self-awareness and self-confidence. Educators' expertise and knowledge of their own communities, coupled with Project Dignity's resources and experience engaging students, can ensure that girls feel prepared and even excited for menstruation.

Participation and People-Centered Organizational Reform

Davids et. al note that "development is people-centered only if it entails the *active* and *voluntary* participation of its intended beneficiaries" (Davids et. al, 2005, p. 19). To this end, Project Dignity should aim to center the voices of students by developing a comprehensive monitoring and evaluation system. Project Dignity has already made strides in this regard by administering follow-up group and individual surveys at several schools (see Appendix F). Project Dignity should consider including more open-ended questions to elicit more information about the impact of the educational component of Project Dignity's work. For example, in addition to answering questions specific to their use of Subz products, students could be asked

how they feel about their periods and what would be most useful to them in managing their periods beyond the provision of Subz pads and panties. In this way, the organization could ensure that it shapes its own practices and goals in direct response to community needs. School chapters or afterschool clubs, as discussed above, could also play an instrumental role in this feedback and collaboration process.

Integration and Sustained Partnership

Participatory development mandates integrated action from all levels of society (Davids et. al, 2005). In pursuit of lasting, integrated reform around MHM, Project Dignity should partner with stakeholders in government and civil society as well as beneficiaries at the grassroots. Founder Sue Barnes expressed a willingness to collaborate with government in addressing MHM in South African communities, envisioning a system where government agencies could fund civil society initiatives working on the ground to craft specialized, sustainable solutions. NGOs can often serve as useful alternative resources when the state fails to deliver social services (Fisher, 1997). However, working to contact government representatives and gaining their support could pave the way for an integrated, rather than disjoint, vision for the future of MHM in South Africa.

In this vein, Project Dignity should consider collaborating with the numerous other local NGOs and civil society organizations working on MHM. As of now, Project Dignity views its work as separate from that of other MHM-based organizations (S. Barnes, personal interview, April 5, 2018). However, by fostering collaboration rather than competition, Project Dignity can combine its resources with those of other organizations to best serve local communities. Building a network of motivated change agents will likely result in more sustainable and far-reaching reform than isolated efforts by individual organizations.

Conclusions

Menstrual health management in South Africa presents a complex, multifaceted issue that cannot be addressed by any one organization. However, civil society plays a critically important role in providing socially and economically disenfranchised communities with the resources to pursue their self-defined MHM priorities. Interviews with students at Participating High School illustrated the persistence of stigma around menstruation. They also evidenced a lack of comprehensive menstrual health education and, at times, lack of access to menstrual health products. Though they did have some qualms with the Subz products, students expressed appreciation for and approval of Project Dignity's hardware and software interventions. Overall, Project Dignity's distribution of reusable sanitary pads and panties, in conjunction with its educational presentation, appears to have a limited but positive impact on the educational experiences of learners and their level of access to menstrual health products. Interviews with Project Dignity staff members and participant observation highlighted the organization's efforts to connect with learners and encourage holistic empowerment of students to achieve their educational, professional, and personal goals.

The study revealed opportunities for Project Dignity to refine its practice to further promote sustainable participatory development in the communities it serves. These include minor alterations to product design and delivery; implementation of a comprehensive monitoring and evaluation strategy; expanding programming to include students through extracurricular clubs or school chapters; and expanded partnerships with community members, government stakeholders, and fellow civil society organizations, among others. Other NGOs working around MHM can glean insight from Project Dignity's praxis, impact, and potential.

Though the results of this study are based upon a small sample of South African learners, they suggest that students often face barriers to obtaining MHPs and confront stigma surrounding menstruation. Observations and analysis of data collected underline the need for further advocacy around MHM in South African communities. Efforts to address MHM must be culturally and contextually sensitive, informed by past and present inequalities, and molded around ideals of participatory development. Civil society organizations such as Project Dignity should center the voices of intended beneficiaries in every aspect of their work, ideally formulating their intervention strategies alongside community members from the outset.

