

Integrating Elements of Community Based Participatory Approach into Periods for Peace: a sexual & reproductive health program



<https://tinyurl.com/5ywhse64>



DEPARTMENT OF POPULATION AND QUANTITATIVE HEALTH SCIENCES

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Background

1. AMOS is a non-profit focused on improving the health, education and development of underserved communities in Nicaragua, and training others in global health skills and CBPA
2. CBPA builds equitably on community strengths and resources; addresses public health concerns relevant to the communities involved; and commits to sustainable processes and shared power¹
3. Comprehensive SRHE enables development of knowledge, attitudes, and skills that contribute to safe, healthy, positive relationships²

Population

Adolescent refugees in the Cleveland Metropolitan School District who are part of the Refugee Response after school program

Learning Objectives

1. Develop understanding of global burden of disease
2. Gain concrete public health skills to apply to project design, community empowerment, and community-based participatory research approaches
3. Critique, deconstruct, unlearn and question by engaging in discussion about cultural humility, power and privilege, and ideas of global health equity

Deliverables

1. Full SRH teaching manual
2. Literature review, logic plan, stakeholder engagement plan, and program design
3. Periods for Peace website

Activities

1. Learning and applying public health skills to a variety of case studies and theoretical projects
2. Refining an SRH curriculum with an interprofessional team and identifying a target population
3. Conducting a literature review on the target population's needs
4. Engaging in discussions around cultural humility and describing what that looks like in practice
5. Identifying and connecting with a community partner

Periods for Peace Teaching Manual



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The cover page of the PFP teaching manual and sample pages therein

Introduction

Periods for Peace is a project focused on empowering, encouraging, and educating girls, boys, young women, and young men on topics surrounding reproductive health, menstrual hygiene management, and gender-based violence in a scientific and comprehensive manner. This project is meant to motivate women and men to take ownership of their bodies and to provide a judgement-free space to discuss these topics.

Contributors

The co-founders of Periods for Peace and authors of this guide are Hannah Clarke and Geneva Magsino. Both are students of Case Western Reserve University (CWRU), and started this project with support from the Davis Foundation and CWRU's Office of Inclusion, Diversity, and Opportunity.



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Puberty

Every body experiences major changes during a time period called puberty. These changes look different for females and males, but both experience physical, sexual, and emotional changes that can be challenging to grapple with. During puberty, the body becomes more similar to what it will look like through adulthood.

Female Changes during Puberty

Puberty in females usually happens between the ages of 8-16. During this time, they typically develop breasts, pubic and armpit hair, and experience their first menstrual cycle. Throughout puberty, new and unfamiliar feelings may arise, including sexual desire, attitudes towards virginity, sexual activity, and fertility may shift, develop, or strengthen, and that is okay! Body odor becomes apparent, but washing regularly and wearing deodorant helps.

Male Changes during Puberty

Puberty in males usually happens between the ages of 11-18. During this time, they typically experience penis enlargement, body hair growth, deepened voice, growth spurts, and their first ejaculation. During this time, wet dreams are common and expected, and they are nothing to be ashamed of. Unfamiliar feelings may arise, especially sexual desire, which may manifest as erections. Body odor becomes apparent, so it is important to wash regularly and wear deodorant.

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Contraception

Condoms are the only method that offer dual protection against pregnancy and sexually transmitted infections. They are placed on an erect penis before penetration. Only use one condom at a time because placing multiple condoms on an erect penis increases the risk of ripping due to friction. Once a condom is full of semen, carefully dispose of it, and replace it if sexual activity continues. Female condoms also exist and are meant to be inserted into a woman's vagina. Both partners should know how to place and dispose of a condom correctly.

Birth control pills are taken every day, at the same time each day. If taken faithfully, they protect against pregnancy by using hormones to prevent ovulation. Some women use birth control pills to manage other health issues such as irregular periods or acne. The dosage is based on weight. Pills may become less effective if taken with antibiotics.

Intrauterine devices (IUD) are inserted into the uterus by a doctor to protect against pregnancy by stopping sperm from meeting an egg. An IUD can stay inside a uterus for 3, 5, or 10 years, depending on the type (hormonal or copper). A doctor removes the IUD when it expires or a woman decides to have it removed for any reason.



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Menstruation

Experiencing a menstrual cycle for the first time can be scary without adequate preparation, starting with knowing what is happening to the body during a "period" and knowing when to expect it. Menstruation is a sign of sexual maturity, but does not mean a woman is ready for sex or pregnancy.

Timing

Women experience a period once a month every month. The menstrual cycle does not begin until puberty, the average being age 12. The menstrual cycle continues regularly, stopping temporarily during pregnancy, and permanently at menopause (age 45-60). A typical cycle lasts 28 days, but the range is anywhere from 21-35 days. Each bleeding period lasts 2-8 days but it takes a couple years for cycles to normalize. If a woman experiences abnormal cycles beyond the first 2-3 years, a clinic visit is necessary. Tracking periods with a calendar can predict when a cycle will start/end. Depending on the day in the cycle, a woman may have heavier or lighter periods, but on average 2-3 tablespoons of blood is lost.

Physiology

Menstruation is the periodic shedding of a woman's uterine lining through a series of hormone fluctuations. The menstrual cycle is meant to prepare a woman's body for pregnancy. First, the lining of the uterus thickens, as one egg is prepared for release from the ovaries. The egg travels through the fallopian tubes to the uterus. If the egg is fertilized by sperm, it may eventually develop into a baby. If not fertilized, then the egg is broken down and the extra layer of blood and tissue that had formed on the uterine walls breaks down and exits the body during menstruation.

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Methods

1. Community partners with a relevant and strong mission were contacted
2. Literature review was conducted and program was designed based on findings
3. CBPA elements were integrated into the program
4. Stakeholders were identified and engagement plan was designed

Results

1. Refugee Response's "Teen Response" program was identified as a willing and strong community partner
2. There is a need for SRHE among adolescent refugees in the US and CLE
3. CBPA-guided elements in context of PFP:
 - Integration into already existing and successful program
 - Community standards setting (shared values)
 - Reciprocity in research partnership
 - Opportunities for reflection during program
 - Opportunities for anonymous questions
 - Breakout groups with open exchange of ideas
 - Capacity-building activities for students

Lessons Learned

1. How to develop a culturally appropriate program
2. How to choose the right community partner
3. How to share decision-making power with communities
4. What reciprocity in public health partnerships looks like in practice

Public Health Implications

1. Attenuates risk of GBV, unintended pregnancies, unsafe abortions, and preventable maternal deaths³
2. Addresses a research gap
3. Strengthening, supporting, and mobilizing communities and partnerships to improve health

Acronyms

CBPA: community based participatory approach
PFP: Periods for Peace
SRH: sexual and reproductive health
SRHE: sexual and reproductive health education

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