



Lessons learned from nimble adaptations to organisations' responses to the sexual and reproductive health (SRH) needs of adolescents in the context of the COVID-19 crisis.

Country: Nigeria

Girls Ladies and Women Empowerment Initiative (GLW)

The Girls Ladies and Women Empowerment Initiative (GLW) is a menstrual hygiene advocacy initiative with the primary goal of ending period poverty in Northern Nigeria. The organization's services include engaging community groups to extend the availability of affordable menstrual products and advocating for the inclusion of menstrual products in the distribution of food and non-food items to girls in difficult circumstances.

Were you delivering services to young people before the COVID-19 crisis?

Before the COVID-19 crisis, we engaged women and girls in rural communities, public secondary schools, and religious groups to sensitize them on menstrual hygiene practices. We also distributed menstrual hygiene products like sanitary pads at every visit. Our programs were carried out with communities in Gangare, Panyam, and Anguarukuba.

What new approaches did you use to respond to the barriers created by the COVID-19 pandemic to reach young people?

The advent of the COVID-19 pandemic posed a threat to our plans for the year 2020. However, to prevent a complete disruption, we employed social media to engage young people on menstrual hygiene matters to avoid a complete disruption. We also encouraged those who can afford hygienic sanitary products—like pads—to reach out to others who could not.

We incorporated personal hygiene and other preventive measures in our COVID-19 sensitization activities. For example, we engaged the community members on proper handwashing, hand sanitizers, and the proper use of face masks. In this regard, we prepared and delivered packages for women and girls in the community that included soaps, hand sanitizers, face masks, and sanitary pads. Furthermore, in a thirty-minute radio show we host in Jos Plateau State and its vicinity, we engaged with women and girls on various topics, including gender-based violence, sexual reproductive health issues, and mental health.

We worked through our existing community feedback channels that included community champions and leaders to learn about the situation and decide on an appropriate course of action. In this respect, we knew that young people were heavily reliant on in-radio programs and music for information and entertainment in rural communities. Therefore, we realized that using such platforms would increase our chances of reaching more young people. In addition, from our digital engagement, we realized that there was a high increase in the use of social media by young people due to the lockdown, which we decided to leverage.

Overall, we noted an urgent need for more robust community sensitization on taking preventive measures against COVID-19. Therefore, we decided to bring health professionals on board to respond to myths and misconceptions by sensitizing community members.

Why did you decide to use these approaches?

We decided to use this approach because we realized that many women and girls needed to be informed on sexual and reproductive health and needed a platform to air their issues, especially during the lockdown. We realized that women and girls in the rural communities were finding it challenging to purchase sanitary pads due to the economic effect of the lockdown.

At the time, a lot of locals did not believe that COVID-19 was “real” as they thought it only affected the wealthy. As a result, they relied on myths and misconceptions about the virus. Given the community-based nature of the misinformation, we decided to identify and support champions in these communities who could continue sharing positive and accurate messages in our absence.

How are you working to find out if these approaches are having the desired impact?

We are getting feedback from our identified champions in these communities and input from radio interactions and social media engagement.

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