

WaterAid Australia  
Pacific Menstrual Health Network

# EVALUATION REPORT

2022





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The authors would like to acknowledge all those who contributed to this evaluation process and report.

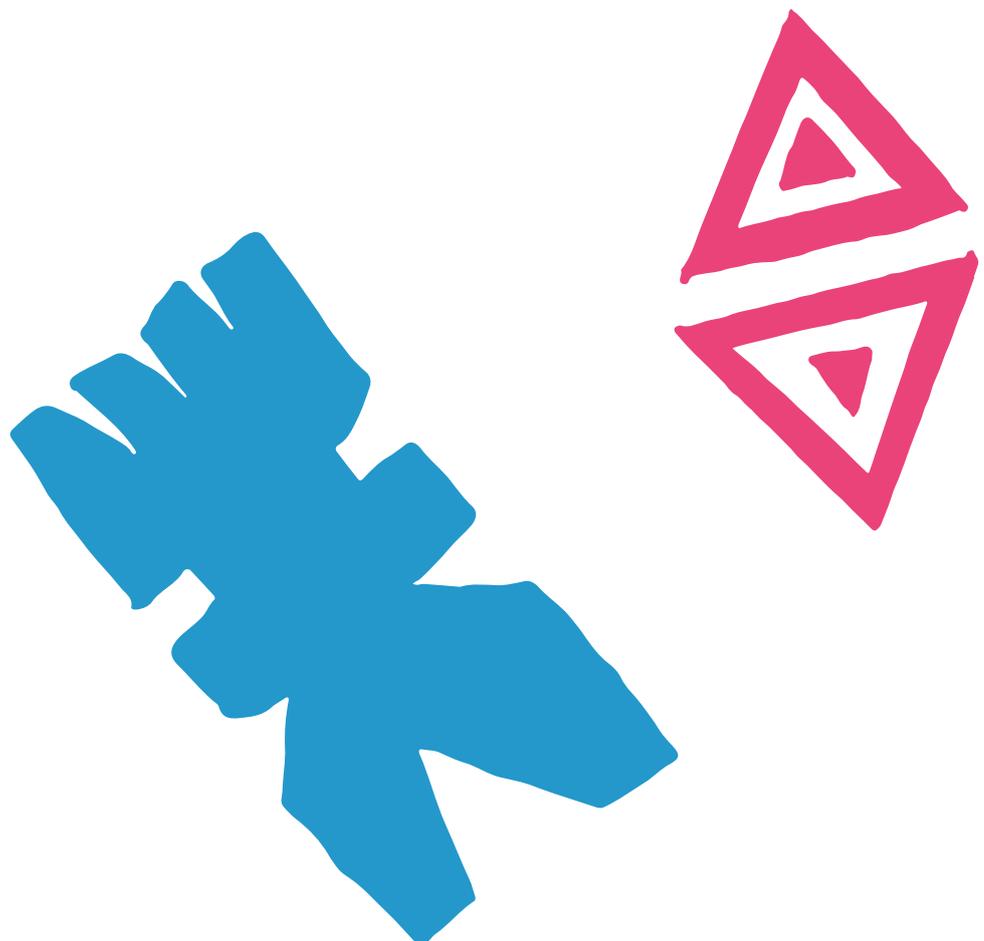
We appreciate valuable contributions from the members of the Pacific Menstrual Health Network who shared their insights and experiences with the network and their visions for the future of the network, through participating in interviews.

We would also like to acknowledge the valuable and thoughtful contributions of the WaterAid Staff.

# ACRONYMS

**SRHR**          Sexual Reproductive Health Rights

**KEQs**          Key Evaluation Questions



# EXECUTIVE SUMMARY

“

**We need to be brave. We need to stop going to the low hanging fruit. Power doesn't move without it being pushed.**

[Network member]

”

“

**When it comes to menstrual health, we now have the leveraging tool called the Pacific Menstrual Health Network - that gives us hope for change.**

[Network member]

”

The Pacific Menstrual Health Network (the Network) was developed as a part of the ‘Galvanising Pacific-led menstrual health collective action’ project to contribute to ‘Strengthening Pacific-led menstrual health collective action’. The multi-sectoral network sought to strengthen collective advocacy, action and shared learning across Fiji, Samoa, Papua New Guinea, Vanuatu and the Solomon Islands. Through building a greater collective understanding of the menstrual health ecosystem and key opportunities, the Network comprises members who are committed to improving menstrual health outcomes across the Pacific.

Phase 1 of the project (2019 – 2022) focused on establishing and building relationships, setting up governance structures and building a good understanding of the menstrual health ecosystem in the five countries across the Pacific.

In April 2022, WaterAid Australia, which manages the wider project and the Network, commissioned an independent evaluation to consider its effectiveness and value of the Network. The evaluation process included document and data analysis as well as interviews with Network members and WaterAid staff.

In terms of effectiveness (of the Network as a modality), the evaluation found that the Network was effective in contributing to collective action, advocacy and shared learning. Members identified the power of association (with the Network), new partnerships and tangible outcomes as highly valued benefits from participating in the Network. Members acknowledged the complexities of working collectively in different cultural contexts and praised their colleagues’ goodwill and the supportive environment as enabling factors for making the newly formed Network succeed. There was a strong consensus among all members that the Network should continue to be Pacific-led. There was also evidence of ongoing commitment to the Network as a vehicle for change and improvement of menstrual health in the Pacific.



The evaluation found that the Network was effective in contributing the collective action, advocacy and shared learning

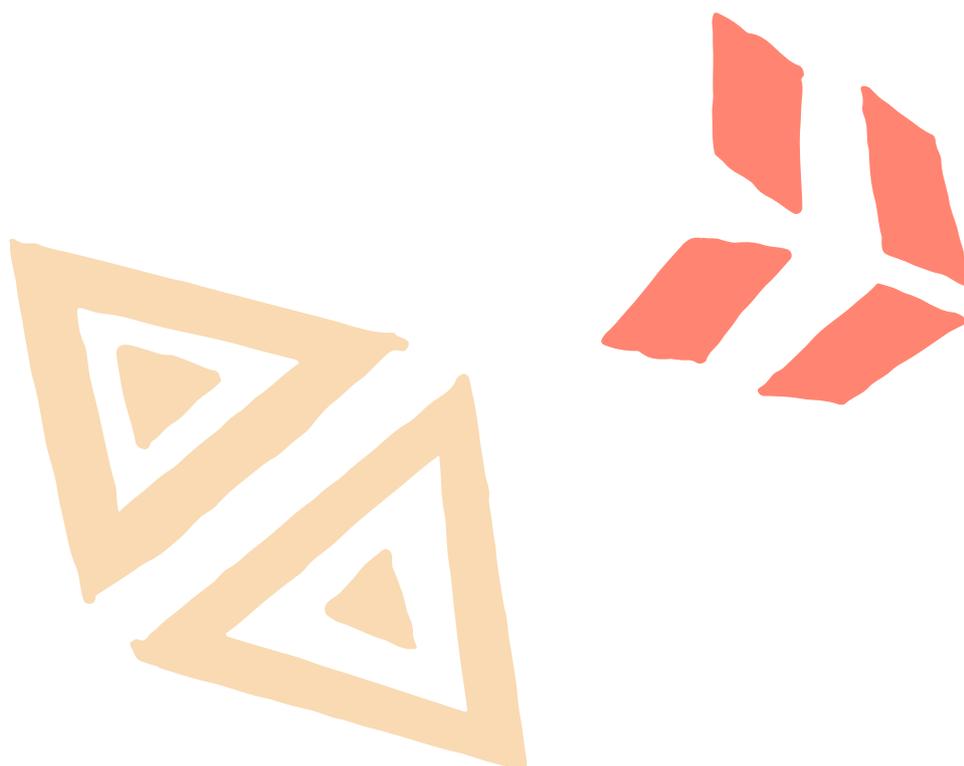


## Recommendations

A series of recommendations were developed based on the evaluation findings, relevant to the planning and design of Phase 2. The following recommendations aim to strengthen and build on what is already an effective approach to progressing menstrual health in the Pacific:

1. The Network should continue to be Pacific-led (partially or fully) to support the amplification of the Pacific voice and ownership of the Network and its vision, while recognising each member's and country's unique strengths and cultural values. Whether the Network can be partially or fully Pacific-led needs to be considered, based on members' experience, analysis of available resources and efforts required.
2. Now the Network is well-founded, there is potential benefit in increasing awareness about its vision and function among national governments, Pacific CROP agencies, international agencies (NGOs, UN agencies and others) and donor organisations. A multi-faced approach may be useful, depending on shared priorities, available resources and existing networks. Dialogue may be in the form of individual meetings with organisations or through participation and engagement at conferences, with the purpose of encouraging interest, attracting resources and contributing to systemic change. Accessing funding from a range of sources could contribute to ongoing Network sustainability in future. Increased credibility of the Network can help national fundraising and thus also improve sustainability.
3. Members should continue to build and enhance national networks, including through support and resources provided by the Network. This could in turn, strengthen the credibility of the Network, contributing to a cycle of mutual benefit.
4. Members should maximize and build on the short-, medium- and long-term successes of the menstrual health movement in the Pacific. This includes the Network's success in organising events as part of the International Women's Day and World Menstruation Day, developing case studies and pilot projects to promote awareness and benefits of the Network.
5. The Network's ability to successfully navigate diverse frames of reference and encompass a range of stakeholders will contribute to its effectiveness, so members would benefit from ongoing dialogue, reflection and negotiation of shared values to determine shared priorities and celebrate members' contributions.

6. WaterAid should support the Network for the next three years through:
  - a. Grant management and funding to support Phase 2
  - b. Program management, through Pacific Coordinators
  - c. Human resource management related to Pacific Coordinators
  - d. Facilitation of the planning phase (see Recommendation 7 and 8)
7. When organising the joint planning process for the next stage of the Network's work, members may consider exploring the following topics:
  - a. How systemic change (and other forms of change) happens in the Pacific, rights-based approaches to change, gender justice, transformational vs transactional types of change and context-specific influences on menstrual health
  - b. Understanding capability strengths in order to prioritise future efforts and commitments in Phase 2
  - c. Strengths and limitations of different contributions and modalities for bringing about change in Pacific contexts, including multi-country and regional options
8. WaterAid should support Network members to consider options related to a more sustainable model in future, as part of as well as in addition to the planning process for Phase 2. This may include engagement of a facilitator, if agreed, to support discussions and analysis of the following topics, so WaterAid can play a role as participant:
  - a. Development of a roadmap to support strategic thinking, communications, broad timeframes and resources required
  - b. Negotiated agreement of shared principles and values
  - c. Shared vision and objectives for the Network
  - d. Strengths and limitations of effective modalities and decisions about preferred option



# 1 INTRODUCTION

Across the world, growing attention is being given to the importance of healthy menstruation. In this context, and in response to analysis of the situation in the Pacific region, WaterAid Australia established a new project called 'Galvanising Pacific-led menstrual health collective action' in 2019. This initiative seeks to build collective action related to menstrual health and rights in five countries: Fiji, Solomon Islands, Papua New Guinea, Vanuatu and Samoa.



