



# Irise International

## Genesis Charitable Trust Impact Report

*Creating opportunity, removing barriers, building capacity*



**“Nowadays I am free, I go to school, I jump”**



**“I am empowered, I can stand as a woman”**

## 1.1 Who we are

Our vision is a world where no woman or girl is held back by her period.

*Irise empowers girls and their communities in the UK and East Africa through improving menstrual health. We do this through delivering practical programmes, undertaking innovative research and advocating for policy and practice change.*

Irise is a learning organisation. Our practical programmes and innovative research constantly inform each other. We champion innovative approaches working with a wide range of partners and help others replicate our work.

We are an organisation dedicated to listening and responding to women and girls' voices and nurturing leadership amongst the people we serve. We believe that when we are led by women and girls' voices and informed by robust evidence long lasting social change can be achieved.



## 1.2 Key achievements from the last five years



Over 100,000 girls supported to stay happy, healthy and in school during their periods.

### Developing Solutions

- Set-up a self-sustaining, community-led business in Uganda manufacturing a affordable reusable pad and supplying approximately 8,000 women and girls a year.
- Created a model for establishing a local market for menstrual products in east Africa. Over 200 local women were empowered to sell a range of more affordable products in their own communities, experiencing a 52% increase in household income which they invested in growing their business, sending their children to school and feeding their family.
- Developing a model “menstruation friendly” school package in Uganda with funding from the UK government, achieving a 23% reduction in girls missing school.
- Enabled young people in the UK to end menstrual stigma through teaching and mentoring; over half of schools girls improved their confidence and over 90% of young people developed their skills.



10 research papers or reports, cited over 50 times by others.

### Creating Evidence

- Irise’s pilot study, published in a peer reviewed journal, has been cited in 8 peer reviewed papers and is scoring in the top 25% of all research outputs scored by Altmetric (which tracks a range of sources to capture the attention surrounding a piece of research). The associated report has been downloaded 6,430 times since it was published.
- In 2016 it was combined with a study from the University of Oxford as part of an analysis to combine existing data on the effect of menstrual health interventions on school attendance. This paper has been read by over 22,000 people and cited 24 times.
- Part of Global Advisory Group for Global Green Paper on Monitoring and Measuring Menstruation.
- Currently conducting the first systematic review of women and girls experiences in high income contexts with the University of Leeds to inform a UK government consultation in October 2019.



Over 100 organisations using our resources to improve menstrual health.

### Sharing Learning

- Trained or partnered with 27 organisations to deliver menstrual health projects in east Africa.
- Founding member and on the Steering Committee for the East and Southern Africa Menstrual Health Research Network- building collaborations and shared priorities for menstrual health research.
- Part of the UNFPA’s African Coalition for Menstrual Health Management Monitoring and Evaluation working group- creating consensus about measuring impact.
- Part of the UK’s Let’s Talk. Period Network funded by Department for Culture Media and Sport through the Tampon Tax Fund and delivered in partnership with BrookCharity and Plan International UK.



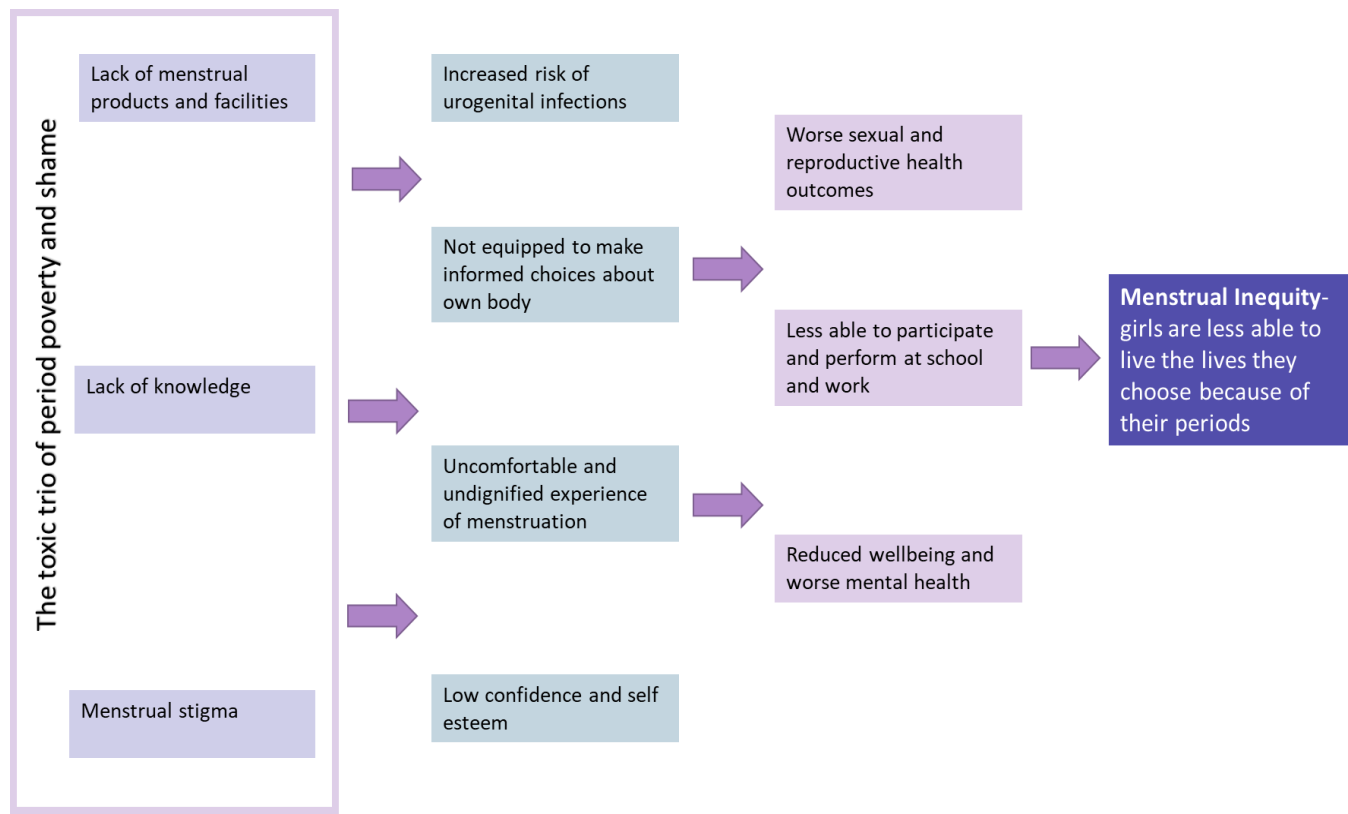
Supporting government in the UK and Uganda to create national policy.

### Advocating for Change

- Part of the Ugandan government’s Menstrual Hygiene Management Steering Committee since 2014 and working with them to create national menstrual health policy, curricula and campaigns.
- Co-convening the Research work stream of the UK government’s Period Poverty task force, working to end period poverty in the UK by 2025.
- Established a network of young people advocating to end menstrual stigma in the UK by 2025- supported 50 young people to take action to end period poverty and enabled 13 to run their own campaigns.

# 1.3 The Need

Women and girls who can access a choice of reliable menstrual products, have knowledge about their own bodies, and are free from shame are more able to pursue the lives they choose. They ensure that the next generation of girls is confident and in control of their bodies, catalysing a cycle of empowerment that will help realise a more equal society for everyone.



- In Uganda:**
- 30% of girls are using potentially harmful improvised materials to manage their periods and over half experience health related symptoms during menstruation.
  - 70% of girls are embarrassed and fearful of menstrual related accidents during their periods
  - Over half are missing some school.
  - 78% of girls lack basic information about their own body and what a period is<sup>1</sup>.
  - A study in Kenya found that 1 in 10 fifteen year old school girls had engaged in transactional sex for pads<sup>2</sup>.

