

Medicus Mundi Switzerland Netzwerk Gesundheit für alle Réseau Santé pour tous Network Health for All

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

### Country: Nepal Beyond Bejing Committee - Beijing

Beyond Beijing Committee (BBC) in Nepal is a human rights feminist organization that since the Fourth World Conference on Women in Beijing in 1995 has been engaged in activities related to the Beijing Platform for Action. BBC is committed to gender equality, women's and persons with different Sexual Orientations and Gender Identities' (SOGI) rights, and sustainable peace and development. The organization has been involved in monitoring the implementation of action points based on the Committee on the Elimination of Discrimination against Women (CEDAW), the International Conference on Population and Development (ICPD), the Universal Periodic Review (UPR), and the Millennium Development Goals (MDGs) in the Sustainable Development 2030 Agenda, and the Sustainable Development Goals (SDGs).

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

We have been working to provide comprehensive sexuality education (CSE), menstrual health information and products, and comprehensive abortion care within the country's legal framework through community health education sessions (CHES). This has been done in collaboration with communities, network members, civil society organizations (CSOs), other relevant stakeholders, and the government. The Menstrual Hygiene Management Practitioner Alliance (MHMPA) is an alliance of different CSOs that works to address the issues of menstruation management and associated stigma and discrimination. Through this alliance, we advocate the local and the federal government, in addition to the schools for the inclusion of menstrual health in the educational curriculum and for girl-friendly toilets.

Furthermore, we mobilize rural network partners to advocate the school and the local government for the effective implementation of CSE in schools, and provide training to teachers on various components of CSE, including values clarification.

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

During the COVID-19 pandemic, we adopted a four-pronged strategy, as described below:

**Advocacy:** We developed a 'Feminist Statement' for advocating and appealing with the government to apply an intersectional human rights-based approach to ensure that everyone has access to necessary information, support systems, and resources during the crisis. We engaged with CSOs that reached populations that are the most underserved. Based on the data gathered through our toll-free number, we also developed a position paper on Safe Motherhood and Reproductive Health during emergency situations for advocacy with the government.

**Service provision:** Data collected by our network members indicated that many women, girls, and young people were unable to attain SRHR information and services due to the restrictions imposed by the government to combat COVID-19. In collaboration with Paropakar Maternity and Women's Hospital, Midwifery Society of Nepal, Aamako Maya, and Nepal Society of Obstetricians and Gynaecologists, we set up a 24-hour toll-free number to provide counseling services by doctors and midwives on safe motherhood and reproductive health services. These services were easily accessible and meant for everyone. This toll-free number provided an opportunity to gather data on the challenges faced by girls and young people during the lockdown. There was a significant surge in domestic violence, rape, social violence, and sexual violence.

**Relief packages:** In coordination with our ward office and network members, we distributed reproductive health relief packages to young girls. They consisted of foods products and sanitary materials, in addition to flyers on menstrual hygiene management and products during the lockdown.

Furthermore, we developed a calling card, with information on essential contact details such as:

- toll-free numbers to access free counseling services on safe motherhood and reproductive health,
- service-related information to the government's hotline to address gender-based violence, and
- psychosocial counseling provided by other NGOs.

**Awareness-raising:** In partnership with the Ministry of Women, Children, and Senior Citizen, we also raised awareness on menstrual hygiene management (MHM) and how to make reusable napkins at home during the lockdown. The information was disseminated through digital platforms targeting young girls. The flyers were translated into different ethnic languages to reach out to different ethnic groups. In coordination with the National Women Commission, we developed a public service announcement (PSA) providing information on the government hotline in two different ethnic languages.

#### Why were these approaches used?

We gathered information from different network members at the local level through media outlets and local CSOs regarding the situation and conditions that were impacting girls' SRHR due to restrictions imposed by the COVID-19 pandemic. The strategies were developed based on this information. Learning from the emergency situation during the devastating earthquake disaster in 2015, we have learned to build and utilize our own as well as our partners' capacities to identify and address the emerging needs during situations of crisis. We utilized the same blueprint then came up with these evidence-based strategies.

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

For the toll-free services, we saw a steady increase in terms of the number of issues handled as the pandemic progressed. More than 2000 women and girls were assisted through toll-free numbers during the lockdown period. For relief packages, the demand came from the local level thus it was provided on a need basis. BBC provided reproductive health packages to 1389 women and girls.

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