The aim of the project is to:

**Strengthen Pacific-led menstrual health collective action**

The project's three outcome areas are to:

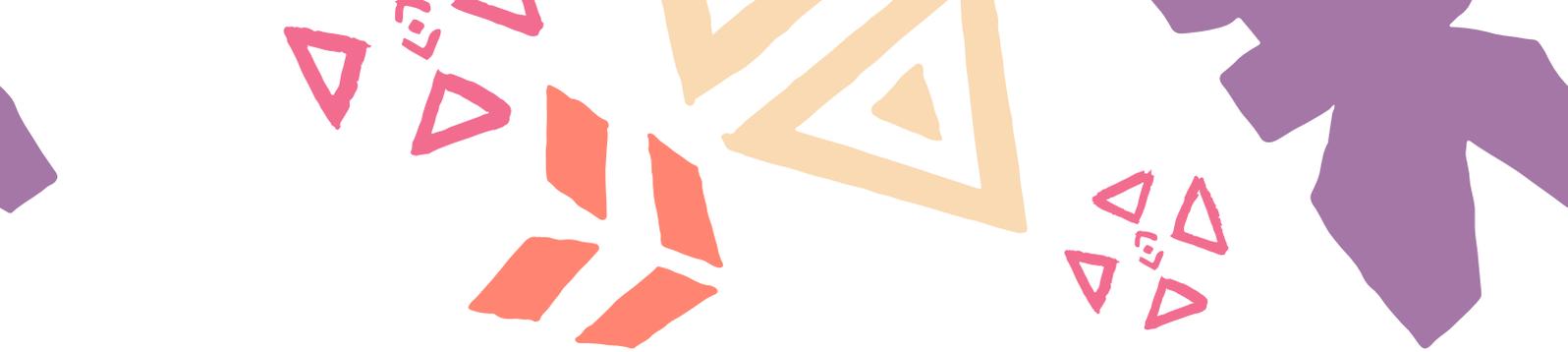
1. Establish and drive a regional multi-sectoral menstrual health network
2. Strengthen collective advocacy, action and shared learning
3. Build a greater collective understanding of key opportunities to bring about improved menstrual health outcomes across the Pacific

Phase 1 of the project, from July 2019 to June 2022, included a one-year extension due to the impact of the COVID-19 pandemic. This phase focussed on building relationships, establishing governance structures and building an evidence base to enable network members to understand the menstrual health context.

In April 2022, WaterAid Australia commissioned an external evaluation of Phase 1 of the project (see Section 3 below). The evaluation focuses on the effectiveness and value of the network. The intention of the evaluation is to provide a learning narrative, covering members' views about what is working well and why, understanding the enabling factors and constraints and providing recommendations to influence and inform the design of Phase 2.

This report covers the evaluation process and findings, and offers evidence-based recommendations for the design of Phase 2.

The evaluation team (appointed in April 2022) comprised three people: Hannah Tamata, based in Vanuatu, and Deborah Rhodes and Jodie Kane, based in Australia.



# 2 CONTEXT

## 2.1 Menstrual Health in the Pacific

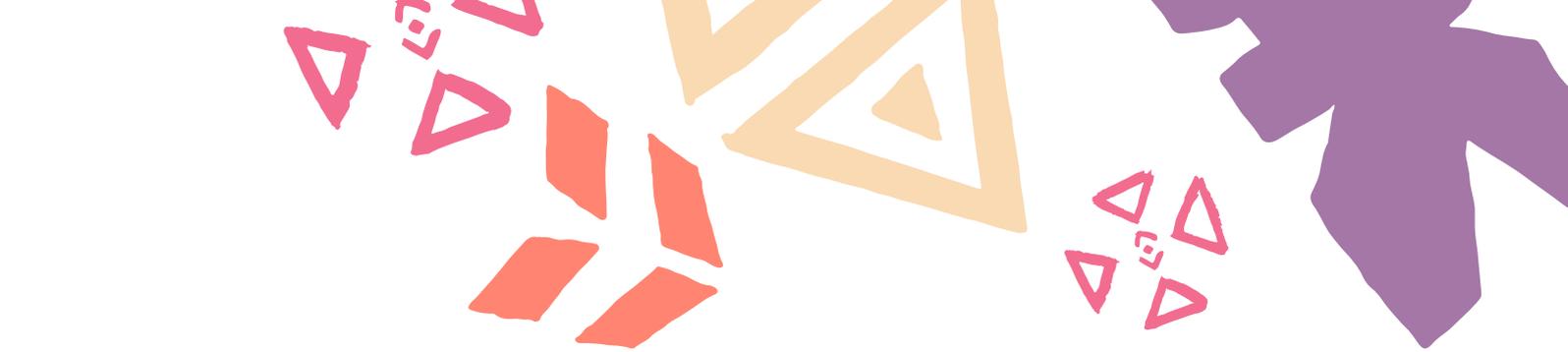
Across the Pacific, women and girls have varied experiences in relation to menstrual health. Access to information, services and products is generally limited, particularly in rural settings. In some countries, menstrual health is a taboo topic, traditional practices are followed and stigma is common. There is often limited access to water, sanitation and hygiene services and infrastructure. These practical challenges, combined with limited health services available to women and girls to manage menstruation, affect their ability to participate equally in social and economic life, particularly in school and employment settings. There is increasing awareness in some Pacific countries that improvements in access to information, services and products will assist in addressing the fear, shame and discrimination some women and girls may experience when managing their menstrual health.

## 2.2 Networks in the Pacific

Networking in the Pacific is part of everyday life, since Pacific Island cultures are generally collectivist and relationship-oriented. This means people place great value on working together harmoniously in groups. In particular, women value working together in contexts where their collective voices can be stronger. Networks commonly provide women with the opportunity to contribute to society and bring about changes at various levels. There are many examples of both national and Pacific regional collaboration on various development topics. Commonly, resources to support such networks are sought from external sources.

## 2.3 Pacific Menstrual Health Network

At a workshop in 2018, a group of Pacific people working on various aspects of menstrual health identified the importance of a more coordinated regional effort, joint advocacy and shared learning. WaterAid Australia and the Menstrual Health Hub were encouraged to develop a 'Community of Practice' and bring together Pacific actors to share common priorities, best practice and support each other to have a voice to advance changes in menstrual health in the Pacific. A series of consultations and research fed into this movement and in July 2019, the Pacific Menstrual Health Network was developed as a part of the 'Galvanising Pacific-led menstrual health collective action' project.



# 3 THE EVALUATION

The evaluation process commenced in April 2022. It is relatively limited in scope, given the time available and travel restrictions, but was expected to collate network members' views about what has worked and why, identify key constraints and generate recommendations to inform decisions related to Phase 2 design.

Importantly, the Covid-19 pandemic was affecting the Pacific at the time of this evaluation. This had implications for the outreach and engagement needed to carry out an evaluation. The team respectfully navigated these implications and the uncertainty associated with the situation with network members and WaterAid Australia.

## 3.1 Evaluation Purpose and Scope

The purpose for the evaluation (included in the Terms of Reference) was to document progress to date and inform a design of the second phase of the project (2022 – 2025). The evaluation used a strengths-based and participatory approach to analyse the project's progress, with a view to informing a revised Theory of Change for Phase 2. Specifically, the evaluation asked network members and WaterAid teams about their understanding of what has worked well and why, factors that have emerged to influence the network's work and how WaterAid can most effectively support the network in future.

It is important to note that this evaluation focusses on understanding the stakeholders' (network members and WaterAid staff) perspectives and insights into the Pacific Menstrual Health Network and is not evaluating the overall 'Galvanising Pacific-led menstrual health collective action' project.

The scope of the evaluation, according to the Terms of Reference:

- Includes identifying the value and effectiveness of the network, the enabling and impeding factors and recommendations from Phase 1 to inform Phase 2 design.
- Excludes evaluating overall program (design, consultation, linking actions to outcomes etc).

## 3.2 Evaluation questions

The four key evaluation questions (KEQs) (provided in the Terms of Reference), are as follows:

1. In what ways has the development of a network been an effective modality to address menstrual health in the Pacific?
2. What value has being part of the network brought to its members and what learning or improved practice have members taken forward?
3. What factors have enabled or impeded the regional network progress towards influencing other stakeholders on greater commitment or support for menstrual health across the Pacific?
4. How can WaterAid most effectively support the network going forward and work towards a sustainable model beyond our support?

These KEQs are further expanded and elaborated in Annex A, for contextualisation and enhanced understanding of the Evaluation Team. These questions were used to guide the data collection process.

### 3.3 Evaluation methodology

#### **Data Collection**

The evaluation used a mix of methods, including:

- Analysis of secondary data, case studies and other relevant documents and additional data/documents/photos provided by WaterAid Australia and network members
- Interviews/discussions with network members involved in the development and implementation of the network
- Development of two country case studies, based on deeper discussions with Mamma's Laef in Vanuatu and the Pacific Disability Forum
- Individual and group meetings with WaterAid staff involved in program management, implementation and monitoring

To promote the learning benefits of the evaluation and encourage ownership of the process, findings and recommendations, the evaluation team endeavoured to generate respect-based interaction with stakeholders. This approach was also expected to support data collection. Progressive collation of emerging themes and recommendations from each stakeholder was envisaged through sharing information with stakeholders in real time. This helped confirm or challenge emerging themes and stimulate deeper insights and feedback. This adaptive and cumulative approach also assisted in ensuring that the draft report findings are valid, in the sense that they had been tested with stakeholders along the way, before being finalized in writing.

The purpose of developing two detailed case studies (through more detailed discussions with Mamma's Laef and Pacific Disability Forum) was to delve deeper into the context and experiences of networking, learning and change. The evaluation report includes these two case studies to highlight the ways that networks are addressing menstrual health at the regional, national and community level, in different and similar ways, as well as exploring more about empowerment and inclusion.

Questions that formed the basis for data collection, including sources and methods to answer each, are included in Annex B. Stakeholder interview questions (and the relevant extended case study questions) are provided for both the network members and WaterAid Australia, included in Annex C.

Thirteen (13) participants from eight (8) stakeholder organisations were interviewed. This includes the seven (7) network member organisations and WaterAid Australia (including the Papua New Guinea program). The list of stakeholders can be found in Annex D.

The evaluation team used the stakeholder interview questions as a basis for each meeting and were flexible and responsive to each stakeholder, responding to information respectfully and carefully, and adjusting as appropriate. The intention was to provide the opportunity for stakeholders to reflect on the Network and to share information about their experience and perspectives.

#### **Data Analysis**

Data was analysed in a way which identifies key themes related to the KEQs. As noted above, the intention was to share emerging themes with stakeholders, so they can be confirmed or challenged, deepened or expanded accordingly, in a cumulative way. This is suitable for a network context, where the members have worked together for some time. This form of data triangulation is well-suited to the particular Pacific context, and enabled the evaluation team to collate findings in a



robust and participatory way. In a practical sense, evaluators informed stakeholders of the process during the interviews. Following the completion of the interview, the evaluators sent an email to stakeholders which captures 2 – 3 key points (including recommendations) from the interview, for their validation and/or expansion. It was hoped that this would not be excessively time-consuming for the stakeholders and that they would see this as a beneficial aspect of the evaluation.

While every effort was made to ensure data was further triangulated, there were limitations associated with the context for the evaluation, including the time available and the fact that the evaluation team could not travel or meet all participants face-to-face.