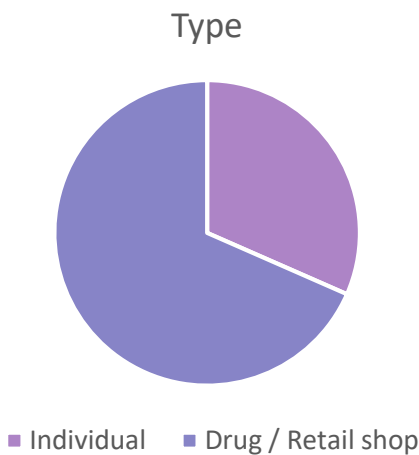
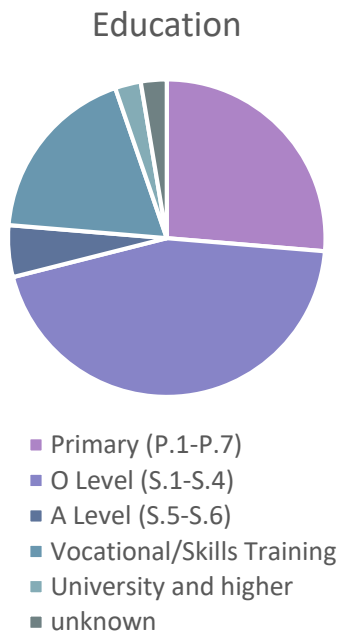
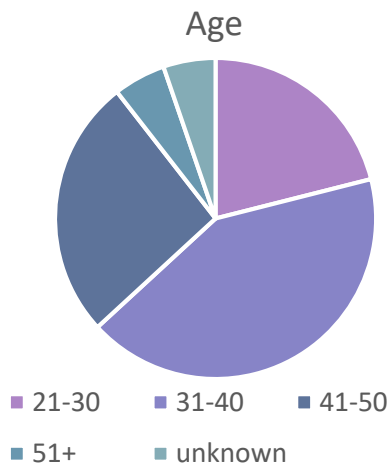
1. Irise (2018) Baseline Report from "Creating menstruation friendly schools in Uganda."  
 2. Phillips-Howard PA, Nyothach E, ter Kuile FO, et al. Menstrual cups and sanitary pads to reduce school attrition, and sexually transmitted and reproductive tract infections: a cluster randomised controlled feasibility study in rural Western Kenya. BMJ Open 2016;6:e013229. doi:10.1136/bmjopen-2016013229

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## 1.4 Project Goals

- **Creating Opportunity:** creating economic opportunities for women through the manufacture, distribution and sales of affordable sanitary products.
- **Removing Barriers:** solving a barrier to work and school participation faced by women and girls through enabling uptake of affordable sanitary products
- **Building capacity:** improving the capacity of the Ugandan and Kenyan governments to enable and regulate markets in reusable products.

## 2.1 Who we worked with



### Entrepreneurs-

The majority of entrepreneurs are aged 31-40 (42%) and have completed some of secondary school (45%). 68% were already had a income generating business e.g. small shop or stall, 32% were using the scheme to start a new business/income generating activity.

“I felt bad, I wasn’t happy with the family because the children were missing out on some things because my husband couldn’t afford and I couldn’t do anything to help. I was living an unhappy life because I wasn’t supplying the needs of my family.”

Florence



# 2.1 Who we worked with

**Communities-** all communities had limited awareness of the issues women and girls faced during their periods and were resistant to change at baseline (i.e. held beliefs that prevented uptake of products).<sup>1</sup>

## Jinja Central Community

*Socioeconomic:* urban and peri-urban slums. Casual labourers and factory workers.

*Baseline Attitudes:* **Community resistance/vague awareness of the issue.**

- Always brand very desirable but unaffordable

## Buikwe Communities 1 and 2

*Socioeconomic:* fishing community, high numbers of single mothers, low levels of primary school completion

*Baseline Attitudes:* **Community resistance/vague awareness of the issue.**

- Women using free contraception to avoid menstruation and manage the expense
- Belief that pads make women barren.
- School girls starting relationships with “sugar daddies” to meet basic needs believed to be common.

## Jinja Communities 1,2 and 3

*Socioeconomic:* subsistence farmers and small traders. High levels of unemployment, alcohol abuse and domestic violence.

*Baseline Attitudes:* **Community resistance/vague awareness of the issue.**

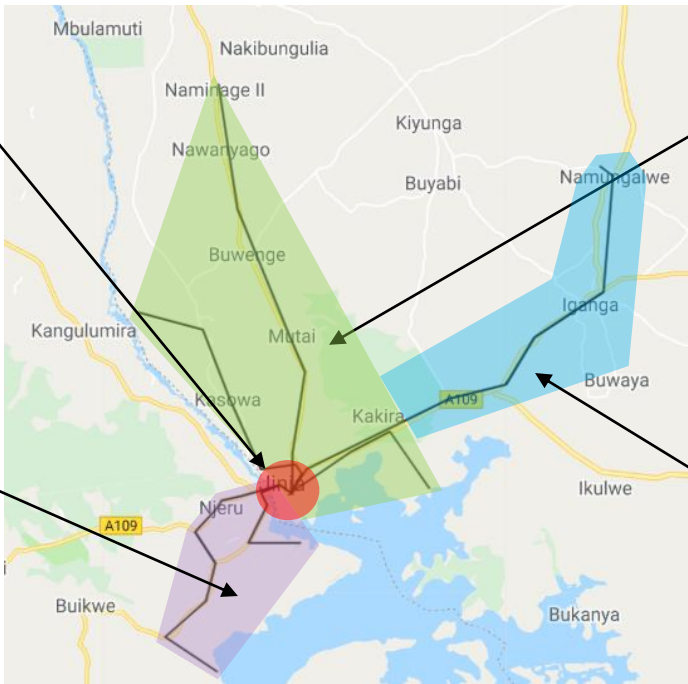
- Heard of menstrual pads but using cloths because products are perceived as foreign.

## Bulanga-Kawete Community

*Socioeconomic:* subsistence farmers and small traders, low levels of primary school completion

*Baseline Attitudes:* **No awareness**

- Strong taboo surrounding menstruation



1. Communities were assessed using an adapted version of the Community Readiness to Change Model; Kelly, K. J., Edwards, R. W., Comello, M. L. G., Plested, B. A., Thurman, P. J., & Slater, M. D. (2003). The Community Readiness Model: A Complementary Approach to Social Marketing. *Marketing Theory*, 3(4), 411–426. <https://doi.org/10.1177/1470593103042006>