Though enabling every female-bodied South African to safely and comfortably manage their period will be an arduous process, organizations such as Project Dignity are beginning to pave the way forward. Their work serves to establish menstrual health management as an actionable public health issue worthy of governmental and public attention. Simultaneously, the results of this study suggest Project Dignity's MHM interventions positively impact the lived experiences of intended beneficiaries. Through enhanced collaboration, participatory methodology, and sustained action, the growing coalition of MHM change agents in South Africa can foster ethical, meaningful development around menstruation and female empowerment.

Recommendations for Further Study

The scope of this study was limited by time constraints and logistical difficulties. Due to the small sample size of participants, conclusions regarding students' educational and personal experiences as they relate to menstruation are not readily generalizable, though the results of this study can be used to inform further research in schools on students' MHM practices. In order for both the national government and civil society to best serve South African communities, further

research is needed to identify their needs and desires around MHM. To gain a clearer picture of MHM among adolescent learners in South Africa, more comprehensive analysis involving multiple schools and a much larger sample of students is needed. Specifically, given contradictory existing evidence, further research should discern the actual impact of menstruation and MHM interventions on rates of school absenteeism. Future research should also explore the impact and extent of the government's sanitary dignity campaign, as iterated in the *Draft Sanitary Dignity Framework*.

This study only evaluated the impact of Project Dignity's work in one school, which is not representative of all schools the organization has partnered with. Further research among Project Dignity's intended beneficiaries is needed to further elucidate the effect of Project Dignity's software and hardware interventions on girls' educational experiences and MHM practices.

Future research should also examine other civil society organizations working on MHM in South Africa and in other countries. By understanding the praxis and impact of many different civil society actors, a clearer vision for the appropriate role of civil society in advancing South African MHM will emerge. Research which examines other MHM-based organizations can also facilitate dialogue and collaboration between organizations, thus strengthening the growing coalition of MHM change agents in the country. Taken together, this research can provide a systematic analysis of the impact of MHM interventions in South African communities. Such an analysis will reveal best practices for civil society actors hoping to promote sustainable participatory development in South African communities and beyond.

Bibliography

Primary Sources

- Barnes, Sue. (2018, April 5). Personal interview.
 Burnett, Emily. (2018, April 16). Skype interview.
 Thabethe, Nokwazi. (2018, April 25). Personal interview.
 Anonymous teacher. (2018, April 23). Personal interview.
 Anonymous student A. (2018, April 17). Personal interview.
 Anonymous student B. (2018, April 17.) Personal interview.
 Anonymous student C. (2018, April 19). Focus group interview.
 Anonymous student D. (2018, April 19). Focus group interview.
 Anonymous student E. (2018, April 19). Focus group interview.
 Anonymous student F. (2018, April 19). Focus group interview.
 Anonymous student G. (2018, April 19). Focus group interview.

Secondary Sources

- About Us - Project Dignity. (2014). Retrieved May 1, 2018, from <http://www.projectdignity.org.za/about-us/>
- Chikulo, B. C. (2015). An Exploratory Study into Menstrual Hygiene Management amongst Rural High School for Girls in the North West Province, South Africa. *African Population Studies*, 29(2), 1971-1987. doi:10.11564/29-2-777
- Crofts, T., & Fisher, J. (2012). Menstrual Hygiene in Ugandan Schools: An Investigation of Low-Cost Sanitary Pads. *Journal of Water, Sanitation and Hygiene for Development*, 2(1). doi:10.2166/washdev.2012.067
- Davids, I., Theron, F., & Maphunye, K. (2012). *Participatory Development in South Africa: A Development Management Perspective*. Pretoria: Van Schaik.
- Djalalinia S., Tehrani F.R., Afzali H.M., Hejazi F., Peykari N. (2012). Parents or School Health Trainers, Which of Them is Appropriate for Menstrual Health Education? *International Journal of Preventive Medicine*, 3(9): 622-7. PMID: 23024851
- Dolan, C. S., Ryus, C. R., Dopson, S., Montgomery, P., & Scott, L. (2013). A Blind Spot In Girls Education: Menarche And Its Webs Of Exclusion In Ghana. *Journal of International Development*, 26(5), 643-657. doi:10.1002/jid.2917
- Fisher, W. F. (1997). Doing Good? The Politics and Antipolitics of NGO Practices. *Annual Review of Anthropology*, 26(1), 439-464. doi:10.1146/annurev.anthro.26.1.439
- Friedman, M. (1962). *Capitalism and Freedom*. Chicago: University of Chicago Press.