### **3.4 Evaluation principles and ethics**

Consistent with various international codes of conduct for cross-cultural evaluations, the following principles applied to the evaluation:

- Use of a strengths-based approach, which means the process sought to generate shared understanding of achievements to date and success/influencing factors, as well as to generate shared vision for future emphasis and effort
- Openness - of information given, to the highest possible degree to all involved parties
- Confidentiality and data protection - measures to protect the identity of all participants and any other information that may put them or others at risk
- Broad participation – involving all relevant parties where possible
- Reliability and independence - conducted so that findings and conclusions are correct and trustworthy
- Child safeguarding – demonstrating the highest standards of behaviour towards children
- Sensitive – to child rights, gender, diverse SOGIE, disability, age and cultural contexts
- Do No Harm
- Respect for all
- Humility
- Acknowledgement of diverse world views
- Compassion and solidarity
- Excellence in the evaluation process
- Focus on the benefits of the evaluation for all those involved
- Commitment to use of accessible language and accessible evaluation processes

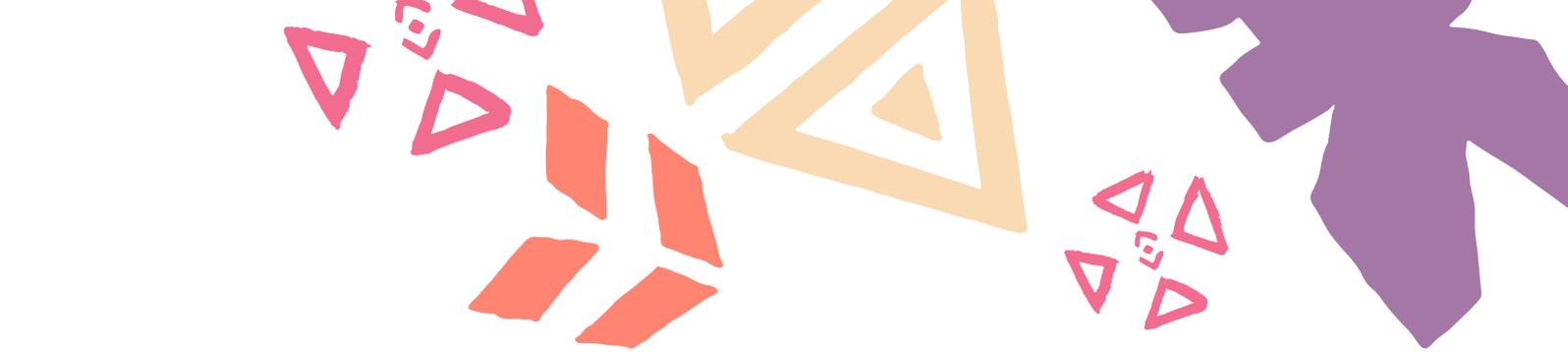
The evaluation team were responsible for the ethical and consent aspects of interviews with stakeholders. In relation to ethical aspects of this evaluation, Annex E contains a Consent Form and Annex F details relevant ethical questions and responses. In summary:

- Stakeholders provided consent either verbally or in writing, as per Annex E
- They chose whether to have their name included in Annex D
- If they agreed to participate, participants were advised that their words can be used in reports, without identifying the individual
- The questions and method for data collection considered how to avoid any risks of harm to participants
- Expected benefits of the evaluation were conveyed to participants in the consent process
- A realistic plan and time frame were allowed for sharing the results
- The methodology was appropriate to the context and purpose
- The information generated through the data collection was analysed and presented fairly
- Data is stored safely
- WaterAid Australia will be responsible for ensuring the report findings are made accessible to participants/stakeholders

### **3.5 Evaluation audience**

The primary audiences for the evaluation include:

- WaterAid Australia
- Network Members
- Australian Department of Foreign Affairs and Trade (DFAT)
- WaterAid globally



# 4 FINDINGS

The Pacific Menstrual Health Network (the Network) was designed as a platform to strengthen the coordination of key actors, support collective advocacy and share learning on best practice, to improve menstrual health in the Pacific. Through the collaborative effort of members and WaterAid Australia, overall, the Network has worked to improve understanding of the menstrual health ecosystem in individual countries and the region, capture emerging evidence, as well as develop guidance and advocacy activities to progress menstrual health in the Pacific. Key achievements from Phase 1 can be found in Box 1.

## BOX 1

### A SNAPSHOT OF THE PACIFIC MENSTRUAL HEALTH NETWORK: KEY ACHIEVEMENTS FROM PHASE I

**Network engagement, learning and sharing** – Regular formal and informal engagement by network members to share and learn from each other.

**Regional Case Studies Series** – A series of case studies developed by Network members in the five network countries to establish an evidence base for the menstrual health ecosystem in each country.

Period Poverty in the Pacific: Exploring opportunities and barriers to progress menstrual health May 2022 – A case study series on menstrual health in Fiji, PNG, Samoa, Solomon Islands and Vanuatu.

#### Pilot Projects

Mamma's Laef menstrual health education programs (to both females and males) using visual story telling boards and development of a video.

Fiji Women's Rights Movement - Train the trainer training with Reproductive Family Health Association of Fiji to assist with messaging on menstrual health practices, as well as community outreach to girls living in rural areas to assist with knowledge and resources to manage menstrual health.

*These pilot projects are currently underway.*

#### Advocacy Campaigns

Menstrual Health Day 2020 and 2021 – Social Media Campaigns

Menstrual Health Day 2022 – “Pacific Voices celebrating Menstrual Health Day” webinar and video – see Box 2

Collaborative Online Social Media Campaigns 2020 – “Periods don't stop in emergencies” and “Pacific Periods”

#### Regional and Global Awareness

Kaliko Steifree participated in a menstrual health webinar – 2020

Pacific Disability Forum presented at the global menstrual health day forum – 2020

WaterAid promoted the Network to UNICEF's global MHM in Schools Conference - 2020



This evaluation seeks to explore and analyse the effectiveness of the Network as a modality to address menstrual health in the Pacific and the value afforded to members from participating in the Network. Understanding about aspects of the network which are working well, provides a foundation for identifying the enabling or success factors which have contributed to the Network's influence on change and on improving menstrual health in the Pacific.

## 4.1 The Effectiveness of the network as a modality to address menstrual health

Three broad themes emerged from analysis about the effectiveness of the Network as a modality to address menstrual health in the Pacific: collective action, advocacy, and learning and sharing. Stakeholders' insights and examples about how the Network has been an effective way to understand the menstrual health ecosystem, establish a learning and sharing platform and endeavour to collectively influence change with an amplified voice, are explored below. Further analysis around networks as a modality is also discussed below.

### 4.1.1 Collective Action

**“ Working in a collective manner has more power and strength in it. ”**  
[Network member]

Pacific Island cultures are generally collectivist and relationship-oriented, meaning that people place great value on working together harmoniously in groups. From this perspective, there is no surprise that all of the members indicated that the Network is an effective modality as it creates a space for collective action to progress menstrual health in the Pacific. It is seen as a platform where people can come together to share ideas and knowledge about menstrual health in their own contexts. They describe the Network as a place where they can share visions and collectively work together to influence change in menstrual health in the Pacific. One member said *'It's the collaboration and working together, getting our representatives on the ground to work with the network to get things done, for me, this is one of the huge successes in it.'* Members spoke of the *'amplification of women power and our voices on different platforms'* as being a benefit of the Network's approach to addressing menstrual health.

One member expressed the view that a network approach is an effective means of dealing with difficult issues related to menstrual health, since these need to be addressed in a collective manner. This reflects the idea that when individuals initiate conversations about this topic, in a collectivist society, they will be less effective and heard than if a group does so. The network brings key actors together to work collectively on these issues and develop sustainable and practical approaches. The member said, *'Once the Network gets to be very visible across the Pacific, it will be very strong in terms of the position, beliefs and messaging. It gives strength when there is a lot of organisations that are a part of the Network.'* Another member shared similar sentiments indicating that it was *'a great opportunity to be in solidarity with other Pacific menstrual health focused groups and bringing attention to sexual reproductive health rights, with the ability to increase capacity to influence change'*. The same member emphasized the importance of the network approach on this topic, referring to the example of climate justice and the many years of collaborative work in networks and coalitions which has progressed climate justice. She believes in the collective approach to bring about change and said, *'we need to be stronger and more visible in the PIFS forum, CROP, CSO and regional processes and the Network can help do this.'*

Some Network members place significant emphasis on the importance of connection for Pacific Island cultures and confirmed the importance of the fact that through the Network, they were able to connect with other people with a shared vision of progressing menstrual health in the Pacific. The

COVID-19 pandemic has had a significant impact on the members' ability to connect in a face-to-face environment and members needed to adapt to a virtual network. While acknowledging the limitations of this, all Network members reported they were able to adapt to connecting virtually and building rapport and relationships in non-traditional ways. The majority of members expressed a keen interest in meeting face-to-face in the near future to further support building connections and relationships with their fellow Network colleagues. WaterAid were commended by Network members for the support and dedication they provided to assisting members to adapt to meeting online.

Members also expressed the view that the Network is an effective way to address menstrual health in the Pacific as it provides credibility to national-level work and further improves their reach and supported their capacity to influence change. One member said *'It [the Network] has the potential to reach a wider audience, because we are linking organisations together and linking their own partners as well. It has given us the opportunity to reach out as much as possible.'* Another member echoed these sentiments, saying *'I believe that through the Network, there are possibilities that there could be really good programs that would involve all the members and we can figure this out. The Network gives us credibility, we still want to be a member, but a more effective member if there were longer programs.'*

The extent to which the collective benefits are understood vis-à-vis national priorities, varied among Network members. For example, one member described the importance and value of collaboration and a collective effort, and they indicated that without participating in the network they would still be carrying out their work to address menstrual health at the national level, albeit at a different pace. They said, *'While the Network is vital and important and supporting the national actors to have a space to collaborate and pool our evidence together, menstrual health work in [our country] would still occur without the Network, it would just be slower. However, the Network allows our national work to feed into the regional collective menstrual health work, such as the case studies and regional synthesis report.'*

In summary, Network members accord high value to the collectivist nature of the Network, recognising the alignment of this aspect with dominant cultural values in Pacific countries. They confirmed the significance of being part of a group when raising sensitive issues, and the contribution that being part of this group made to national level priorities and activities.

#### 4.1.2 Advocacy

“

**Advocacy is a huge part of the network and it can be very powerful.**  
[WaterAid staff]

”

All members share the view that the Network's ability to support collective action and the members active participation in the Network have been effective means to advocate for improved understanding of and approaches to support menstrual health in the region. Working collectively, Network members have been able to develop and mount a stronger advocacy effort at both national and regional levels. Members have built communication campaigns together, pooled resources, communicated with and influenced governments and other stakeholders. Some members have tapped into other activities offered by the project to build national campaigns. One member said *'the powerful wave of energy makes the Network work, as does the possible tangible outcomes that can be seen in the policy influence space across the Pacific.'*

One member identified the support and encouragement they received from the Network to move into the awareness, influencing and advocacy space in their country, through the development of a film. They acknowledged that the advocacy space and the film space were all new to them, but

through the encouragement of the Network, they developed a film. The member said, *‘They wanted us to do a film, we have never done such a thing and didn’t know how to go about it, even in areas like rights of a child we have learned how to work in these areas because of the network.’*

### 4.1.3 Learning and Sharing

“

**The network is a good platform for learning and sharing information, knowledge and resources and helps to make [or organisation] more impactful**

*[Network member]*

”

The Network is viewed by its members as a useful learning and sharing platform. This includes for example, learning about: the menstrual health ecosystem, different members’ advocacy campaigns or new menstrual health products. All Network members place significant emphasis on the positive value of the Network for continual learning purposes. One member said *‘most of the time in the Pacific, this is a taboo topic and trying to get women more involved to actively participate is a challenge. I have found the Network to be a learning experience.’* Another member reflected on strong connections in the Pacific being supportive of learning amongst the group, saying, *‘we talk one ‘language’, because we all have cultural barriers and stigma; through the Network we learn from each other.’* While learning from each other was deemed to be highly beneficial, it was also acknowledged that learning and replication of ideas and models need to be contextualised and that addressing menstrual health in Pacific countries isn’t a ‘one size fits all’ approach. One said for example *‘they need to contextualise their learnings’.*

The Network members recognise diversity of contexts and the limitations of learning between countries. For example, one member said, *‘The benefits of being a part of the Network are to learn from each other [and] what we are in the context [of our country]. We are addressing things differently to some other countries. But generally, it is good to hear about the type of working happening around the Pacific. The learnings we can take from others in terms of methods and messaging are important and beneficial. [It is] a great opportunity to learn and [understand] why [others] do things differently too. At the end of the day, it [the Network] is generally leading us to the same outcomes.’* Another member said, *‘the benefit of this Network is we have the opportunity to learn from each other. Before the Network, we didn’t know who was working in the same space in New Zealand, Fiji, Solomon Islands, Samoa or Papua New Guinea.’*

“

**Being a part of the Network is an opportunity to hear about the type of work that is happening in other countries and share learnings, in our different contexts**

*[Network member]*

”

The sharing of information, knowledge, resources and the process of sharing were all expressed by members as being highly beneficial aspects of participating in the Network. Combined with the two elements mentioned above, learning and sharing ideas and experiences makes the Network approach an effective modality to address menstrual health across the region. Stakeholders acknowledged that it was useful to be able to share resources to build communication campaigns. This includes sharing funds in order to have the potential to fundraise together for projects. One member reflected that *‘the Network is a good fit’* for their organisation and its vision. They explained that the type of information they collect feeds well into the Network from the perspective of institutional strengthening, policy transformation and advocacy for SRHR.