## 2.2 What we did



**156** Purple Matatu trips across **10** sub counties in eastern Uganda



**197** entrepreneurs trained



**78,000** pads sold



Over **100** organisations accessing Irise's resources



**25,100** women and girls accessing menstrual products

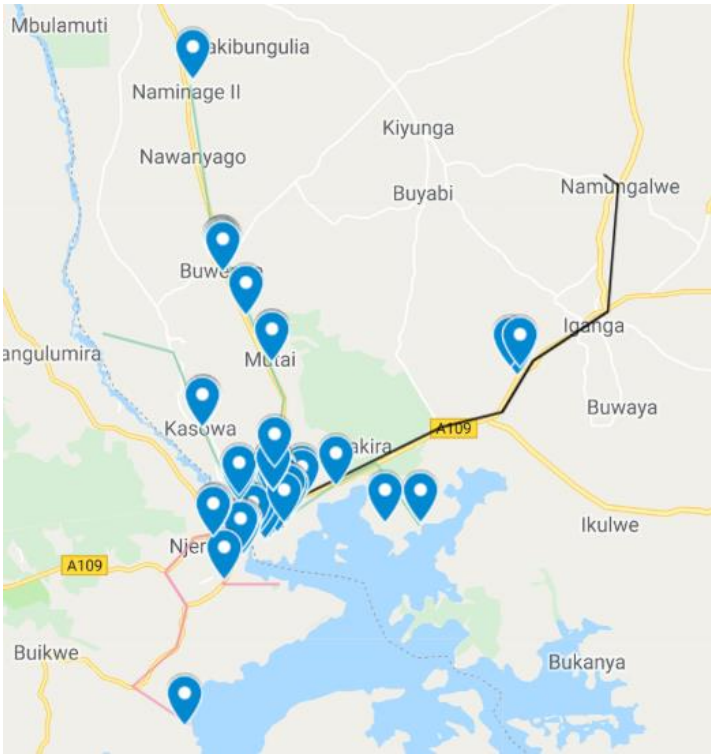


**16** organisations and **285** volunteers and staff trained to replicate Irise's work



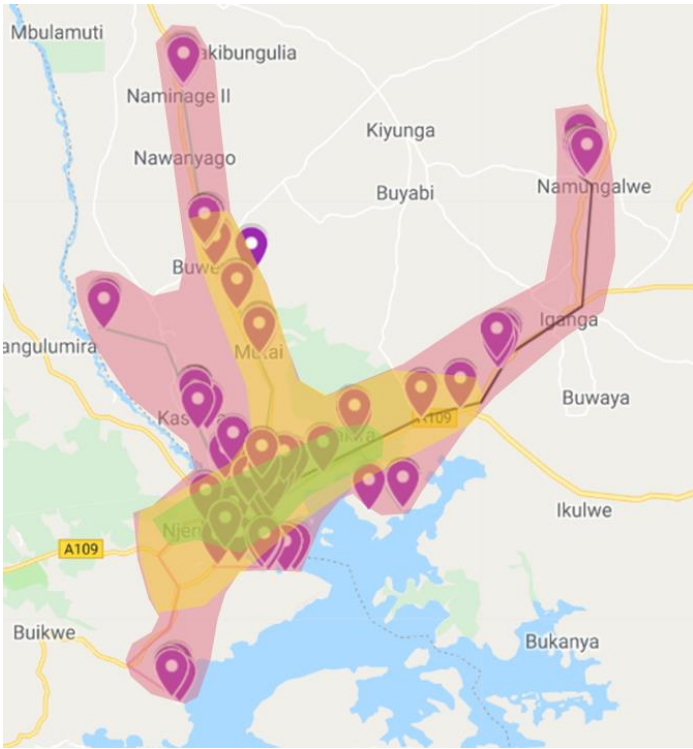
## 2.2 What we did

Maps showing purple matatu routes and entrepreneurs as the project developed



2017

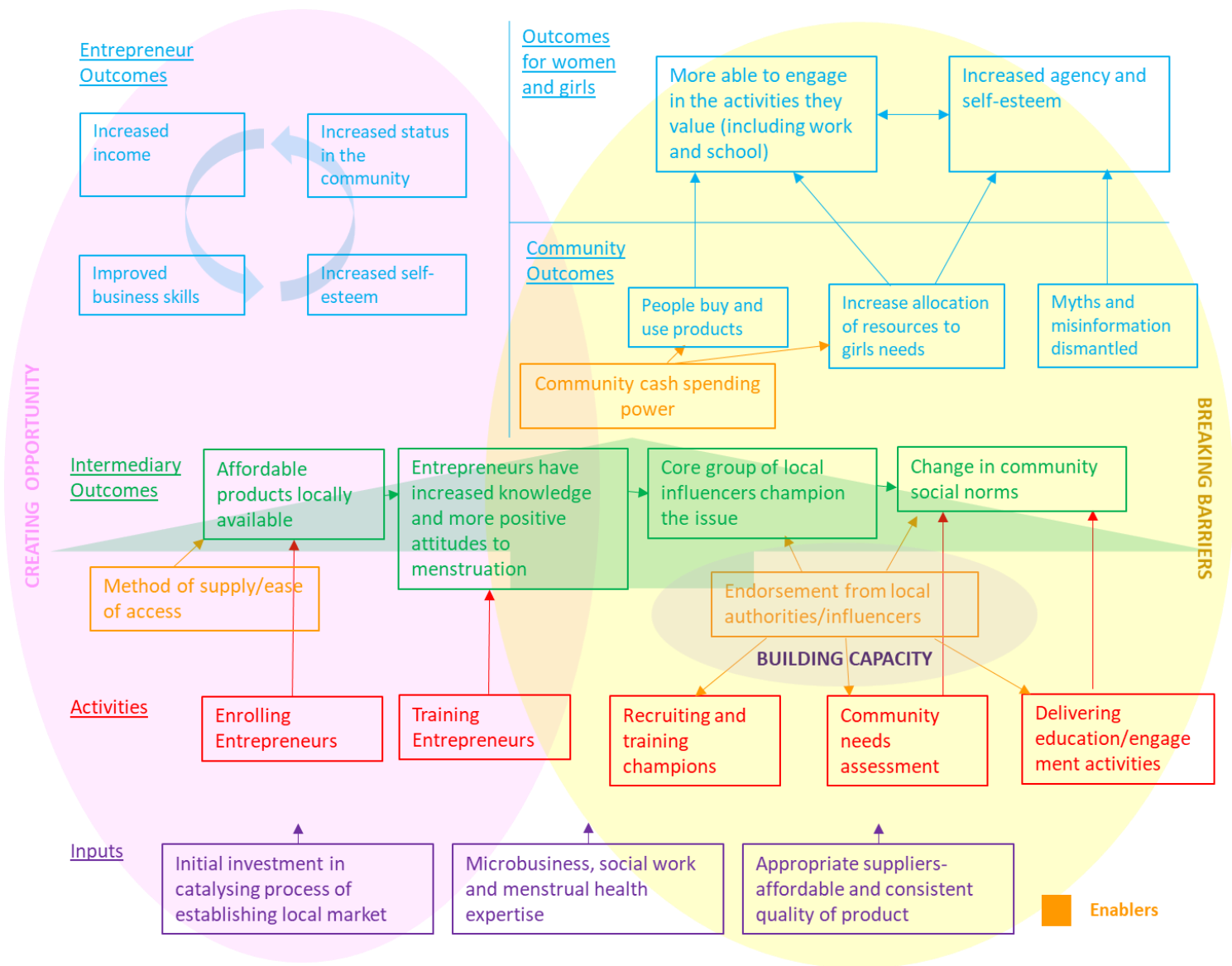
As the project developed, attitudes in the communities shifted and demand for menstrual products increased, private suppliers were able to start working directly with entrepreneurs in some areas. Irise increased support for harder to reach areas, where this process is taking longer, accordingly.



2018-19

- Private sector suppliers working directly with entrepreneurs
- Some private sector involvement starting
- Hard to reach areas with limited private sector involvement

2.3 How it worked



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## 2.3 How it worked

**Inputs-** The key inputs required to make intervention possible are; *1) An initial investment in catalysing the process of establishing a local market;* Social norms need to change to facilitate a market based model of sustainable, local provision of menstrual products. The third sector is better positioned than the private sector to support this shift. Once it has been made and the demand for products has been established a market based approach can thrive. *2) Microbusiness, social work and menstrual health expertise;* these key skills are required to establish the first successful entrepreneurs, work with the community to change social norms and provide education to dispel common myths and stigma that prevent women and girls accessing products. *3) Appropriate suppliers;* supply of an affordable product of consistent quality needs to be in place. Initially, this can be a relationship between the NGO and the business progressing to a direct relationship between entrepreneur and supplier as the project develops.

**Activities-** Key activities making up the intervention are enrolling entrepreneurs, training entrepreneurs, recruiting and training community champions and working with community champions to conduct a community needs assessment and deliver targeted community education and engagement activities. These activities are delivered and supported by the ‘Purple Matatu’ which regularly a travels route through the community over a period of months .

**Intermediary Outcomes-** This process aligns with the Access-Desire-Demand model that underpinned the development of the original theory of change and intervention package; *Access-* entrepreneurs enrol, making affordable menstrual products available locally for the first time, *Desire-* entrepreneurs receive training about menstrual health (alongside general business and marketing skills development). Common myths are dispelled and new products become desirable. Entrepreneurs share information with women and girls, *Demand-* a core group of local champions develop and deliver community level engagement to change social norms around menstruation. This includes engaging people responsible for allocation of resources at the household, school and district level. Purchasing menstrual products becomes a higher priority and resources are allocated, turning desire into demand.