- United Kingdom, Department for International Development. (2005). *Girls' Education: Towards a Better Future for All*. London: Department for International Development.
- Gunder Frank, A. (1966). The Development of Underdevelopment. *Monthly Review*, 18(4), 17-31. Retrieved April 16, 2018.
- Hennegan, J., & Montgomery, P. (2016). Do Menstrual Hygiene Management Interventions Improve Education and Psychosocial Outcomes for Women and Girls in Low and Middle Income Countries? A Systematic Review. *Plos One*, 11(2). doi:10.1371/journal.pone.0146985
- Kaur, N. G., & Letic, J. (2012). *Female Education and Economic Growth: Theoretical Overview and Two Country Cases*(Unpublished master's thesis). University of Gothenburg School of Business, Economics and Law.
- Kgware, M. (2016). *Menstruation and Menstrual Hygiene Management in Selected KwaZulu-Natal Schools* (Publication) (C. Martin, Ed.). Oxfam.
- Macupe, B. (2018, April 20). Call for Probe as Pads Pile Up in KZN. Retrieved May 2, 2018, from <https://mg.co.za/article/2018-04-20-00-call-for-probe-as-pads-pile-up-in-kzn>
- Magubane, T. (2018, April 15). "Sanitary Towels Are Not SABS approved" - Natu. Retrieved May 2, 2018, from <https://www.iol.co.za/mercury/sanitary-towels-are-not-sabs-approved-natu-14455038>
- Mahon, T., & Fernandes, M. (2010). Menstrual hygiene in South Asia: A neglected issue for WASH (water, sanitation and hygiene) programmes. *Gender & Development*, 18(1), 99-113. doi:10.1080/13552071003600083
- Matlala, A., & Mabuza, K. (2011, January 10). Zuma Promises Free Towels for Women. Retrieved May 1, 2018, from <https://www.sowetanlive.co.za/news/2011-01-10-zuma-promises-free-towels-for-women/>
- McMahon, S. A., Winch, P. J., Caruso, B. A., Obure, A. F., Ogutu, E. A., Ochari, I. A., & Rheingans, R. D. (2011). The Girl with Her Period is the One to Hang Her Head: Reflections on Menstrual Management Among Schoolgirls in Rural Kenya. *BMC International Health and Human Rights*, 11(1). doi:10.1186/1472-698x-11-7
- Montgomery, P., Ryus, C. R., Dolan, C. S., Dopson, S., & Scott, L. M. (2012). Sanitary Pad Interventions for Girls Education in Ghana: A Pilot Study. *PLoS ONE*, 7(10). doi:10.1371/journal.pone.0048274
- Nkrumah, K. (1965). *Neo-Colonialism, The Last Stage of Imperialism*. London: Thomas Nelson & Sons.