An example of the effectiveness of the network as a modality is the Network led webinar: *Pacific Voices Celebrating Menstrual Health Day* on 26 May 2022 – see Box 2.

## PACIFIC VOICES CELEBRATING MENSTRUAL HEALTH DAY

“

Celebrating Menstrual Health Day with Pacific Communities who are raising our collective voices for menstrual health rights

”

Through collective action, advocacy, sharing and learning, the Pacific led webinar brought together over 60 people from Civil Society Organisations, private sector, government and communities to raise collective voices for menstrual health rights in the Pacific. Some outcomes from the webinar included:

Launching a new report and blog documenting the progress, drivers and opportunities to progress menstrual health in the region, based on the collaborative efforts of the Network.



[Pacific Periods Report WaterAid 2022.pdf](#)



[Period poverty in the Pacific: Exploring opportunities and barriers to progress menstrual health | WaterAid Australia](#)

Launching a video calling for greater menstrual health action in the Pacific.



[Menstrual Hygiene Day 2022 | Pacific Menstrual Health Network - YouTube](#)

Sharing experiences and insights from a range of speakers – demonstrating diversity and inclusion. Tangible advocacy outcomes including strong messaging from two young Fijian adolescents who advocated to the Fiji Government for better menstrual health education in schools and sanitary products available in school holidays (as well as school term). The government invited the two adolescents to sit on the national working group for menstrual health as youth representatives. This is a powerful example of the impact the network can have on tangible action towards improving menstrual health in the Pacific.

Hearing from Government counterparts about menstrual health progress.

The informal process of sharing information and ‘bouncing ideas off each other’ was acknowledged to be significantly beneficial from both a content perspective, and a relationship building perspective. Members felt supported by one another, which led to them feeling more empowered. For example, one member said *‘the mindset of being a part of the Network is really empowering. We have ongoing support for each other’*. This extends to seeing the Network as an extra resource for people outside the Network, as members are now able to refer stakeholders to other members in the Network who may have experience on certain topics or different contexts in the menstrual health context. They said *‘If I have someone who is interested in menstrual health in Samoa, Fiji or the other countries, I make mention of my sisters’*.

### 4.1.4 Network as a Modality

While all members identified a range of reasons for the Network’s effectiveness as a modality to address menstrual health, one member reflected that they were not sure whether it was necessarily the best modality. They said *‘The network is an effective modality to address menstrual health, but it isn’t necessarily the best way, as the network is the only option we have explored. We need to explore more options and see what combination of modalities is the most effective.’*

While members themselves did not suggest any particular alternative modality for external support in this area of work, they expressed interest in discussing options and understanding the strengths and limitations of each. This is likely to reflect members’ varied experience of other modalities, such as partnerships, projects, direct funding, or placement of advisers or volunteers. The strengths and limitations of different modalities are explored further in Section 5.1.

## 4.2 Value of the network to the members

The benefits and value of being associated with and participating in a network are plentiful. Broadly speaking, networks are commonly cited as bringing value through increased access to information and resources, solidarity and support, increased reach, influence and impact, as well as increased visibility of issues and best practice (Liebler & Ferri, 2004).

When asked to consider the value of the Network, members identified the importance of understanding different contexts and frames of reference when working with the Network. They value the power of association and the influence this can have on developing new partnerships and establishing tangible outcomes.

### 4.2.1 Contextually important and frame of reference

“

There is the different nature of the organisations themselves, but you also need to remember those organisations sit on top of the different cultural contexts too.

[Network member]

”

To understand members' perspectives on the value they see in being a part of the Network, it is important to acknowledge that members may have different frames of reference and are working within different cultural contexts. The value that is placed on something is generally related to the context in which a person or group sees it, and their frame of reference. Many members acknowledged their similarities with other members, particularly in relation to their shared cultural values or norms and their shared understanding of challenges related to improving menstrual health in their different countries. The evaluation found there are also differences in cultural contexts, business models and positioning and visions for addressing menstrual health. Members themselves recognised the importance of understanding these differences. For example, one member said *'there are a lot of differences and it's easier for one to just work with the similarities, having this mindset that maybe automatically the differences will be worked out. I think that's where the challenge comes from and the Network must be smart enough to consider those differences and consider case by case'*. This member's recognition of the challenge associated with navigating the differences suggests there is opportunity for group discussion (see Section 5.2). Several members recognised the importance of this for the Network to be able to interact successfully with external organisations, which may consider supporting the Network.

One member confirmed the importance of understanding different frames of reference which members bring to the Network. For example, this member and their organisation are committed to feminist principles of gender justice and apply *'feminist intersectional and interlinkage frames to all that we do. Always direct action, constituency engagement, research, analysis, policy influence and advocacy and movement building come into it. We see this as a part of our wider sexual reproductive health rights and universal human rights program. That is the kind of framing we use. We are very clear on our politics. When we come into a network, we bring that and negotiate with others on that and so we are clear where we are all different and where we are aligned'*. Confirming use of a gender justice, human rights and sexual reproductive rights lens in regard to menstrual health, the member said, *if another lens is used 'you lose the core gains of the movement over many decades. It is not effective. You shouldn't just solely concentrate on menstrual health; you need to underpin it with a broad framework and the international norms-based system'*.

Another member from a different country context has a different frame of reference and accords importance to separating menstrual health from SRHR from a national government policy perspective. They have been engaging with their national government to advocate for menstrual

health policy to be recognised as an important issue to women, through separating it from SRHR (but still linked), to encourage more support for menstrual health rights and corresponding funding allocated to it, rather than competing with funding for sexual reproductive health rights.

The fact that Network includes members with different frames of reference, from different cultural contexts and different disciplinary backgrounds (water rights, feminism and community development for example), has various implications. First, there is value in providing opportunities within the Network for respectful discussions about these differences, so members can understand and learn from each other. Second, members need to be aware that they are likely to need to continually navigate both different and shared values and interests. This is associated with the idea that working collectively across Pacific countries, requires specific efforts and joint agreement on what a collective approach entails. Third, members' ongoing participation may need to reflect acknowledgement that they cannot expect other members to necessarily change their values. Finally, the Network may portray and celebrate the differences as strengths of the Network, promoting a much wider range of stakeholders to engage, support and learn from the Network, than would be the case if only one frame of reference applied.

#### **4.2.2 The power of association**

The majority of members accord significant value to the power of association within the Network and the impact this can have on influencing change. Together they have been able to collectively share ideas about different ways to advocate for change within their own contexts and in the region. Many spoke of more doors being opened and having a seat at the table with key stakeholders, including government departments in their country where they continue to advocate for menstrual health rights and policy change. For example, one member has begun advocating for menstrual health to be included and addressed in the next national health policy, as there are currently no policies encompassing menstrual health in this particular country.

Another member spoke of the Network's partnership with WaterAid as adding '*a leveraging energy for the menstrual health and hygiene compass to navigate their way around [their country]*'. They explained that there is no government policy, coordination or activity line from other implementation agencies in their country and that they are more engaged with the Network than any other agencies in their country. The member indicated that they always use the Network as a point of reference when speaking with organisations and government. Their association and participation in the Network provide them with '*a major leveraging tool*' to influence policy and change in their country.

#### **4.2.3 New partnerships and tangible outcomes**

Along with improved engagement with policy makers and government, members also identified the establishment of new relationships with other agencies in the menstrual health context as a valuable aspect of being involved in the Network. For example, one member organisation's participation and active involvement in a regional workshop has increased their reach to a wider audience, who are now actively engaged with them in planning future work. Another positive outcome from this workshop is a standing agenda item on menstrual health on the Sanitation Working Group meetings. A WaterAid staff member summarised this as '*a good outcome of building interest, buy-in and tangible action being taken.*' Another example of a tangible outcome based on association with the network is one member's ability to participate in the Menstrual Health Enterprise Trade Finance Vehicle where they were able to show their menstrual products and have since developed partnerships to order in specific fabric for their products. They believe '*the credibility [of being a part of the Network] is a big thing for us.*'

## 4.3 Enabling Factors for the Network to contribute to improving Menstrual Health

Network members place significant emphasis on the Network being Pacific-led as a key enabling factor for its success to date. They also identified the goodwill of members and the supportive environment of the Network. They noted that the Network was identified as a good vehicle for change. Another enabling factor identified by members is the work of WaterAid's role in Phase 1. These five factors are detailed below.

### 4.3.1 Pacific Led – Communication, Collaboration and Coordination

There is a strong consensus amongst members that the overarching factor which enables the Network to progress towards influencing change and support for menstrual health across the Pacific is that the network is Pacific-led.

Initially, the Network was coordinated by WaterAid from its Australian office. Network members reflected that they valued WaterAid's efforts and on reflection recognised that they themselves did not have a strong sense of ownership. They mentioned that this coincided with the COVID-19 pandemic, contributing to a slow rate of progress, because of limitations for interaction and connection amongst members.

Members consider the introduction of a Pacific-based Network Coordinator position led to a new wave of momentum. According to members, communications, engagement, transparency and coordination have improved with the Network now being Pacific-led. There is *'a much clearer understanding of what works in this space in the Pacific and an understanding of the outcomes from conversations and how to move forward.'* WaterAid were commended by members for *'listening and acting on the members' recommendations for this change.'*

Some members suggested the Network should be completely Pacific-led to enable Pacific voices to be heard and for there to be full ownership of the network. This is discussed further in Section 5.5. One member highlighted that *'transparent communication and connection are the key aspects to making the Network work and stronger. We are very committed to making it work and allocate time appropriately to actively participate. Generally being effective in terms of communication is what keeps us interested. They explained that a strong commitment is needed from all members to make the Network work, saying 'some of our meetings have to be re-scheduled – this loses the essence of being a Network. When they re-schedule, they are phasing out the interest, especially for people that have committed to being a part of meetings.'*

### 4.3.2 Goodwill of the members

As mentioned above, connection, coordination, communication and collaboration of the network are all key enabling factors for the network to contribute to addressing menstrual health in the Pacific. Along with these, goodwill of the members, represented through their enthusiasm and keen interest in making the Network function well, were highlighted as enabling factors. One member stated *'the members are what make the Network work'*. Without buy-in, interest and enthusiasm to make the Network a vehicle to support change, the network would not have an impact on progressing menstrual health in the Pacific. According to a WaterAid staff member, *'the Network works well because the members all want to be there and work together: it is a high priority for them. While they have many challenges to navigate (i.e., COVID) they are all motivated and have made it their own.'*

### 4.3.3 Supportive environment

The Network is seen as a supportive environment in which members feel enabled to speak freely and openly with one another. A WaterAid staff member said ‘the members are all very generous with their time to share experiences and the intricacies of the different contexts they work in. They are bringing a deep focus to menstrual health to the Network through some of the activities they are engaging in too, such as case studies, pilot projects and campaign work’.