**Enablers-** External conditions critical for the intervention’s success are; *1) Method of supply/ease of access-* entrepreneurs need to be located somewhere accessible to the Purple Matatu and the market potential in that area needs to meet the criteria for cost effectiveness attached to the Purple Matatu. *2) Endorsement from local authorities/influencers-* the issue of menstrual health needs to have gained some political traction to achieve the local endorsement required for successful implementation e.g. national level menstrual health policy or campaigns highlighting the need for action. *3) Community cash spending power-* there needs to be some financial resources within the community (at the household, school and/or local government level) for the intervention to be effective. The process increases the perceived importance of women and girls’ menstrual leads meaning that menstrual products are a higher priority. However, in the absolute absence of resources (e.g. a refugee camp) this model would need adaptation.

**Entrepreneur Outcomes-** the intervention creates a cycle of empowerment for entrepreneurs (particularly those starting with the lowest household income). Training and access to menstrual products increases their income. More income, combined with bringing new products and information to the community increases their status, increasing their self-esteem, leading to further involvement in business and community ventures.

**Community Outcomes-** a permanent shift in community social norms and priorities takes place leading to increased allocation of resources to women and girls needs, dismantling of menstrual myths and purchasing or menstrual products for women and girls long term.

**Outcomes for women and girls-** long term support for their need during menstruation increases women and girls ability to participate in school and work and their self-esteem meaning they are better positioned to take advantage of new opportunities.

**Creating opportunity, removing barriers, building capacity-** these three strands run throughout the intervention. Working through entrepreneurs creates new opportunities for vulnerable women to lift themselves and their families out of poverty. Working with the community to create a market for products removes barriers to women and girls realising their full potential. Building capacity through working with national government creates an enabling environment for these changes at the local level.

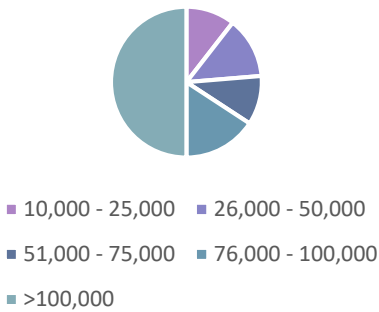
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### 3.1 Entrepreneur Outcomes- *income and agency*

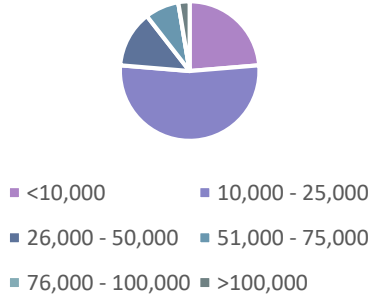
<p>“I didn’t expect this business to yield as much as I get, first of all to pay school fees out of the profits I get from pads, so I never expected that”</p> <p>“the profits that I get out of the business have helped me to clear the basic needs at home, to pay for the basic needs”</p> <p>“So the job was very important to me, because it helps me acquire my basic needs as a woman and then also paying for my children’s school fees is very important for me and that’s why I value this small business because it really contributes towards the wellbeing of my family”</p>	<p>“the business mostly caters to clothings for my children, pants for both the girls and boys and clothes in general”</p>	<p>“my name became famous, I am now known as a health worker ‘masau masau’ means health worker...”</p> <p>“I have gained fame in the community, they know me”</p>	<p>“Well people see me as a precious gift that God gave them.”</p> <p>“I have gained respect from the community and also people perceive me as a person who is a class above, I put on that t-shirt and they see me as someone.”</p> <p>“since I started doing this business, people call me Masau, I’m proud of being called that”</p>
<p>“the biggest part profit is taken back to the business, like to enlarge the capital but their remaining little one is being used to cover up domestic needs”</p> <p>“ever since I started passing on this knowledge to customers, the number of customers increased that come to my place”</p>	<p>“I bought another goat from the profits made from the pads as to increase on my income but also to show my husband that yeah I make some money, this is what I got from the pads, I bought a goat”</p>	<p>“I look better in appearance since I started getting that money, some people see me as a changed person who is looking nice”</p> <p>“I earn respect, more respect from my husband first of all and I feel like I’m not dependent as a woman because I am empowered, I can stand as a woman”</p>	<p>“I used to plead, to kneel down for him to, for example, when there is no salt at home, I had to first wait for him, I was more dependent but now that I take responsibilities, he respects me”</p> <p>“I can get my hair done in the salon... instead of waiting on the man”</p>

### 3.1 Entrepreneur Outcomes- *income and agency*

Baseline Household Income (UGX)

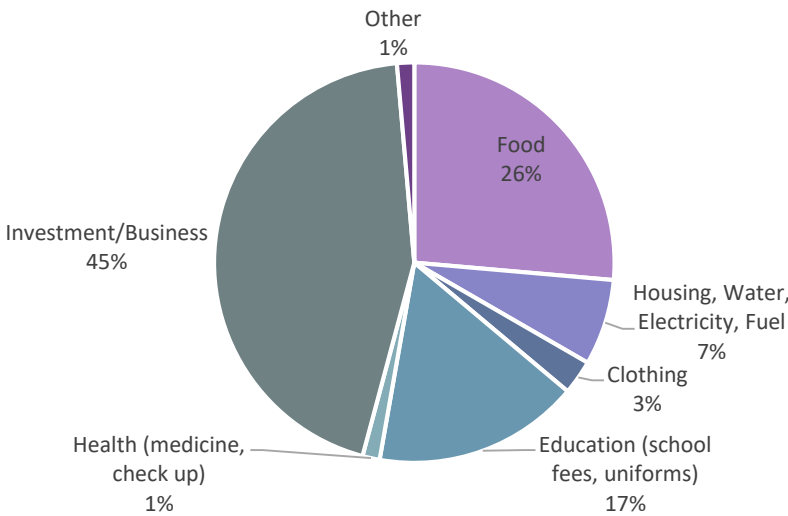


Income from scheme per month (UGX)



- Half of entrepreneurs had a baseline total household income of less than 100,00UGX (the equivalent of £20-25)
- The average percentage increase in earnings for this group as a result of the scheme is 52% (the equivalent £5 a month).
- Entrepreneurs with lower household income spend more on food and education and less on reinvestment.

What earnings are spent on



**52% increase in household income**  
spent on:  
**Growing their business**  
**Sending their children to school**  
**Feeding their Family**



## 3.2 Entrepreneur Case Study



**Florence, aged 38**, depended on her husband for all her income before becoming an entrepreneur. Being an entrepreneur with Irise was an opportunity to earn her own money for the first time. This has increased her freedom and independence as well as enabling her to support her children's education.

"I see myself as a capable, independent and empowered women because I can now improvise with some needs at home. Initially, I used to depend on the man even when there is no soap, I would have to wait and sometimes the man would ignore the responsibilities of, for example, giving books to the child. I would really lead a miserable life because my children are not really getting what they need but I am now so happy, my life is just enjoyed, because I can improvise without my husband...So I have two sounding benefits, the first one is that my name became known everywhere over the community, people call me Masau meaning health worker/social worker, that makes me feel proud of myself because everywhere people call me Masau Florence, meaning health worker. I feel proud with that title, that's the most sounding benefit that has come from the business. And then the other one is that at a certain point, my daughter was going back to college, there's a high institution of learning here, so my husband had all the tuition needed but the requirements were very many that my husband couldn't afford everything so I had to give him a hand. With the profits made from my business I cleared all the bills. It made me feel so proud of my business...

...Also if I get some good profits I buy meat, meat is a big deal here in Uganda, People eat greens, mugene, cheap, cheap sources. So if I buy a kilogram of meat I am recognised at home by my husband and family...For the first time I feel independent. I feel kind of equal to my husband. I feel I have that freedom a woman must have because if I told my husband I'm going to the field, for example, he encourages me because he see the fruits of me going, so he just says 'safe journey and may God lead you, come back safe'- so I gained that freedom, that never happened before."