- Nnaemeka, O. (2005). African Women, Colonial Discourses, and Imperialist Interventions: Female Circumcision as Impetus. In *Female Circumcision and the Politics of Knowledge: African Women in Imperialist Discourses* (pp. 27-43). Westport, CT: Praeger.
- Pala, A. O. (2005). Definitions of Women and Development: An African Perspective. *African Gender Studies A Reader*, 299-311. doi:10.1007/978-1-137-09009-6_16
- Project Dignity. (2014). Retrieved from <http://www.projectdignity.org.za/>
- Rostow, W. W. (1960). *The Stages of Economic Growth: A Non-Communist Manifesto*. London: Cambridge University Press.
- Scorgie, F., Foster, J., Stadler, J., Phiri, T., Hoppenjans, L., Rees, H., & Muller, N. (2015). "Bitten By Shyness": Menstrual Hygiene Management, Sanitation, and the Quest for Privacy in South Africa. *Medical Anthropology*, 35(2), 161-176. doi:10.1080/01459740.2015.1094067
- Somani, T. (2017). Importance of Educating Girls for the Overall Development of Society: A Global Perspective. *Journal of Educational Research and Practice*, 7(1), 125-139. doi:10.5590/JERAP.2017.07.1.10
- Sommer, M., & Kirk, J. (2006). Menstruation and Body Awareness: Linking Girls' Health with Girls' Education. *Royal Tropical Institute*, 1-22. Retrieved April 16, 2018.
- Sommer, M. (2009). Ideologies of sexuality, menstruation and risk: Girls experiences of puberty and schooling in northern Tanzania. *Culture, Health & Sexuality*, 11(4), 383-398. doi:10.1080/13691050902722372
- Sommer, M., Hirsch, J. S., Nathanson, C., & Parker, R. G. (2015). Comfortably, Safely, and Without Shame: Defining Menstrual Hygiene Management as a Public Health Issue. *American Journal of Public Health*, 105(7), 1302-1311. doi:10.2105/ajph.2014.302525
- Sommer, M., Caruso, B. A., Sahin, M., Calderon, T., Cavill, S., Mahon, T., & Phillips-Howard, P. A. (2016). A Time for Global Action: Addressing Girls' Menstrual Hygiene Management Needs in Schools. *PLOS Medicine*, 13(2). doi:10.1371/journal.pmed.1001962
- South Africa, Department of Women (2017). *Draft Sanitary Dignity Policy Framework*. Pretoria: Republic of South Africa Department of Women.
- South Africa - Overview. (2017, May 3). Retrieved April 16, 2018, from <http://www.worldbank.org/en/country/southafrica/overview>
- South Africa. (1994). *The Reconstruction and Development Programme (RDP)*. Pretoria: Republic of South Africa.

Summers, L. H. (1994). *Investing in All the People: Educating Women in Developing Countries* (Rep.). Washington, DC: The International Bank for Reconstruction and Development/The World Bank.

Appendices

Appendix A: Sample informed consent form for participants

SIT Study Abroad

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CONSENT FORM FOR PARTICIPANTS

1. Brief description of the purpose of this study

The purpose of this study is to explore the role of civil society in promoting proper menstrual health management among female learners in South African schools. The research will include a case study of Project Dignity, a nongovernmental organization which provides washable, reusable sanitary products to girls in rural and low-income South African schools. The researcher seeks to conduct interviews with members of Project Dignity staff, school administrators and staff members, and female students to better understand:

- a) How schoolgirls feel about menstruation and manage their periods;
- b) The extent to which schools provide female learners with menstrual health products and education; and
- c) Whether and how Project Dignity impacts girls' educational experiences and their ability to safely and comfortably manage their periods.

Data collected during this study will be used for the SIT independent study project (ISP) and may also be used in the following academic year as part of the researcher's personal honors thesis through Washington University in St. Louis. By signing below, the participant consents to use of this data for both projects. Consent to this research is completely voluntary and may be withdrawn at any time during or after the period of study.

2. Rights Notice

In an endeavor to uphold the ethical standards of all SIT ISP proposals, this study has been reviewed and approved by a Local Review Board or SIT Institutional Review Board. If at any time, you feel that you are at risk or exposed to unreasonable harm, you may terminate and stop the interview. Please take some time to carefully read the statements provided below.