Some members have expressed concern about opening up the network to international organisations, with concerns the Pacific voice will be silenced. According to one member ‘there is a fierce quality of just having us [Pacific Island members] in the coalition. *We are accountable to social movements and the Pacific local and indigenous people for whom we advocate. The language gets too tame when they [international organisations] join as wider stakeholders. We end up getting pushed into the corner and organising the low hanging fruit, rather than the transformative change that we need.*’ The member suggested perhaps a ‘Friends of Group’ could be established for these organisations, but believes ‘the Network is best to be kept as an autonomous women-led feminist-led group’. Some members, without strong country networks, found the Network to be a very supportive platform and one that they are very grateful to be a part of.

Members indicated that the diversity of members was an enabling factor which helped to make the Network work well. Networks generally have members with some shared interests, but not all of their interests are shared. There may be one shared topic among members, but their other interests are quite diverse. In this Network, members are committed to inclusivity and allowing all people the space to speak and be heard, and they see this is a key enabling factor to making this Network effective. One member said ‘*goodwill, transparency and accountability help to make the Network work, as do both diversity that the Network brings and deliberate work for effective politics and inclusivity.*’

### 4.3.4 Vehicle for sustainability and change

Some members see the Network as a vehicle for the sustainability of the work that they do. One said ‘*the Network provides them with a solid foundation in terms of the work [we] do in [our country] and the sustainability of [our] work.*’ Members are aware of the challenges and limitations experienced in the past two years. Some are very interested in taking the Network into the strategy, engagement and visionary space, rather than stay in what they see as the ‘project management’ space. They believe the Network has established a good foundation to enable them to commit to the planning phase and to ‘dream big’. They want to bring about transformative change, rather than just seek to address the ‘low hanging fruit’. One member indicated that while the Network is currently creating awareness and unpacking myths about menstrual health, they would like it to move into a transformative space, developing strategies and influencing policy to address menstrual health and SRHR in the Pacific.

### 4.3.5 WaterAid’s contribution

Network members placed significant value in the contribution WaterAid has made towards the development and management of the Network. They mentioned the inception meetings where WaterAid were seen to be ‘doing things differently’ in relation to standing back and really listening to workshop participants about how they wanted to progress menstrual health. They noted the significant support WaterAid provided to members to bring the Network to the point it is at today. They confirmed that WaterAid greatly contributed to the Network’s success. In particular, they all commended and respected WaterAid’s ability to listen to member recommendations to shift the model to being Pacific-led. WaterAid provided stability for the Network throughout Phase 1. Its ability to pivot and adapt to the changing environment during the COVID-19 Pandemic is well-regarded.

## 4.4 Case Studies

The following section provides a deeper dive into the insights and experiences of two of the Network members participating in the Network.

### 4.4.1 Pacific Disability Forum

The Pacific Disability Forum (PDF) was involved in the early stages of the Network, bringing a strong representation for women with disabilities, and ensuring their voices and challenges are considered in all aspects of menstrual health, including the work of other members. PDF is a well-established peak body for organisations of persons with disabilities (OPD) with members across the Pacific region. PDF seeks *'An inclusive and equitable Pacific Society where all human rights of all persons with disabilities are realised, as outlined in the UN Convention on the Rights of Persons with Disabilities.'*

Through the Network, Pacific OPDs have been able to inform Network members about the importance of inclusive and accessible approaches for programs, awareness and products. In exchange, PDF and its members have benefited from being able to access important information for its members, people with disabilities, on a wide range of aspects of menstrual health.

Soviaia Sisi Coalala, from PDF said *'It's the collaboration and the working together [and] getting our representatives on the ground to work with the Network to get things done. For me this is one of the huge successes of [the Network]. It also provides a space to bring people together to share and learn from each other.'*

PDF is committed to collaborating with relevant stakeholders and sees their participation in the Network as being a way to learn from each other, share ideas and resources and build relationships. PDF's commitment to evidence-based advocacy is evident in the work that they do. An example of this is their pilot project to develop and roll out COVID-19 behaviour change awareness materials across OPDs in the region. Sisi said *'One of the great learnings we had as a member of the Pacific Menstrual Health Network, was when we produced flip charts posters for COVID-19 awareness. Over 500 copies were printed to reach out to their outer islands and the same posters were used by our National OPD here in Fiji. They worked with our Ministry of Indigenous People and translated it into the indigenous language so they could use it in our more remote islands and villages to create awareness.'*

PDF has member OPDs in each of the five countries of the Network. They see this as an effective model to engage nationally with the other Network members through on the ground activities. They said *'it [the Network] has the potential to reach a wider audience, because we are linking organisations together and linking their own different partners as well. It has given us the opportunity to reach out as much as possible.'*

PDF is keen to continue to participate in the Network to maximise the voice of people with disabilities and bring benefits for its members and people with disabilities across the region.

### 4.4.2 Mamma's Laef

Mamma's Laef was established in the backyard of Jack and Mary Kalsrap's house in Vanuatu. There, women came together voluntarily to create reusable sanitation pads that are environmentally friendly and sustainable. Seven years on, and in partnership with Belinda Roselli, Mamma's Laef continues to produce reusable sanitation pads and also runs menstrual health activities in schools and communities in Vanuatu.

Mamma's Laef joined the Pacific Menstrual Health Network in 2018. They expected to learn from other members and to raise awareness about the importance of menstrual health in the Pacific. They have now come to understand that this voice needs to be heard throughout Vanuatu. Mary said:

“ The benefit of this Network is we have the opportunity to learn from each other. Before the Network, we did not know who was working in the same space in New Zealand, Fiji, Solomon Islands or Samoa. Through the Network discussions, we got to know each other and to take up this work together. I came to know that I have sisters here working on this. The Network has allowed me to understand what everyone is working on. ”

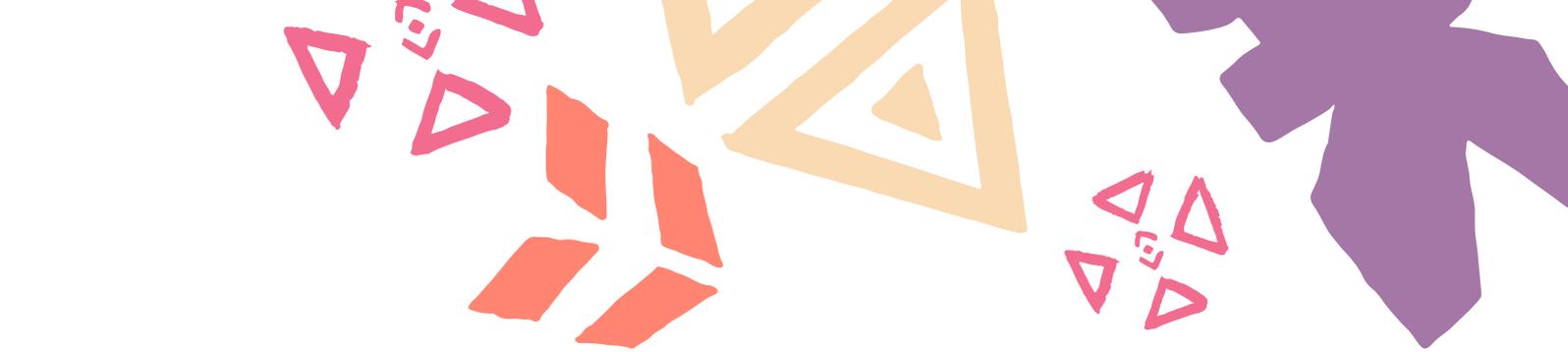
Mamma's Laef believe that their participation in the Network has increased their capacity to influence others. This includes establishing new relationships and partnerships with international organisations and people, and developing films for advocacy and awareness purposes. The Network has supported Mamma's Laef to move into a different context and opened up many doors. Mary said:

“ The Network has also encouraged us to work in this space to influence decision-makers, to try and build partnership, and to learn from each other. The Network has empowered us to know how to engage with others in relation to menstrual health and how to run our awareness activities. ”

Jack acknowledges the different frame of reference he brings to the Network, as a man. He said,

“ For me as a man through this work I have come to understand menstrual health is an important issue. There is a lot of things in menstrual health that men need to be involved in, such as help to prepare family meals, making sure there is a good bathroom with running water, or making sure to fetch water and soap for hygiene. It is not like before, when it was seen as a woman's issue only. We must come to understand everyone should be involved or has a part to play, even if it is just paying for menstrual products or a bar of soap. ”

Mamma's Laef's presence in the area of menstrual health in Vanuatu is growing every day. They acknowledge their participation in the Network as a contributing factor: *'We feel because of the Network, and through films and videos, we have built our presence in Vanuatu. People now know about Mamma's Laef. They know about our work and the importance of menstrual health.'*



# 5 DISCUSSION

Over the past three years, the Pacific Menstrual Health Network established itself as a collaborative platform of key actors in the area of menstrual health. Members work together to strengthen coordination and advocacy and share learnings in order to improve the situation in countries represented in the Network and across the region. Members believe the Network is an effective modality, as it promotes and supports collective action, contributes to effective advocacy and encourages sharing and learning amongst members. They place value in being a part of the Network, as it helps to improve their practices through building new partnerships, increases their capacity to influence, and enables them to work together towards tangible and practical outcomes.

Members identified that the Network needs to continue to be Pacific-led in order to ensure the Pacific voice is heard and there is ongoing ownership of the Network. Through communications, coordination and collaboration delivered in the Pacific context, the Network has the opportunity to influence positive change in menstrual health in the Pacific. The goodwill and supportive nature of the Network were identified as key factors which made the Network effective, along with the view that the Network is regarded as a vehicle for sustainability and positive change. Members commended WaterAid for the role they have played during Phase 1.

The effectiveness of the Network as a modality, the value of the Network to the members and the identified enabling factors which contribute to the fact that the Network is influencing change are all valid and widely accepted by the members. In order to take the next step and for members to enable the Network to become what they want it to be, there is value in considering some of the following themes.

## 5.1 Network as a modality

While members generally believe the Network is an effective modality for progressing menstrual health in the Pacific, several acknowledged that this question has not yet been explicitly discussed by the members and there is a degree of curiosity about the options. They both see the value of the Network, and would like to discuss the strengths and limitations of the approach, in order to maximise strengths, manage limitations and consider other options, if relevant.

Networks are defined broadly as webs of relationships formed by people in order to achieve a common objective. Given they are a global phenomenon, and increasingly understood as having significant value in international development processes, there is extensive literature on different types and lessons. Some networks are tightly focused on a single topic, while others may comprise members with a broad and diverse range of interests but some kind of shared link. Some may have a limited membership, while others have diverse and diffuse members. Some comprise members who are linked geographically or virtually, and some networks don't involve direct engagement of all members. Some are centrally coordinated and led, while others are more loosely structured (see Green 2020), with shifting and diverse sources of power and energy.

The nature of networks and the frame of reference used by people considering them, means there are different views on their value. Each type of network can have strengths and limitations in different contexts or seen through different lenses. For example, an open network may attract a wide range of members, which can be seen as a strength. Such a network may make it difficult to find a single and shared voice, so this could be seen as a limitation. A bound (closed) network can generate strong internal bonds, which could be a strength, but exclude a broader diversity of views and contributions, seen as a limitation. A centrally-controlled or coordinated network has the benefit of a single focus of energy, but may reduce the potential for those outside the centre to shine and innovate as leaders.