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## 4.1 Community Outcomes- *changing social norms*

“People can now use both reusable and disposable pads unlike in the past where girls and women could use clothes.”

“I have given my daughter, who is in primary school, pads before she started her period thanks to sensitisation from Irise.”

People buy and use products

“Before Irise started selling pads the cheapest pad was at 3,000 but now they can buy for 1500.”

“There is a great change because before I started selling pads, most girls and women in my community would use clothes to pad themselves.”

“Now I know I’m meant to help my daughter and my wife, I tell her to ask me for pads so I can get them for her”

“It’s good that Irise teach the boys about menstruation, they need to learn because if I’ve started my menstruation and my mother is not there I can go and tell my father ‘I’ve started my menstruation and need pads.”

Increase allocation of resources to girls needs

“Before Irise, children were using dirty old cloths during their period, but now the children have taken back their pads from Irise, their parents know they’re supposed to buy sanitary pads for their girls”

“Before Irise we did not have anything to support the girls at school, if a girl started her period and came to you (the teacher), we would tell girls to just go back home”

“The community had a wrong perception about disposable and manufactured reusable pads. That is to say they had a myth that these pads are cancer causing, however, after the training I was able to tell them facts about pads and thank God they were able to understand and started using them.”

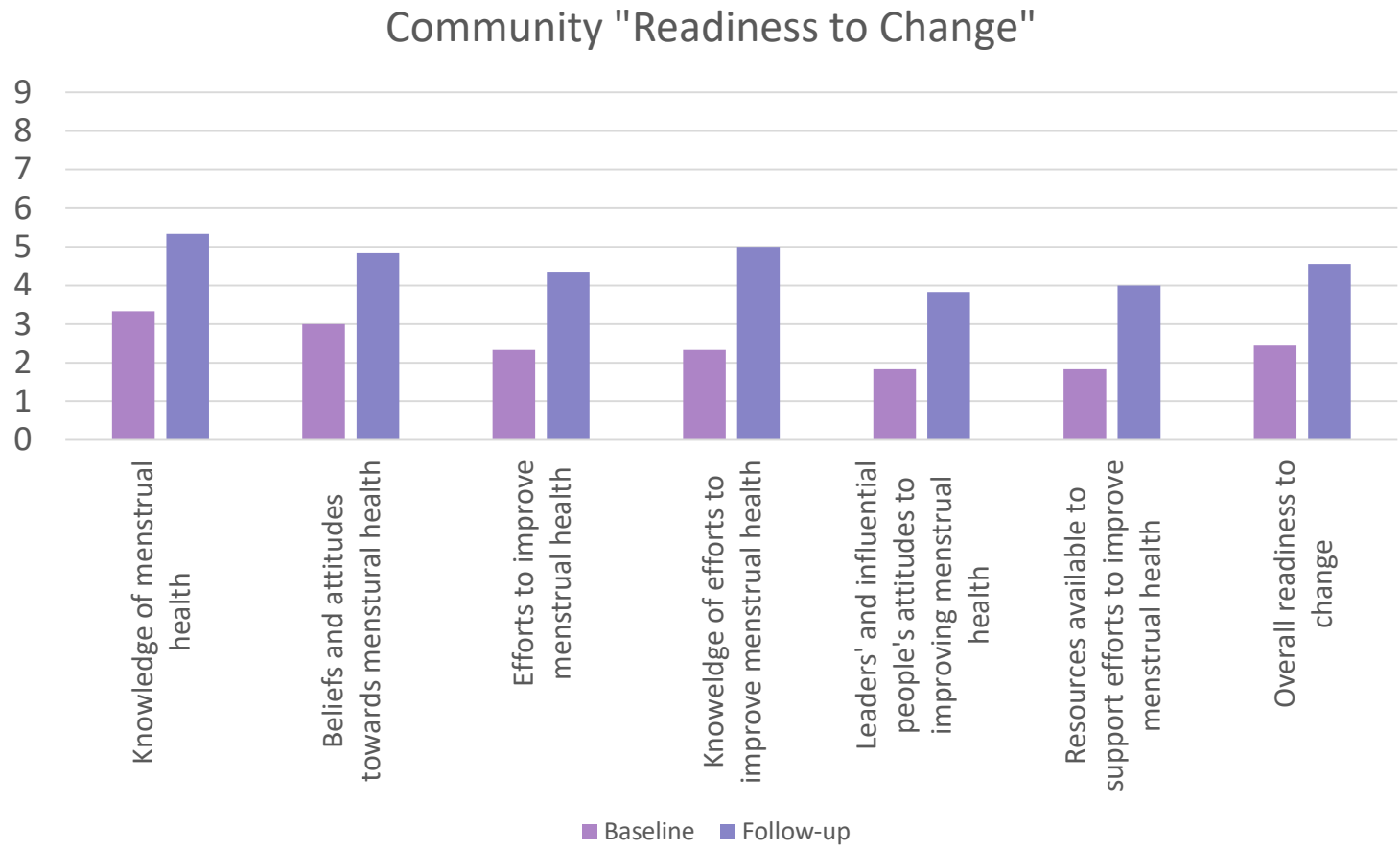
Myths and misinformation dismantled

“When someone is in menstruation you’re still supposed to associated with these people.”

“The myth that young girls may not be able to bear children when they use these pads no longer exists.”

“Irise taught us that if a girl is in menstruation, we should not laugh at her. Before I used to be one of the ones laughing at girls during their menstruation.”

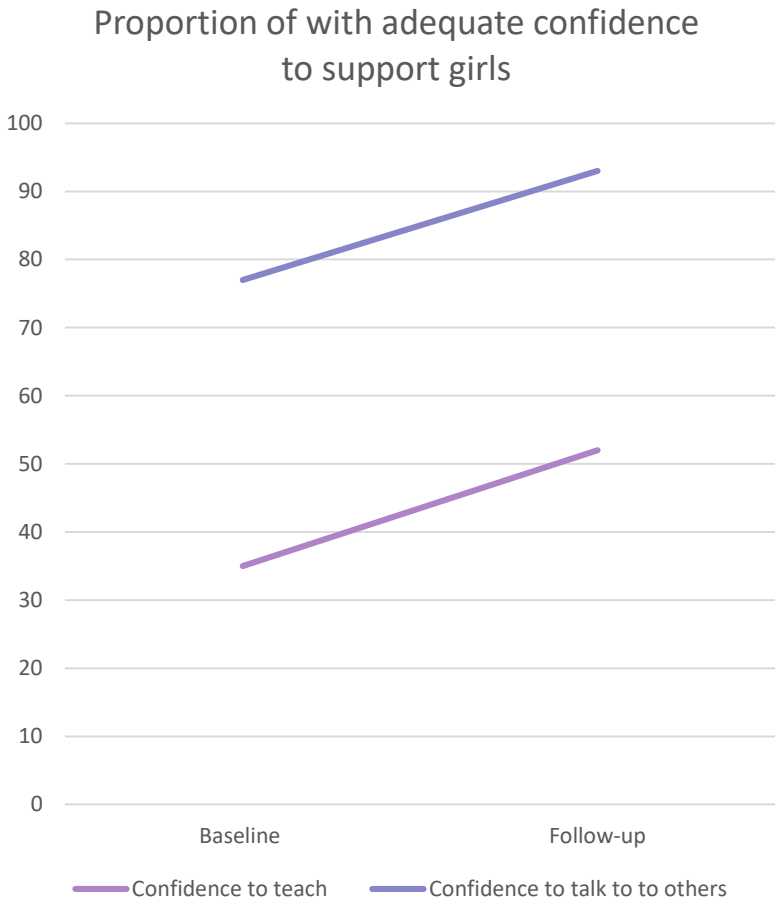
4.1 Community Outcomes- *changing social norms*