- a. **Privacy** - all information you present in this interview may be recorded and safeguarded. If you do not want the information recorded, you need to let the interviewer know.
- b. **Anonymity** - all names in this study will be kept anonymous unless the participant chooses otherwise.
- c. **Confidentiality** - all names will remain completely confidential and fully protected by the interviewer. By signing below, you give the interviewer full responsibility to uphold

this contract and its contents. The interviewer will also sign a copy of this contract and give it to the participant.

Researcher agreement:

1. Your participation is voluntary, and you are free to withdraw your consent at any time during and after the interview.
2. All the information you give me will be treated confidentially.
3. I will not disclose your name, unless you give your express permission for me to do so.
4. When reporting on the findings I will use other names where appropriate in place of your name (e.g. coded/disguised names).
5. The information will be stored in a safe manner at all times in a place to which I alone have access.

Participant Agreement:

The above information has been explained to me and I understand it. My name will not be disclosed. I allow my information to be used in a confidential manner that will not harm me, my professional and my private life in any way. My individual privacy will be maintained in all published and written data resulting from this study. I understand that you will record the interview and/or take a sample of my image (e.g. picture/photographs) as data for the study. I understand that the recordings and/or photographs will not have my name on them and no one will be able to use them for commercial purposes or **any form of publication** including personal blogs and online photo albums without my express written permission. I understand that if I have any questions or complaints about this study or the researcher that I can anonymously contact Imraan Buccus of the School for International Training at (031) 207 5513.

Participant's name printed

Participant's signature and date

Interviewer's name printed

Interviewer's signature and date

Appendix B: Sample informed consent form for parents/legal guardians



Dear Parent/Guardian,

Re: Request for permission for your child/ward to participate in a research study.

I am writing to request your permission for your child to participate in a research study titled: **“The Role of Civil Society and Participatory Development Initiatives in South African Menstrual Health Management: A Case Study of Project Dignity.”**

My name is Natalie Geismar, and I am studying towards my undergraduate degree at Washington University in St. Louis in the United States. From January-May 2018, I am studying in Durban through the School for International Training (SIT). Each SIT student will complete an independent research project during the month of April 2018. My research project seeks to investigate the role of civil society in helping South African schoolgirls safely and comfortably manage their periods. The study will examine Project Dignity, a local NGO which distributes reusable sanitary pads to schoolgirls, as a case study. Through qualitative interviews with students at schools where Project Dignity has worked, I hope to evaluate the organization’s impact on the girls’ educational experiences and ability to manage their periods.

I require female secondary school students to interview for my research. I would be grateful if you would consent to your daughter participating in the study. If you choose to allow your daughter to participate, she will be invited to participate in an individual interview. This will be done at school during breaks or at times when the learner is available to participate in the study, without interfering with her learning in any way. The interviews will be audio-taped with you and your daughter’s permission. The data collected will be transcribed and made available to your daughter upon request to ensure that all information has been captured correctly. The tapes and transcripts will be kept in a secure storage.

Confidentiality and anonymity will be maintained at all times, in the analysis of the data and the completion of the final research paper. Your daughter’s identity will remain anonymous throughout the study and in any publications produced from it (we will not use their real names or the name of the school). In addition, her participation in the study is voluntary and she may decide not to participate without any penalty. She is also free to withdraw from the project at any time during or after data collection without penalty.

I may be contacted at:

Tel: 0795524735

E-mail: ngeismar@wustl.edu

My supervisor’s contact details are:

Dr Bronwyn Mardia Anderson, PhD

School of Education
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Ashwood
3605
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Tel: +27 (0) 31 260 2603
Fax: +27 (0) 31 260 3793

You may also contact the **School for International Training** through:
Dr. Imraan Buccus
SIT Social and Political Transformation Academic Director
Tel: 031 207 551

CONSENT FORM

I, _____ (Full name of parent/guardian) hereby confirm that I understand the contents of this document and the nature of the research project, and I consent to my daughter/ward participating in the research project. I understand that she is at liberty to withdraw from the project at any time, should she so desire.