A network may change over time, for myriad reasons, often connected to individual personalities and interests. A network may change its 'business model' over time based on a shift in priorities, access to resources, the funding and donor landscape and national, regional or global events. Pacific-focused literature confirms the value accorded to networks at community level. For example, George (2011) highlighted the importance of women's networks in building peace, and Roche et al (2020) mention the value of regional networks in addressing development issues.

The Pacific Menstrual Health Network has features of different types, with limited membership, diverse sources of members, a singular topic of focus, and different frames of reference. As the Network members respond to their diverse and complex contexts and grapple with issues described in this report and other emerging issues, it is likely there will be shifts in the nature of the Network over time.

At present, the benefit of the Network as the modality is that it is led and driven by members. Other options for enabling change, may not be able to prioritise this feature. For example, establishing a new institution or setting up a time-limited project would require external funding, which may be limited in duration. Either may have some benefits but may also distract energy and resources from the Network's core focus on being Pacific-driven. A single entity in one country, may reduce members' efforts in other countries for example, to progress menstrual health and achieve practical outcomes and impacts.

Members acknowledge that WaterAid is able to access funding for the Network from outside the region, that is not likely to be available within the region in the short to medium term. Given members interest in a Pacific-led entity as well as WaterAid's role in attracting and managing external funding, one option to consider in future, could be a partnership between WaterAid and the Network. A well-founded partnership arrangement allows for shared decision-making, risk-taking, responsibility for benefits, and reflects the different interests of partners as well as joint commitments. If this option was considered suitable in this context, then there may be value in appointing a partnership broker to support the process.

Overall, the evaluation team found that while the network modality was highly valued, there was some curiosity about whether other options may be considered. The team considers that the strengths listed above suggest the Network is likely to be the most appropriate option in this context, at this time. In the interests of future benefits, Network members are encouraged to regularly reflect on ways to maximise benefits and manage any of the limitations of this modality. A facilitated discussion about the strengths and limitations of the various options may be sufficient to confirm the value of continuing with the Network or it may raise sufficient interest to consider other options (See Recommendation 7).

A selection of various approaches that can be used to contribute to capacity and support further discussion is included in Annex G, each with strengths and limitations.

## 5.2 Understanding Systemic Influences and Change

Recognition of the fact that Network members hold different frames of reference or worldviews (see section 4.2.1 above), is an important aspect of this Network. While members appreciate and value the diversity of perspectives and experiences, it is inevitable there will be issues to navigate and negotiate, and challenges to address when there are different values about what is important and how change can happen. While a deep analysis of these political and conceptual differences is not feasible in this evaluation, it is clear that members hold and emphasise different worldviews about where menstrual health fits into broader social, political, systemic and cultural understandings. There may also be different views about the concept of working collectively in the Pacific (see Section 5.6).

From a feminist viewpoint, menstrual health is a gender justice issue, situated in analysis of significant inequality, gender-based violence and other gender-based exclusion which means women's rights and in particular, health, including sexual health, are not prioritised. In this context, women's bodily autonomy is required to bring about changes in the systems which perpetuate such inequality, and any approach which is not based on gender justice risks perpetuating systemic inequality.

From a water justice viewpoint, the dominant driver is to provide safe water, sanitation and hygiene and associated facilities and services to all people, and this provides a context for efforts to support menstrual health in particular for women and girls.

From a community development perspective, interest is focused on communities' abilities to determine their own futures and priorities, to mobilise existing resources to bring about sustainable change (including through enterprises, self-help structures, local governance etc.) and to generate services and systems which respond to each context's issues.

Network members have variously addressed these different world views from time to time, although more political conversations may be necessary if there is shared agreement about the need for systemic change in the Pacific. Members efforts to understand each other's views and to work towards shared values are important for future success, although it is not realistic to expect all members to change their core values.

Related to the issue of different worldviews within the Network, is the fact that members are from different Pacific Islands, with some shared and some different cultural values, and highly varied social, political and development characteristics. For example, in Fiji, there is a long history of feminist organisations raising issues at the national level, which means discussions about menstrual health are less taboo than in other Pacific countries, with a different history. Similarly, Pacific cultures vary in the extent to which women leaders are heard and respected, the extent to which changes in attitudes are understood and accepted, and the extent to which new knowledge is adopted and adapted. Pacific cultures share high hierarchical values (in comparison with less hierarchical values in Australia), collectivist values (in comparison with individualist values which dominate institutions and life in Australia), and are oriented towards relationships (in comparison with task-oriented values which dominate in Australia), but the way that these values are expressed varies between Pacific countries. Members of the Network could consider how to engage with the differences, maximise the value of the differences and identify effective strategies for working collectively, in order to achieve desired results.

For this Network, if members are interested in pursuing shared objectives which reflect different values and perspectives, then they may wish to include respectful discussions from time to time in meeting agendas, or dedicate specific time for such effort (See Recommendation 5 and 7). A neutral facilitator or broker may be useful, but decisions about this would need to rest with members themselves.

### 5.3 Understanding Internal Capacity of the Network

The evaluation team found a high degree of confidence in Network members' capabilities in this area of work. For future planning purposes, at the level of the understanding internal capacity, a framework developed by Baser and Morgan (2008) may be useful. The framework explores five core capabilities that an entity, such as a network or organization, may consider when reflecting on capacity to bring about change. It is offered here as a potential means for considering current capabilities and planning for future priorities, since research behind the framework was undertaken in diverse cultural and political contexts, with organisations focused on development-related change (See Recommendation 7).

The first capability in the Baser and Morgan framework focuses on the **capability to commit and engage**, related to leadership, agency and willingness to work collaboratively towards some kind of change, including systemic or development-related change. The evaluation found the Network comprises enthusiastic and committed members, all passionate about working together to bring about change and focused on their own leadership. While the COVID-19 pandemic has limited face-to-face engagement and compromised some members ability to engage the entire time, members remain committed to the Network. They are committed to making a plan for the future, and seek support to develop a collective plan (see Recommendation 3 and 4).

The second capability relates to **carrying out technical, service delivery and logistical tasks**. The Network has an abundance of technical expertise within its membership, related to various sectors, frames of reference and practical experience in community engagement, advocacy and business. It has been able to build on the evidence base of the menstrual health ecosystem since becoming active, through case study development, pilot projects and interaction and engagement among Network members (see Box 1). The Pacific-led coordination role has helped to gather momentum and had a positive impact on the coordination, communication and collaboration of the Network. WaterAid has provided important program management and logistical support to Network members in the past three years.

The third capability is the **capability to relate and attract**. This capability is about being able to relate to other stakeholders and attract resources. As noted throughout this report, there is a strong consensus that members would like the network to be Pacific-led, as well as interest in ongoing external support for some elements. Suggestions included a secretariat based in the Pacific or the introduction of paid country Network coordinators to support a more strategic operation. These roles and functions, along with the other operating costs of the Network need to be funded. Grant management is an important component of programs, organisations or networks and needs to be considered and resourced accordingly. Limited access to funding contributes to a limit on what the Network can do. Funding streams and engagement planning with donor agencies needs to be considered by the Network in the next phase (see Recommendation 2).

The fourth capability is the **capability to balance diversity and coherence**, which in this case refers to the Network's need to balance a focus on the core issue of improving menstrual health alongside considering new ideas and ways of working. Menstrual health is a core focus for all members.

Whether they are rights-based organisations, social enterprises or non-government organisations, all members are committed to improving menstrual health in the Pacific. However, as acknowledged by members, with diversity, comes complexity and a number of different lenses and frames of reference. These different frames of reference contribute to different priorities for the operational and strategic directions of the Network. As Green (2020) highlights, 'having a shared ambition is the glue that binds influencing networks together, aids success and facilitates the commitment of members to support each other in good and bad times. But it requires a continuous process of discussions, debates and consensus-building'. A highly engaged and committed planning process will help members work successfully on the diversity and coherence aspects of the Network and determine the mix of future priorities (see Recommendation 5).

The fifth capability is the **capability to adapt and self-renew**. This relates to an organisation or network's ability to identify and act on emerging opportunities and pivot and adapt when the landscape changes. Given the discussion in Section 5.1 above, the Network may wish to consider how this capability could be strengthened over time, so that emerging challenges can be addressed without the Network collapsing or becoming ineffective, and so emerging opportunities can be acted upon appropriately (see Recommendation 8).

## 5.4 A Pacific-Led Network

All members expressed strong views that they would like the Network to be Pacific-led, although they were less clear about specific details. For example, it raises the question whether a network actually needs a central leader or disparate leadership. Also, a distinction could be made between being 'partially' or 'fully' Pacific led. 'Partially' may refer to the current status quo of the Network where the coordination and communication are led by Pacific-based personnel, but the grant management, program management and financial and reporting management systems are supported by WaterAid, based in Melbourne Australia. A 'fully Pacific-led' Network would encompass all responsibilities currently carried out by WaterAid, as well as the coordination and communication tasks.

Donor and grant management requires experience, effort and resources, as does program management and effectively managing financial and report systems aligned with donor requirements. WaterAid, as a well-established INGO is able to absorb some of the costs within existing systems, which help the Network. The localisation agenda may have an influence on members' views about the future of the Network and how the Network is funded and managed. If members wish to move to becoming a fully Pacific-led Network, this will require a great deal of member thinking and effort. Also, resources required for donor relationships, program management and financial and reporting accountability aspects need to be considered and planned (See Recommendation 1).

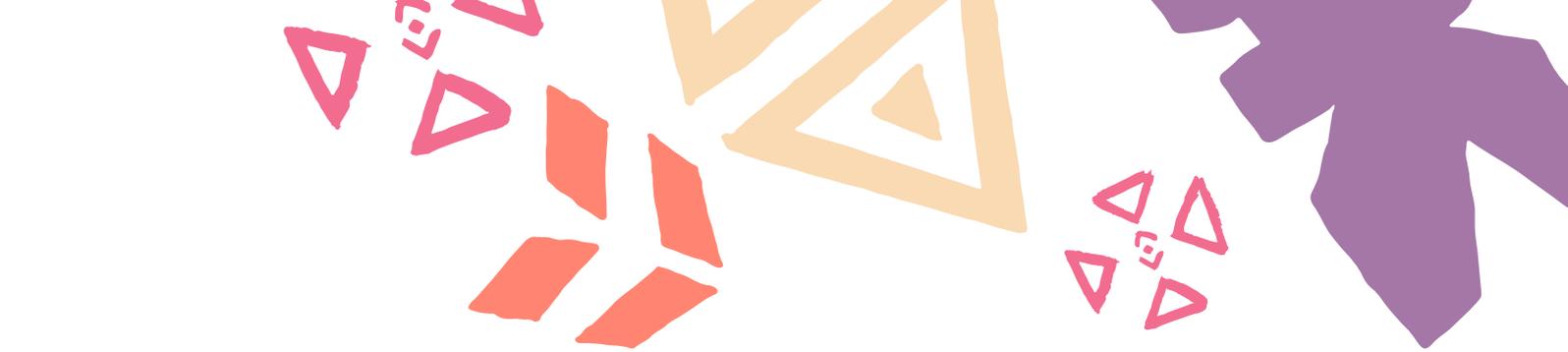
## 5.5 WaterAid's Role

WaterAid played an integral role in establishing the Network and supporting/facilitating members to achieve the objectives described in Box 1. From the inception of the Network and through the challenges of COVID-19, WaterAid continued to support members with grant management, program management, resource development and human resource support for Pacific Coordinators. Members have valued WaterAid's support for the Network to go in whichever direction they choose. Members and WaterAid would like the Network to move towards a more sustainable model, so there is value in collective determination about what is involved and what is possible in the Pacific context. Given the changing agendas of donors and short funding cycles, there are few examples of sustainable Network models, but members are interested in seeking support from organisations beyond the Australian Government, and there are some benefits from a broader range of funding sources (as well as considerable costs).