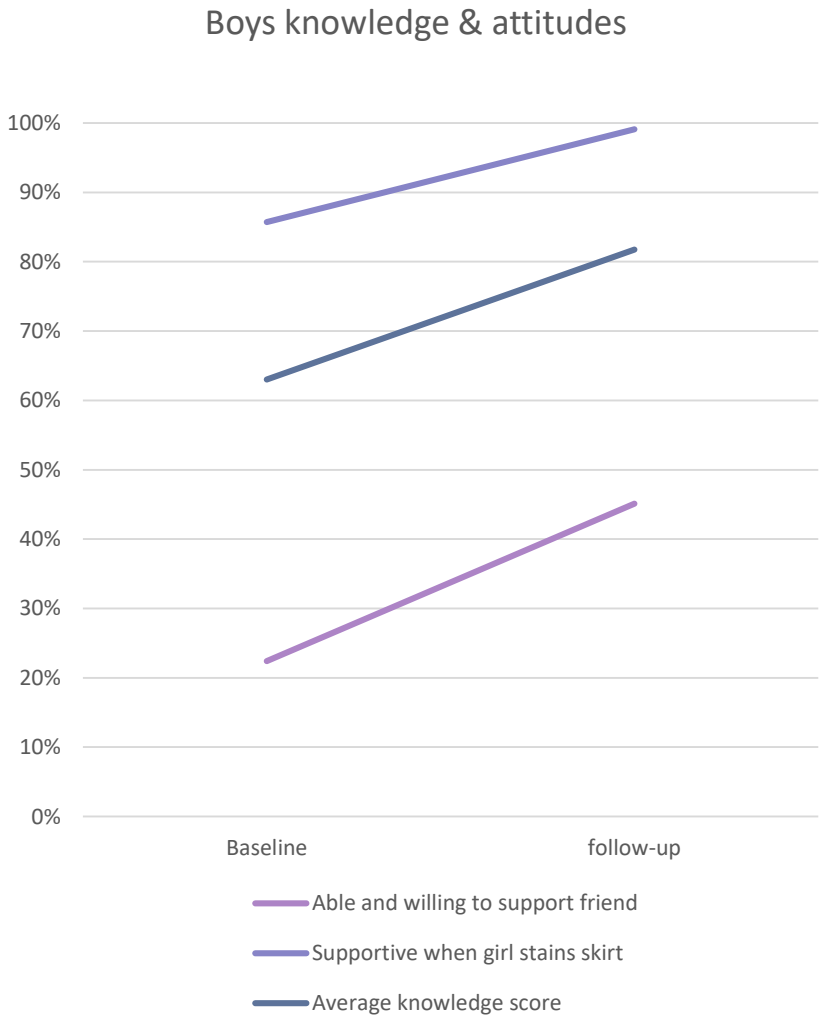
Community readiness to change scoring:  
1= Community unaware of the issue and resistant to change  
9= Social change is complete and issue has been solved by the community

4.2 Community Outcomes- *attitudes of teachers, parents and boys*

Teachers and Parents



Boys



Teachers and parents sample size baseline=67, follow-up=51, Boys sample “able and willing to support a friend” baseline= 107 follow-up= 102, p-value=0.1, “responds supportively to a girl staining her skirt” baseline= 112 follow-up=109, p value>0.001

## 4.3 Community case studies



**Community champion, aged 20**

“I didn’t even see menstruation as an issue before Irise came here. I even used to criticise it when I heard of it, I’d say ah it’s minor, it’s just an issue for females. My attitudes changed a lot, I know now not to criticise someone, a girl or a sister or a classmate who is menstruating, as I used to before. I’m trained now so I know how to handle it. Menstruation is something everyone needs to learn about because it’s normal, it happens in normal life to our mothers, our sisters and the girls. Irise have done a great job in changing behaviours, it was Irise who changed my behaviour towards these girls and I hope I can change community members negative attitudes and behaviours towards girls who are menstruating. I’m so glad to be a community champion, I’ve gained so much knowledge.”



**Teacher champion**

“Before you would see the whole school escorting the one child coming to see a teacher about menstruation, but now this doesn’t happen. Before they used to fear the time when menstruation comes, they would even drop out of school. Before Irise, children were using dirty old cloths during their period, but now the children have taken back their pads from Irise, their parents know they’re supposed to buy sanitary pads for their girls. Now when the community hear about menstruation, it is normal. It’s not news to them, why? Because they’re being taught by their child what menstruation is. At school the girls are not just comfortable, they are free. They know there are pads there if they need them, they can carry on doing their work.”

## 4.4 Women and girls outcomes- *opportunity and empowerment*

“At school the girls are not just comfortable, they are free. They know there are pads there if they need them, they can carry on doing their work.”

“They have taught us how to keep ourselves healthy and clean in menstruation and that you should not fear to come to school during menstruation.”

More able to engage in the activities they value (including work and school)

“Before Irise taught me, I felt shy on my period, I would tell people I was sick because I didn’t like it. Now I know that menstruation is good, it’s healthy. I know that during menstruation I can still do anything I want, I can pray, I can play football, netball, whatever things you want!”

“The girls lived in fear but now they are confident. It is becoming easy and they can perform well because they are comfortable.”

“I learnt that when I am on my period I shouldn’t cry or get worried, I should feel confident.”

“We feel good, we feel so free during our period, we can do anything on our period – we can play we can do anything we want”

Increased agency and self-esteem

“On my period, I feel good because it’s normal but before we felt shy”

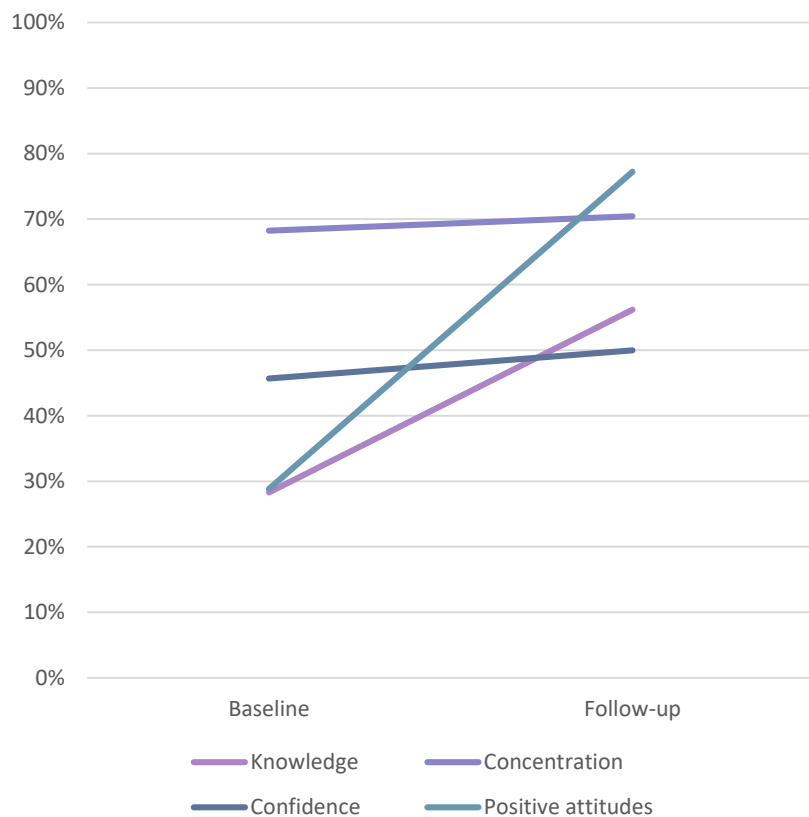
“Elder sisters couldn’t tell me about it, my mother couldn’t tell me about it, not until Irise could I be free.”

“You can play, you can do anything you want.”