SIGNATURE OF PARENT/GUARDIAN

DATE

Appendix C: Sample informed consent form for school administrators/principals

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CONSENT FORM FOR PRINCIPALS/SCHOOL ADMINISTRATORS

3. Brief description of the purpose of this study

The purpose of this study is to explore the role of civil society in promoting proper menstrual health management among female learners in South African schools. The research will include a case study of Project Dignity, a nongovernmental organization which provides washable, reusable sanitary products to girls in rural and low-income South African schools. The researcher seeks to conduct interviews with members of Project Dignity staff, school administrators and staff members, and female students to better understand:

- a) How schoolgirls feel about menstruation and manage their periods;
- b) The extent to which schools provide female learners with menstrual health products and education; and
- c) Whether and how Project Dignity impacts girls' educational experiences and their ability to safely and comfortably manage their periods.

Data collected during this study will be used for the SIT independent study project (ISP) and may also be used in the following academic year as part of the researcher's personal honors thesis through Washington University in St. Louis.

In an endeavor to uphold the ethical standards of all SIT ISP proposals, this study has been reviewed and approved by a Local Review Board or SIT Institutional Review Board. Consent of all participants is voluntary and may be withdrawn at any time. All data collected from students and school staff members will be treated confidentially and anonymity will be maintained.

CONSENT FORM

I, _____ (full name of Principal/school administrator), hereby confirm that I understand the contents of this document and the nature of the research project, and I consent to the students and staff members at _____ (name of school) participating in this research project. I understand that all participants are at liberty to withdraw from the project at any time, should they so desire.

SIGNATURE OF PRINCIPAL

DATE

RESEARCHER SIGNATURE

DATE

Appendix D: Sample interview questions for student interviewees and focus group participants

- What is your name?
- What is your age?
- Where are you from?
- How long have you attended this school?
- How do you like school?
- At what age did you first experience menstruation?
- How did you feel when you first got your period?
- How much did you know about menstruation before you got your period?
- Did you learn about menstruation in school? What do you remember from those lessons?
- How do you feel about your period, generally?
- Have you ever missed or gone home from school because of your period?
- What do you know about Project Dignity?
- What did you think of the educational program Project Dignity ran when they first visited your school?
- How do you feel about the Subz Pads and Panties that you received from Project Dignity?
 - How often do you use the Subz Pads/Panties?
 - Are the Subz Pads/Panties easy to use?
- How did you typically manage your period before Project Dignity visited your school?
 - How do you typically manage your period now?
- What does ‘dignity’ mean to you?
- What would be most useful to you to help you manage your period, both at school and outside of school?
- How comfortable do you feel attending school on your period? Have Subz Pads and Panties impacted your degree of comfort?
- Does your school provide students with any pads or other menstrual health products?
- Have your peers ever treated you differently because of your period?
- Do you have any feedback for Project Dignity staff on their product or programming?

Appendix E: Sample interview questions for teachers/school administrators

- What is your name?
- Where are you from?
- How long have you been teaching at/principal of this school?
- How would you describe the school's population?
- How would you describe the girls at this school?
- In your opinion, what are the school's biggest needs?
- To your knowledge, how do girls at this school handle their periods?
- Does the school provide education around menstruation and menstrual health in its formal curricula?
- Does the school provide any form of menstrual health product to learners?
- Does the government supply this school with any disposable sanitary pads?
- To your knowledge, do girls at this school ever miss school because of their periods?
- How did Project Dignity first get in contact with your school?
 - For principals: What made you decide to let Project Dignity distribute Subz packs here?
- What do you think of Project Dignity?
- What does "dignity" mean to you?
- What do you recall from Project Dignity's initial visit here?
- To your knowledge, how do the students here feel about the Subz packs and panties distributed by Project Dignity?
- What do you think would be most useful to you to help the students here manage their periods?