WaterAid's experience and access to Australian Government funding through ANCP places them in an ideal position to continue to support the Network in future, including supporting engagement with other potential sources of funding, advice and information (see Recommendation 6, 7 and 8).

## 5.6 Multi-Country Network or a Regional Network

Another theme worth exploring and considering for this Network is the distinction between a multi-country network and a regional network. Members noted their primary interest is on activities at the national level, and consider there are benefits to collaboration between countries. A multi-country network brings together countries which are working at a national level. In contrast, a regional network tends to prioritise activities at the regional level, creating a new agenda that sits alongside the national level and makes things happen that may not otherwise happen, often driven from a regional hub. Regional networks have a central energy point from which it may be easier to access external stakeholders, funding streams and increased collaborative opportunities. In contrast, multi-country networks without the central hub, are often limited in their access to resources and regional stakeholder collaboration. There are strengths and limitations to both models and these need to be carefully considered when determining the Network's vision and how they may function as a collective in future (see Recommendation 7).

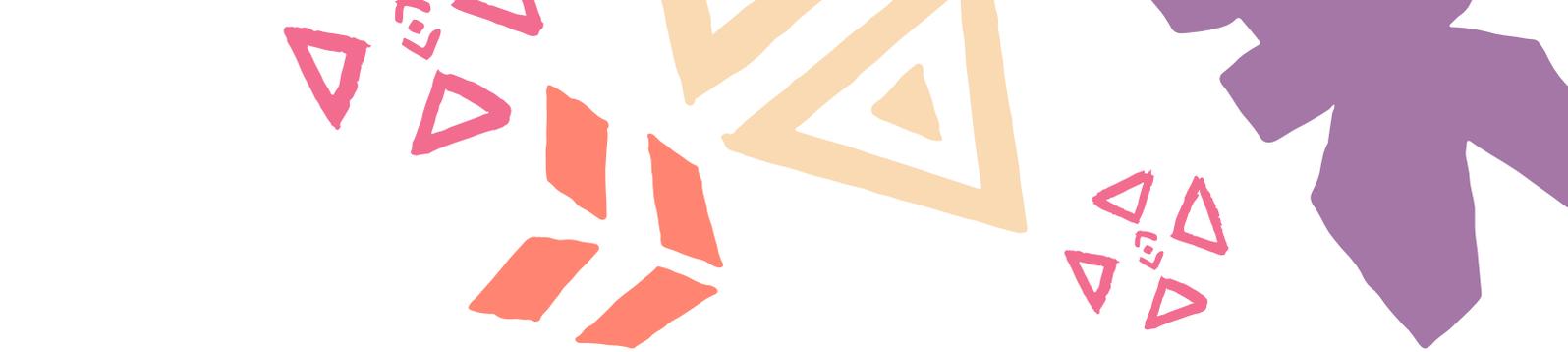


# 6 RECOMMENDATIONS

Overall, the Pacific Menstrual Health Network (the Network) has taken significant steps towards establishing itself as a collaborative member-driven, Pacific-led platform to progress menstrual health in the Pacific. Based on the findings and discussion above, the following recommendations aim to strengthen and build on what is already an effective approach:

1. The Network should continue to be Pacific-led (partially or fully) to support the amplification of the Pacific voice and ownership of the Network and its vision, while recognising each member's and country's unique strengths and cultural values. Whether the Network can be partially or fully Pacific-led needs to be considered, based on members' experience, analysis of available resources and efforts required.
2. Now the Network is well-founded, there is potential benefit in increasing awareness about its vision and function among national governments, Pacific CROP agencies, international agencies (NGOs, UN agencies and others) and donor organisations. A multi-faced approach may be useful, depending on shared priorities, available resources and existing networks. Dialogue may be in the form of individual meetings with organisations or through participation and engagement at conferences, with the purpose of encouraging interest, attracting resources and contributing to systemic change. Accessing funding from a range of sources could contribute to ongoing Network sustainability in future. Increased credibility of the Network can help national fundraising and thus also improve sustainability.
3. Members should continue to build and enhance national networks, including through support and resources provided by the Network. This could in turn, strengthen the credibility of the Network, contributing to a cycle of mutual benefit.
4. Members should maximize and build on the short-, medium- and long-term successes of the menstrual health movement in the Pacific. This includes the Network's success in organising events as part of the International Women's Day and World Menstruation Day, developing case studies and pilot projects to promote awareness and benefits of the Network.
5. The Network's ability to successfully navigate diverse frames of reference and encompass a range of stakeholders will contribute to its effectiveness, so members would benefit from ongoing dialogue, reflection and negotiation of shared values to determine shared priorities and celebrate members' contributions.
6. WaterAid should support the Network for the next three years through:
  - a. Grant management and funding to support Phase 2
  - b. Program management, through Pacific Coordinators
  - c. Human resource management related to Pacific Coordinators
  - d. Facilitation of the planning phase (see Recommendation 7 and 8).

7. When organising the joint planning process for the next stage of the Network's work, members may consider exploring the following topics:
  - a. How systemic change (and other forms of change) happens in the Pacific, rights-based approaches to change, gender justice, transformational vs transactional types of change and context-specific influences on menstrual health
  - b. Understanding capability strengths in order to prioritise future efforts and commitments in Phase 2
  - c. Strengths and limitations of different contributions and modalities for bringing about change in Pacific contexts, including multi-country and regional options
8. WaterAid should support Network members to consider options related to a more sustainable model in future, as part of as well as in addition to the planning process for Phase 2. This may include engagement of a facilitator, if agreed, to support discussions and analysis of the following topics, so WaterAid can play a role as participant:
  - a. Development of a roadmap to support strategic thinking, communications, broad timeframes and resources required
  - b. Negotiated agreement of shared principles and values
  - c. Shared vision and objectives for the Network
  - d. Strengths and limitations of effective modalities and decisions about preferred option



# 7 REFERENCES

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# ANNEX A

## OVERALL QUESTIONS FOR THE EVALUATION TEAM

The following questions were identified by the evaluation team as the overall questions for their own understanding of the context and will be used as the guiding interview questions.

### **1. In what ways has the development of a network been an effective modality to address menstrual health in the Pacific?**

- a. What is a network?
  - i. What is the purpose of a network?
  - ii. What are the features of a good network in the Pacific?
- b. What did members/WaterAid expect would be the benefits of participating in a network for menstrual health in Pacific?
- c. What is it that makes the network work?
  - i. How do you see your role, as a member on the network?
  - ii. What do the members bring to the network and contribute to the network from other places?
  - iii. What keeps them interested in continuing to be active in the network?
- d. Do you think a network is an effective way to address menstrual health in the Pacific?
  - i. Given your understanding of participating in the network to date, how do you see the network addressing menstrual health in the future?

### **2. What value has being part of the network brought to its members and what learning or improved practice have members taken forward?**

- a. Tell us about the benefits of being a part of the network?
  - i. What is the most important one of those for you? Can you tell us more about it?
  - ii. What value does being a part of the network bring to your organisation?
- b. What differences can you see in your country as a result of being a part of the regional network?
  - i. For example, does the presence of the network help you to feel comfortable to talk about menstrual health in your country, if it is a taboo topic?
- c. What have you contributed to the network? What have you learned from being a part of the network?

**3. What factors have enabled or impeded the regional network progress towards influencing other stakeholders on greater commitment or support for menstrual health across the Pacific?**

- a. Has the network influenced other stakeholders? If so, how?
- b. What has worked well in terms of influencing and why?
- c. Does being part of a regional network enable the members to engage with government and other stakeholders in ways that they would not be able to do otherwise?

**4. How can WaterAid most effectively support the network going forward and work towards a sustainable model beyond our support?**

- a. You mentioned earlier about your vision for the future of the network: how would you like WaterAid to contribute in future?
- b. How do you see the intersection between WaterAid's strategic priorities and the future of the network? Why is it a valuable approach/ project for WASH?
- c. How can WaterAid most effectively support the network in future?

These questions will be asked in varied ways, depending on the stakeholders, recognising that different groups have different levels of engagement with and knowledge of the Program. Questions will also be adjusted to suit group meetings or individual interviewees (where requested), maximising the relevance to each group.

**Additional engagement with Mamma's Laef and Pacific Disability Forum (to develop the case studies)** will take place during the scheduled interview times. These will be based on the following questions, which are intended to guide discussions and generate stories about the members and their participation in the network:

1. Can you tell us about the history of your organisation?
2. What are the key aspects of the organisation?
3. Is disability inclusion or other aspects of inclusion a part of your network? (PDF won't be asked about 'disability inclusion')
4. Since joining the network, can you share some examples of activities you have undertaken or engagements with the network?
5. Reflecting on this (these activities/engagements), what worked well and why? Did this lead to any changes?
6. What do you think makes the network work well? And Why?
7. Has there been any benefits for your informal country network to improve menstrual health through your involvement with the Pacific Menstrual Health Network?
8. What would you like to see happen in your country with regional network? Are there any particular areas they could focus on?

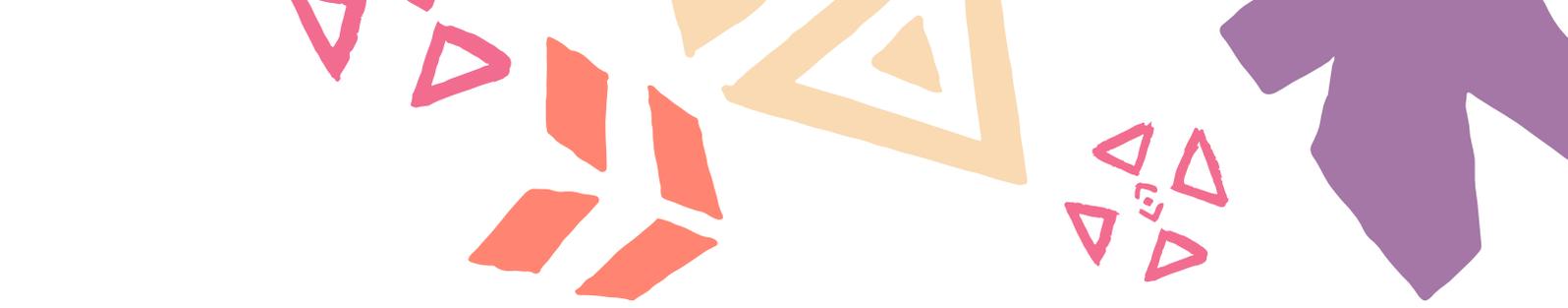
# ANNEX B

## EVALUATION QUESTIONS, MAJOR SOURCES AND METHODS

Key Evaluation Question	Sub-Evaluation Questions	Sources	Methods
1. In what ways has the development of a network been an effective modality to address menstrual health in the Pacific?	a. What is a network?  i. What is the purpose of a network?  ii. What are the features of a good network in the Pacific?	Research/ Literature	Literature review
	b. What did you expect would be the benefits of participating in a network for menstrual health in the Pacific?	Network members WaterAid	Interviews
	c. What is it that makes the network work?  i. How do you see your role, as a member on the network?  ii. What do the members bring to the network and contribute to the network from other places?  iii. What keeps you interested in continuing to be active in the network?	Network members WaterAid	Interviews
	d. Do you think a network is an effective way to address menstrual health in the Pacific?  i. Given your understanding of participating in the network to date, how do you see the network addressing menstrual health in the future?		
2. What value has being part of the network brought to its members and what learning or improved practice have members taken forward?	a. Tell us about the benefits of being a part of the network?  i. What is the most important one of those for you? can you tell us more about it?  ii. What value has your organisation got from being a part of the network?	Network members	Interviews