## 4.4 Women and girls' outcomes- *opportunity and empowerment*

### Girls

% girls with "adequate" knowledge, confidence, concentration in class, and attitudes towards menstruation



**20% reduction in girls missing school**

**-estimated 4,326 school days saved per month.**



## 4.5 Girls Case Studies

**"I was fearful I could not stay in friendship, I was fearful even coming to school, nowadays I am free, I go to school, I jump"**

**Masi**



**"[Before] I had fear that if they see my blood, they will start abusing me, the whole school, so I used to tie my jumper around my waist and run to the toilets and I stay there even if they're studying when I'm there, I remain there."**

**Priscilla**



**"At first I had fear, I would feel ashamed about menstruation but I learnt that menstruation is normal, so nowadays if I have a problem I can talk about it"**

**Irene**



**"You see for me when I was on menstruation I would not go to school, I was hurting myself when I was on menstruation, I did not want to be with my friends, I would sit alone, but since Irise came and taught us, I feel free, I be with my friends"**

**Lukia**

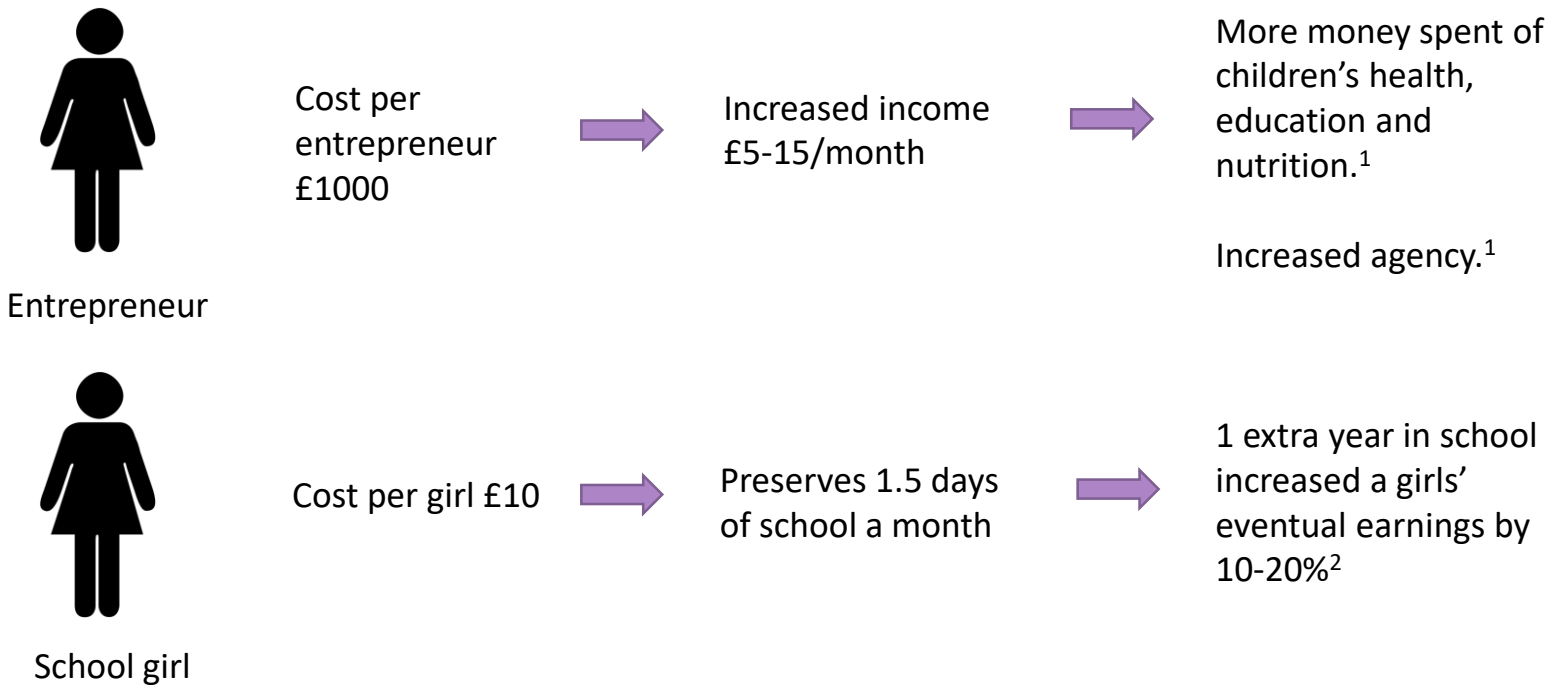
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## 5.1 International, national and local advocacy

Priorities	Government recognition of the issue and policies to support change.	Evidence of impact; building shared priorities and measures to monitor progress.	Enabling community and grassroots leadership.
Outputs	UNBS Standards for reusable pads Gender in Education Sector Policy inclusive of menstruation National Menstruation and Puberty Teacher Training Manual (publication pending)	UK government commitment to end period poverty locally and globally by 2030- Irise co-convening research stream of Task Force Green Paper on Monitoring and Measuring Menstruation Shared learning priorities for east Africa leading to collaborative funding bids to meet gaps (ongoing)	Government chose to held main Menstrual Hygiene Day event in Jinja in 2017 and then entirely localised the initiative the following year. Jinja District have made it an official policy to host their own event annually. Trained or partnered with 27 organisations to share approach. Resources accessed by over 100 organisations.
Activities	Led push to develop National Menstruation and Puberty Teacher Training Manual and contributed to content. Contributed to Gender in Education Sector Policy- ensuring puberty and menstruation included 1 of 3 key organisations lobbying for a national standard for reusable pads and contributing to the development of a standard once a committee was established. Participated in National MHM Steering Committee hosted by the Gender Unit in the Ministry of Education	Founding member and on the Steering Committee for the East and Southern Africa Menstrual Health Research Network organising stakeholder meetings in the UK and Uganda. Participated in National MHM Symposium to set menstrual health learning priorities for Uganda. Part of Global Advisory Group for Monitoring and Measuring Menstruation. Presented and shared resources at the first Regional Menstrual Health conference in Sub Saharan Africa, hosted by UNFPA and member of M&E working group.	Partner on global Menstrual Hygiene Day and part of national government led group designing and leading campaigns- lobbied for celebrations to be locally led and decentralised. Stakeholder training workshop in Uganda on our community led approach Hosted virtual seminar for ‘small charities working in international development network’.

## 6.1 Cost effectiveness and long term impact

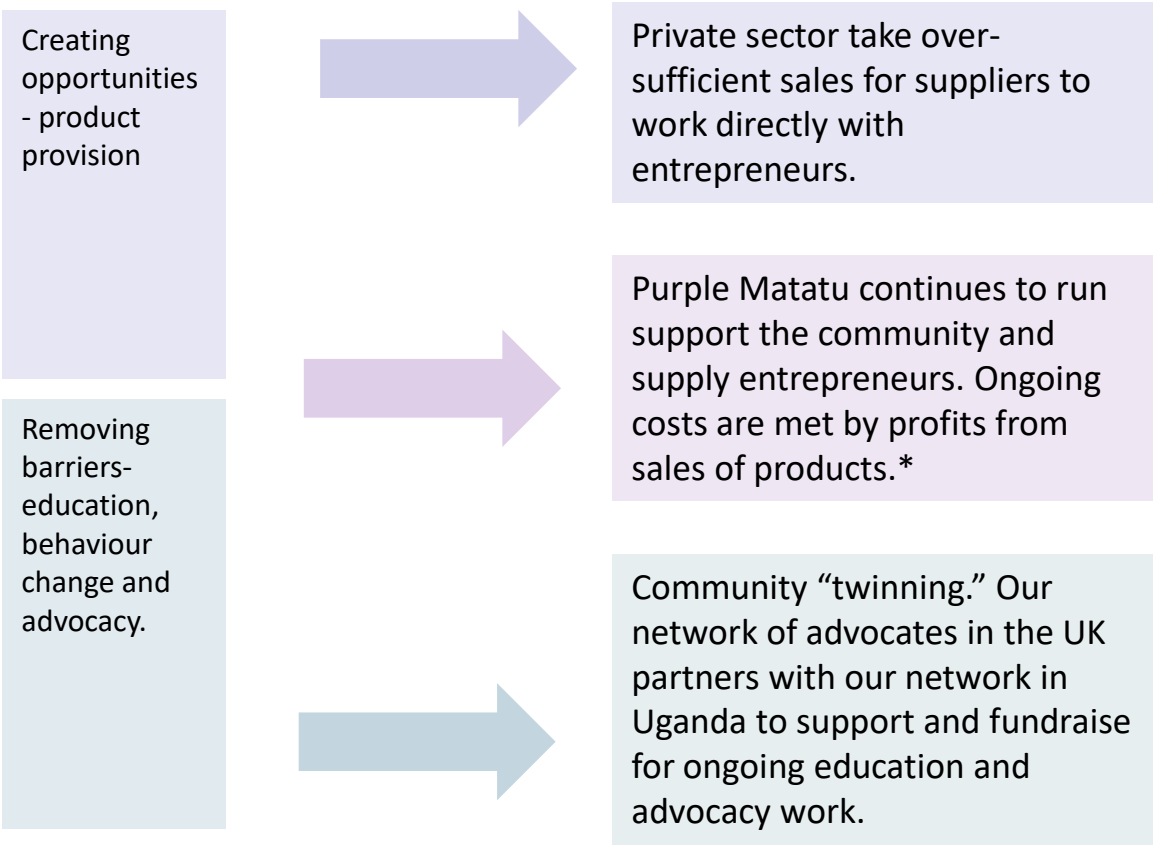
**Model Intervention for 1 community (equivalent to 1 sub-county):**  
15 Purple Matatu trips  
20 entrepreneurs  
2,500 women and girls accessing products  
12 schools