Appendix F: Summary of preliminary Project Dignity monitoring and evaluation results (provided by Emily Burnett)



SUBZ & PROJECT DIGNITY – Monitoring and Evaluation

The goal of Project Dignity is to help teenage girls stay in school during their menstrual periods by providing them with reusable, sustainable cloth pads and panties (SUBZ). Many girls around South Africa cannot afford to buy sanitary pads every month and will therefore skip school during their periods. Project Dignity aims to provide girls with an alternative to expensive, disposable products with SUBZ washable pads, allowing girls to attend school during their periods and giving them more confidence in managing their menstruation. The pads and panties have been designed to provide a comfortable, washable alternative to disposable pads and they are made of quality materials that should last up to five years.

Project Dignity has recently started a Monitoring and Evaluation Program to assess whether or not its objectives and goals are being met. Additionally, this data will be helpful to find areas of improvement, whether that is on the product itself or on the methods of distribution.

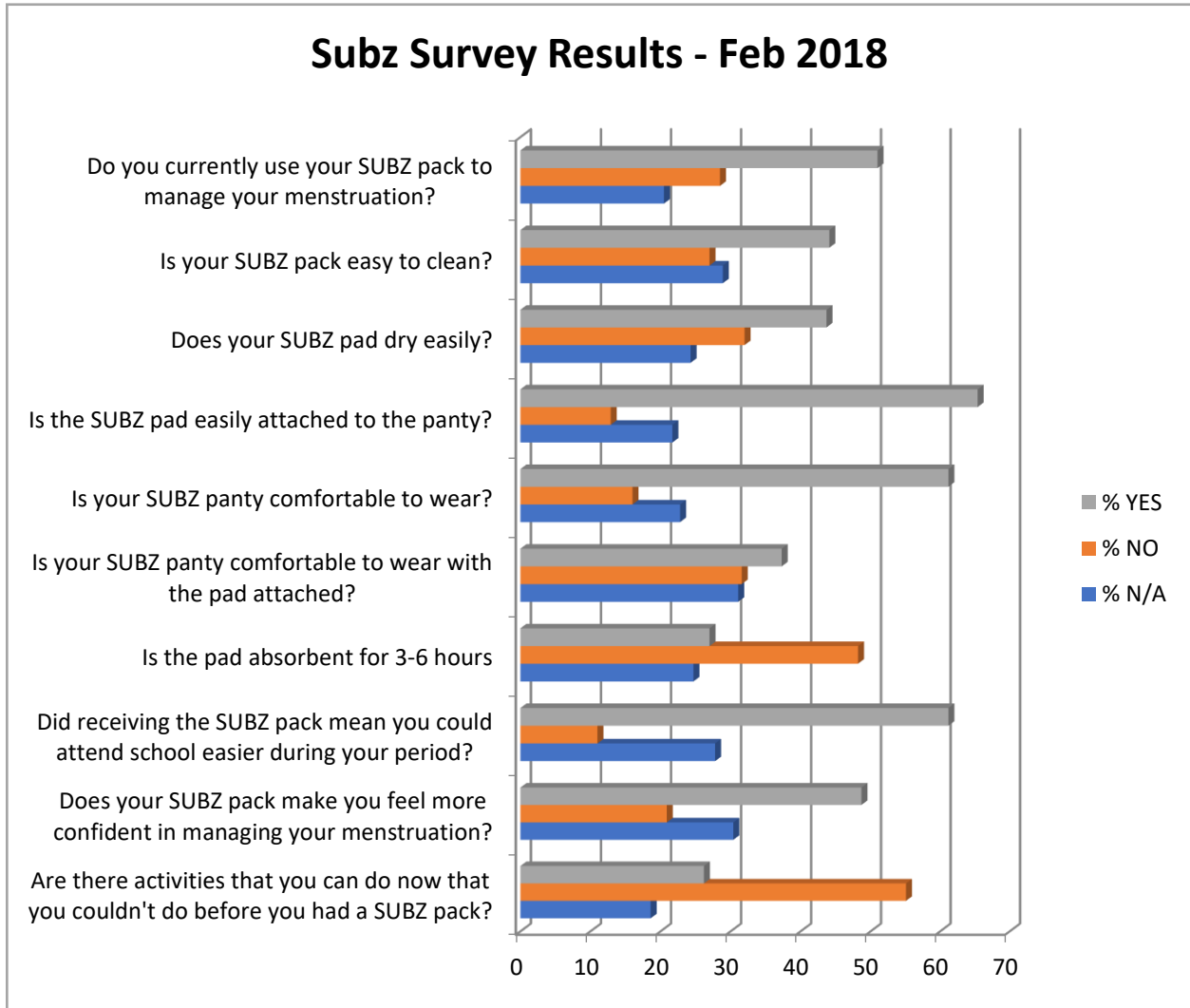
Summary of 3 Schools Surveyed in February 2018