Key Evaluation Question	Sub-Evaluation Questions	Sources	Methods
	<p>b. What differences can you see in your country as a result of being a part of the regional network?</p> <p>i. For example, does the presence of the network help you to feel comfortable to talk about menstrual health in your country, if it is a taboo topic?</p>	<p>Network members WaterAid</p>	<p>Interviews Documents/Data</p>
	<p>c. In what ways have you contributed to the network? What have you learned from being a part of the network?</p>	<p>Network members</p>	<p>Interviews</p>
<p>3. What factors have enabled or impeded the regional network progress towards influencing other stakeholders on greater commitment or support for menstrual health across the Pacific?</p>	<p>a. Has the network influenced other people and organisations in your country or more broadly? If so, how?</p>	<p>Network members WaterAid</p>	<p>Interviews Documents/Data</p>
	<p>b. What has worked well in terms of influencing other people and organisations. Why do you think these things have worked well?</p>	<p>Network members WaterAid</p>	<p>Interviews Documents/Data</p>
	<p>c. Does being part of a regional network enable the members to engage with government and other stakeholders in ways than they would have otherwise?</p>	<p>Network members</p>	<p>Interviews Documents/Data</p>
<p>4. How can WaterAid most effectively support the network going forward and work towards a sustainable model beyond our support?</p>	<p>a. You mentioned earlier about your vision for the future of the network, how would you like WaterAid to contribute in the future?</p>	<p>Network members WaterAid</p>	<p>Interviews</p>
	<p>b. How do you see the intersection between WaterAid's strategic priorities and the future of the network? Why is it a valuable approach/project for WASH?</p>	<p>WaterAid</p>	<p>Interviews</p>
	<p>c. How can WaterAid most effectively support the network going forward?</p>	<p>Network members WaterAid</p>	<p>Interviews</p>





# ANNEX C

## STAKEHOLDER INTERVIEW QUESTIONS

The following interview questions (and guide) were developed to gather information about stakeholder's experiences of the program.

### C1 – Pacific Menstrual Network Members

Introduce yourself

Mention the purpose and expected benefits of the evaluation

Ask for consent to participate and mention the key elements of the consent process

Thank you for agreeing to participate. We have some questions but we are keen to hear from you about whatever you'd like to tell us about the network.

1. Perhaps to start, can you tell us a little about **your organisation**, and your role in it?
2. Can you tell us how **long you have been involved** in the Pacific menstrual health network?
3. When you joined the network, what did you **expect would be the benefits** of participating in such a network?
4. Now that you have been a member of the network, how do you see your role?
5. In your experience, what is it that **makes the network work?** [possible prompt questions...
  - a. What do the members bring to the network and contribute to the network from other places?
  - b. What keeps you and the other members interested in continuing to be active in the network?
6. Now that the network has been going a few years, do you think a **network is the most effective way** to address menstrual health in the Pacific?
7. Can you tell us about the **benefits** of being a part of the network? [possible prompt questions...
  - a. What is the most important one of those for your organisation? Can you tell us more about it?
  - b. What value has your organisation got from being a part of the network? [possible prompts; status, capacity to influence, programming etc]
  - c. What differences can you see in your country as a result of being a part of the regional network?
  - d. What have you contributed to the network?
  - e. What have you learned from being a part of the network?

8. Given your understanding of participating in the network to date, how do you see the **network addressing menstrual health in the future?**
9. Has the **network influenced other people and organisations**, either in your own country or more broadly? If so, how?
10. What has **worked well** in terms of influencing other people and organisations? Why do you think these things have worked well?
11. Does being part of a regional network **enable the members to engage** with government and other stakeholders in ways that are different from before?
12. You mentioned earlier about your vision for the future of the network. How would you like **WaterAid to contribute in future?**
13. These are all the questions we have for you. Is there **anything else** you'd like to tell us?
14. Do you have any **questions for us?**

Shortly we will provide you with 2 – 3 key points from our discussion today to give you the opportunity to validate your insights and share any further emerging thoughts you may have.

Thank you for participating in the evaluation. We will make sure you receive a draft copy of the evaluation report so you can comment on it before it is finalised.

## C2 – WaterAid staff

Introduce yourself

Mention the purpose and expected benefits of the evaluation

Ask for consent to participate and mention the key elements of the consent process

Thank you for agreeing to participate. We have some questions but we are keen to hear from you about whatever you'd like to tell us about the network.

1. Can you tell us a little about **your role** in WaterAid? What do you **know about** the Pacific menstrual health network and what is **your experience** of it in practice? How long have you been involved?
2. If you are actively involved, what keeps you **interested in continuing** to be active in the network?
3. If you are not actively involved, how do you know about the network?
4. From your knowledge and experience, what do **members contribute** to the network?
5. From your knowledge and experience, what is it that makes this **particular network work?**
6. Do you think the network has **influenced** other people and organisations yet? If so, how?
7. How do you see the **intersection** between WaterAid's strategic priorities and the future of the network? Why is it a valuable project/approach to WASH?

8. How can WaterAid most **effectively support** the network going forward?
9. These are all the questions we have for you. Is there anything else you'd like to tell us?

Shortly, we will provide you with 2 – 3 key points from our discussion today to give you the opportunity to validate your insights and share any further emerging thoughts you may have.

Thank you for participating in the evaluation.

### C3 –Case Study questions (for Mamma's Laef and PDF)

1. Can you tell us about the history of your organisation?
2. What are the key aspects of the organisation?
3. Is disability inclusion or other aspects of inclusion a part of your network? (*PDF won't be asked about 'disability inclusion'*)
4. Since joining the network, can you share some examples of activities you have undertaken or engagements with the network?
5. Reflecting on this (these activities/engagements), what worked well and why? Did this lead to any changes?
6. What do you think makes the network work well? And Why?
7. Has there been any benefits for your informal country network to improve menstrual health through your involvement with the Pacific Menstrual Health Network?
8. What would you like to see happen in your country with regional network? Are there any particular areas they could focus on?



# ANNEX D

## STAKEHOLDER INTERVIEW LIST

### **Pacific Menstrual Health Network Members**

Frances Angelica Salele – Mana Care, Samoa

Isabella Mema Rasch – Mana Care, Samoa

Anne-Shirley Korave – QueenPads, Papua New Guinea

Mary Elizabeth Ramosaea, Kaleko Steifree, Solomon Islands

Noelene Nabulivou, DIVA for Equality, Fiji

Representative, Fiji Women’s Rights Movement – FWRM, Fiji

Jack and Mary Kalsarp, Mamma’s Laef, Vanuatu

Belinda Roselli, Mamma’s Laef, Vanuatu

Maria Miller, Pacific Disability Forum – PDF, Fiji

Sovaia Sisi Coalala, Pacific Disability Forum – PDF, Fiji

### **WaterAid Australia Staff**

Chelsea Huggett

Navara Kiene (Papua New Guinea Program)

Meredith Hickman



# ANNEX E

## INTERVIEW CONSENT FORM

### Interview Consent Form – Pacific Menstrual Health Network Evaluation

WaterAid has commissioned an evaluation Phase 1 of the Pacific Menstrual Health Network Evaluation. They want to understand what has worked well and why; key constraints and how WaterAid can most effectively support the network going forward. They would like to capture stakeholders' insights and suggestions for recommendations for Phase 2 design.

The evaluation will be undertaken in April – May 2022 by a team of three people. One person based in Vanuatu and two people based in Australia.

If you agree to participate in the review, there are options in relation to confidentiality.

#### Would you like to participate in the research?

- Yes, I accept the invitation
- No thank you, I would like to decline the invitation

#### Confidentiality (please choose one statement)

- I agree to be identified by having my name in the back of the report

OR

- I prefer not to be identified by name. You can use my thoughts but do not include my name anywhere in the document

If I agree to my name being included in the back of the report, I request the report writers to make it hard for the reader to know which are my words.

Name

Signed

Date

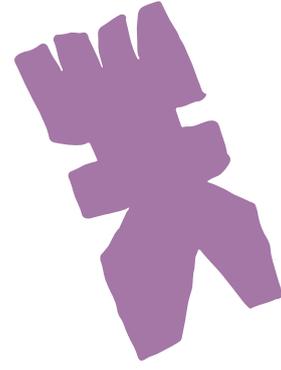
# ANNEX F

## CHECKLIST OF ETHICS QUESTIONS

(Adapted from ACFID and Development Impact Network)

Respect for Human Beings	Checklist for Questions	Yes/No
Implementation	Do you have a method for obtaining and recording informed consent?	Yes
	Do you have a plan to protect confidentiality and anonymity?	Yes
	Do you have a system or plan for managing data during and after the research?	Yes
Analysis and Reporting	Will the anonymity, confidentiality or privacy of the participants be maintained through the process?	Yes
<b>Beneficence (or Benefit)</b>		
Research Design	Does the research pose more than no risk or little risk of harm to researchers and participants?	No
	anyone involved? Does the benefit of the research outweigh the potential harm to	Yes
Implementation	Do you have a strategy to convey the benefits of the research to research participants in such a way that it is clear and does not create false expectations?	WaterAid Australia's responsibility
	Have risks to field researchers themselves been assessed and ways to minimise these risks devised?	Yes
Dissemination and Use	Do you have a realistic plan and time frame for sharing results- and potential benefits with research participants?	Yes
<b>Research Merit and Integrity</b>		
Research Design	Is the methodology appropriate to the context and purpose of the research?	Yes
	Does the research design involve local partners at all stages (participatory approach or consultation with key stakeholders)?	Yes

Planning	Is the research well-planned and integrated into a program of work?	Yes
	Do researchers have the relevant expertise to conduct the research?	Yes
	Does the research have approval of and co-operation from gatekeepers to access the groups or individuals participating in the research (e.g. community leaders)?	Party
Implementation	Have researchers received training advice and assistance relating to addressing any known or unforeseen ethical issues?	Yes
	Is it clear what information can or cannot be shared if requested?	Yes
Analysis and Reporting	Will the information be analysed and presented fairly?	Yes
	Will the data be collected and secured safely?	Yes
Dissemination and Use	Is there a plan for how the findings will be disseminated and used?	WaterAid Australia's responsibility
<b>Justice</b>		
Research Design	Has adequate information, education or training about particular ethical considerations been provided to the researchers prior to the research taking place?	Commenced
Planning	Does your recruitment plan ensure inclusion and representation of people from vulnerable or marginalised backgrounds?	All those involved will be invited and supported to participate
Implementation	Is there a strategy in place to manage the power dynamic between researchers and research participants?	Yes
Analysis and Reporting	Will the research findings be made available in a format that is meaningful and useful for participants?	Yes
Dissemination and Use	How will you ensure that information is appropriately fed back to those who participated in the research, at an individual and community level?	Evaluation team to provide continuous feedback, including workshop and draft report WaterAid Australia's responsibility



# ANNEX G

## VARIOUS APPROACHES TO CONTRIBUTING TO CHANGE

- Action learning
- Coaching
- Communities of practice
- Customised leadership and management development programs
- Establishment of professional associations
- Exchanges
- External and internal training courses
- Forums, seminars and conferences
- Internships
- Joint evaluations and research processes
- Mentoring
- Project teams are working groups
- Scholarships
- Secondments
- Study tours
- Support for strategic and operational planning
- Team retreats
- Training of trainers