1 . Miedema et al. 2018 Women's Empowerment in East Africa; Development of a cross-country comparable measure. World Development. 110; 453-464.  
2. Overseas Development Institute (2016) Women's Economic Empowerment; Navigating enablers and constraints. Report and parliamentary briefing: <https://www.odi.org/publications/10483-womens-economic-empowerment-navigating-enablers-and-constraints>

## 6.2 Sustainability

There are three routes to sustainability for our intervention package. Communities may use a combination of these to ensure changes achieved through initial investment in shifting social norms and establishing a local market can be sustained long term.



\*A community network of entrepreneurs need to be making 2,000 sales a month for the Purple Matatu support to be viable long term in that area.

1. Introduction	2. The Project	3. Creating Opportunity	4. Removing Barriers	5. Building Capacity	6. Sustainability & cost effectiveness	7. Future Plans
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## 7.1 Refining and scaling

How we will scale the intervention:

### **1. Building a network**

Create a grassroots network of community level committees working to lead the delivery of the two year intervention package in their community. Committees would work with and learn from those who had already implemented successfully building the community level ownership of the initiative needed to sustain change long term.

### **2. Private partnerships**

Develop partnerships with suppliers, identifying and working with them to establish markets in hard to reach areas with pre agreed handover once the market is established.

### **3. Partnerships with other organisations**

Work with other NGOs and social business to replicate and adapt our model to their contexts.



## Appendix: Other Case Studies- entrepreneur



**Ruth Tsusbira, aged 37**, runs a small drug store in her community. She joined Irise's entrepreneur scheme in 2017 because products were available at a more affordable price. She was enrolled with an initial capital of UGX 7500 worth of stock and gradually her capital increased to UGX 15000 and her restocking orders increased from one to three times a month

*"Some companies were selling at 2,800 UGx and we were selling at 3,000 UGx making profits of 200 UGx compared to now that Irise sells to me at 1,500 UGx and I sell at 2,500 UGx making a profit of 1,000 UGx per pack."*

She has used the profits to invest in expanding her business and providing education for her children.

*"I buy Diapers out of the profits hence expanding my business. I also make liquid soap...I recently registered my daughter for nursery education."*

She has seen more girls accessing pads because the lower price makes them more affordable to their families.

*"It has made it possible for them to afford products for girls in boarding since they are cheaper than those in the market."*



## Appendix: Other Case Studies-entrepreneur



**Jamira Nawaguma, aged 47**, was unemployed and joined Irise's entrepreneur scheme to help earn money to pay her children's school fees. She feels she has benefitted personally from her involvement in the scheme in multiple ways. She now makes money to pay fees and buy clothing for her family, has developed her business skills and has gained respect within the community.

***"I use the money to pay school fees and support my family financially in taking care of daily expenses like food, soap for washing and medical bills."***

She also enjoys supporting girls in her community through being an access point for more affordable products and information about menstrual health. She has noticed some changes in her community during the project. At the start very few people knew about disposable and reusable pads and they were not something that people bought. Only a few girls received them as part of free distribution. Now, they are widely used and purchased by women and girls themselves. Women and girls also have more knowledge about menstrual health through interacting with her.

***"My customers, and school going girls have become my friends."***

## Appendix: Other Case Studies- entrepreneur



**Juliet Kyozi, aged 37**, has used the scheme to realise her long term ambition to run her own business.

*"I joined the business after Irise training gave me inspiration that I can make it. Also, because I never had any income generating activity and yet I had yearned to do business though I never had any idea on which business to do. I am therefore grateful to Irise for giving me the ideal business."*

She has developed her confidence and her family.

*"I can now freely express myself in public or big groups of people. In other words, my confidence has been built."*

*"I can also afford sugar, salt, and food for my family which was not the case before. I can also pay meals for my children at school. I have earned respect from husband since they no longer have to quarrel over responsibilities at home."*

Educating her community with support from Irise has been key to her success.

*"There is a great change because before I started selling pads, most girls and women in my community would use clothes to pad themselves. The community also had a wrong perception about disposable and manufactured reusable pads. That is to say they had a myth that these pads are cancer causing, however, after the training I was able to tell them facts about pads and thank God they were able to understand and started using them."*

She has also invested some of her profits to grow and diversify her business ventures.

*"From my extra income, I have managed to start a small poultry business. I started with 8 birds and I hope to expand with time."*

## Appendix: Other Case Studies- entrepreneur



**Joan Mukyala, aged 27,** is a single mother who has used the scheme to support herself and girls in her community.

*“The entrepreneur training that I attained from Irise Uganda inspired me to join the business because it equipped me with business knowledge and skills. Throughout my lifetime I yearned to help and talk to girls in particular about their lives and bodies, so I saw the opportunity to access them through joining the business.”*

She has gained confidence and independence through her involvement.

*“I can now afford immediate needs like food and clothes without burdening my parents. I also gained confidence to address community which was not the case initially. I have made constructive friends in the communities where I operate from.”*

She has noticed that as a result of the scheme girls are more able to access menstrual products and common myths about menstrual health have been addressed.

*“People can now use both reusable and disposable pads unlike in the past where girls and women could use clothes. The myth that young girls may not be able to bear children when they use these pads no longer exists.”*



## Appendix: Photos- the project in action



A purple matatu drive on Bulange-Kawete route- an Irise educator engages school pupils during their lunch break



A member from Maama Baby community initiative chooses from available products



State Minister for Karamoja inspecting the Irise stall during the international women's day celebrations



Irise entrepreneurs display their products at a community event



## Appendix: Photos- the project in action



Entrepreneurs inspect different menstrual products during training



An Irise stall at a community event



Entrepreneur training in the community



Entrepreneurs brainstorm solutions to challenges

# Appendix: In the press and books

**THE CONVERSATION**

Academic rigour, journalistic flair

It will take a lot more than free menstrual pads to end period poverty

July 26, 2019 12:47pm BST

**NewStatesman**

HEALTHCARE 7 FEBRUARY 2019

**Why tackling period poverty is an issue for everyone**

THE LANCET  
Child & Adolescent Health

CORRESPONDENCE | VOLUME 2, ISSUE 8, PE17, AUGUST 01, 2018

**Dismantling menstrual taboos to overcome gender inequality**

Emily Wilson • Jacquelyn Haver • Belen Torondel • Jennifer Rubli • Bethany A Caruso

Published: August, 2018 • DOI: [https://doi.org/10.1016/S2352-4642\(18\)30209-8](https://doi.org/10.1016/S2352-4642(18)30209-8)

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**11 ways to stop periods from disrupting girls' education**

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Do Good. Do It Well.™

**Tackling menstrual health taboo in Uganda**

“Irise provides a model of evidence-based practice, and we certainly need more projects to emulate that model.”  
Professor Chris Bobel