In February 2018, a simple survey was conducted at three schools with a total of 263 girls who received a SUBZ pack within the last six months. The survey was twelve questions long, ten yes or no questions and two questions that required verbal feedback or explanation. Pictured below is a summary of the results for the ten yes or no questions. It is also shown that girls were given the option not to answer, marked by “N/A” on the chart.

Monitoring—

The data from these surveys showed that out of 263 girls who received a SUBZ pack, 134 (51%) of them are using it to manage their menstruation. Interestingly, 161 girls (61.2%) said that receiving a SUBZ pack has made it easier for them to attend school during their periods, and 128 girls (48.7%) said the packs have made them feel more confident in managing their menstruation. Approximately 44% of the girls said that their SUBZ packs are easy to clean and dry easily. Over 61% said the panties are comfortable to wear and 65% said that the pad attaches easily to the panty. However, only about 37% of the girls said that the panty is comfortable to wear when the pad is attached. And, only 27% said that the pad is absorbent for 3-6 hours. In

fact, in one class of 11th graders being surveyed, 100% of the 54 girls surveyed said that the pad is not absorbent for 3-6 hours.



After the yes or no questions were answered, there were two questions that required verbal feedback. The questions and their responses can be seen here:

Questions	Responses
If you do not use SUBZ to manage your menstruation, what are your reasons?	<ul style="list-style-type: none"> • Panty too big or small • Pad too big or too small • Pads leak through • Pad too bulky • I don't like to wash a pad with blood • Prefer disposable pads • Pads tends to slide/move during activity

<p>What are your suggestions to upgrade the quality?</p>	<ul style="list-style-type: none"> • Make a thinner pad to be more comfortable • Make pads longer • Hand out the correct size panty during distribution • Make pads thicker • Make pads more absorbent
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Evaluation—

Although it is still early in the M&E process and more data collection (monitoring) is necessary before Project Dignity can make a thorough evaluation of its progress, impact, and objectives, this initial data provides helpful feedback.

It is encouraging to see that over 50% of the girls are using their SUBZ packs to manage their menstruation. That percentage can only increase, provided that Project Dignity uses the feedback of the girls who are not using their SUBZ packs as a launching board to making improvements or adjustments to better suit the needs and wants of teenage girls.

The biggest area of improvement is to make more absorbents pads, particularly for the girls in older grades who probably have a heavier menstrual flow. Additionally, making longer pads will help prevent leaks for girls with heavier flows or bigger bodies.

Some other possible, positive changes that Project Dignity can make to improve desired objectives include 1. Ensuring each girl gets the best size panty (rather too big than too small) at distribution; 2. Putting more emphasis on the simple and clean way of washing soiled pads at the time of distribution (eg: using an old plastic container with lid to wash pads with soap and water – shake well, rinse well).

Conclusion—

This is just the start of the Monitoring and Evaluation Program being implemented by Project Dignity, so there is much hope for data that reveals achieved objectives, as well as data that will drive positive changes and improvement. The plan in 2018 is to perform as many M&E surveys as possible with girls who have already received SUBZ packs, in order to have well-rounded, thorough data to learn from. It is an exciting time ahead.