

MAP-PPD White Paper Vol. 3
Menstrual Health and Hygiene (MHH) in Ethiopia:
A roadmap for the sector



A PUBLIC-PRIVATE DIALOGUE IN ETHIOPIA

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by

The Permanent Secretariat of Menstrual Advancement Platform – Public Private Dialogue (MAP-PPD)

Addis Ababa, Ethiopia

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Acronyms & Abbreviations

DBE	Development Bank of Ethiopia
ECAE	Ethiopian Conformity Assessment Enterprise
EFDA	Ethiopian Food and Drug Authority
EPSS	Ethiopian Pharmaceutical Supply Service
MHH	Menstrual Health and Hygiene
MFI	Micro Finance Institutions
NGO	Non-Governmental Organisations
PPD	Private - Public Dialogue
RRP	Recommended Retail Price
SME	Small and Medium Enterprises
WASH	Water, Sanitation and Hygiene



Introduction

The third round of discussion groups took place in February 2025 to review the implementation status of action items assigned to public entities, address previously identified bottlenecks, and identify and prioritise emerging challenges that hinder the progress of the MHH sector value chain. This round also included new participants who were not part of the previous discussions, such as reusable pad manufacturers Sol Pads, Ajjiet Pad, and WISE.

Critical updates were identified, highlighting the government's position on treating MHH products as medical items and the reduction of tax and customs duties for importers and manufacturers where the application of tax reduction has commenced.

Updates on action items were provided by the Ethiopian Food and Drug Authority, Ethiopian Media Authority, and Ethiopian Conformity. Assessment Enterprise, Institute of Ethiopian Standards, Development Bank of Ethiopia, and the Ministry of Women and Social Affairs. However, assigning relevant representatives to provide updates was challenging for certain public entities, such as the Ministry of Trade and Regional Integration, the Addis Ababa Health Bureau, and the National Bank of Ethiopia, as they delegated officials from their gender departments. Additionally, some key entities, including the Ministry of Finance, the Customs Commission, the Ministry of Health, the Ministry of Education, and the Ministry of Transport and Logistics, did not assign relevant officials. Key ministries did not assign relevant officials due to the unavailability of the appropriate representatives, as many were occupied with other tasks. Additionally, some institutions treated the discussion as a gender department responsibility rather than recognising it as a policy matter, despite having received the action items. To ensure participation in the next discussion and facilitate the full implementation of action items, active follow-up with the respective ministries is necessary. This includes direct engagement with leadership, reinforcing the policy implications of the discussion, and ensuring that appropriate representatives are assigned in advance.



Discussion and Results

1.1 Regulation PPD Discussion Group

Clarification on Certification and Regulatory Oversight

Menstrual pads are now clearly classified as low-risk medical devices under the directive issued by EFDA, aligning with international practices. EFDA is responsible for regulating products that cross regional boundaries, while manufacturers operating within a single region fall under the respective regional food and drug authority. If the purpose is for self-use and non-commercial, it will not be regulated by EFDA. If the sale does not extend across regional boundaries, it will be regulated by the Regional Health Bureaus. This clarification provides a clear understanding of the sector classification as “low-risk medical devices,” which allows the products to be eligible for customs or tax reductions applicable to medical devices. However, this remains contingent upon product registration, market authorisation, and obtaining an import permit license. However, small-scale manufacturers may face challenges in navigating these processes due to limited technical expertise, financial constraints, or administrative barriers, where regional health bureaus and regulatory authorities need to guide registration and authorisation procedures. As a result, the manufacturers can benefit from the tax reduction available for such manufacturers.

Another update provided on certification by EFDA requires manufacturers to employ professionals with relevant educational qualifications. The previous requirement for mandatory repeated health checks for employees has been removed, except for visual inspectors who must undergo regular eye examinations. A single professional can now handle both quality assurance and control or serve as both technical and production manager, reducing the staffing burden on manufacturers. As for the Addis Ababa Food and Drug Authority, it is currently updating the standards and licensing procedures, as it is responsible for licensing and regulation within Addis Ababa. This clarification addresses jurisdictional boundary issues between EFDA and regional regulatory bureaus regarding certification.

Limited Awareness and Understanding Among Private Sector Stakeholders Regarding Applicable Standards and Certification Processes

One of the challenges faced by manufacturers has been the lack of transparency and accessibility of regulations. However, EFDA has provided awareness creation/panel discussion for manufacturers with the enactment of the directive and has made it available on the authority’s website. EFDA will continue working with stakeholders to ensure regulatory clarity and enforcement. However, ongoing efforts are



needed as manufacturers still face challenges in identifying applicable rules and updates. Manufacturers must also take the initiative to make inquiries, stay updated, and utilise available platforms.

Inconsistent Internal Quality Control Practices Among Manufacturers, Resulting in Variations in Product Quality and Safety, as well as Deficient External Controls Allowing Fraud

Ensuring product quality remains an ongoing challenge. EFDA mandates that sanitary pad manufacturers conduct internal quality checks to ensure compliance with product standards. However, making the national standard mandatory without negatively affecting small manufacturers remains a concern. Enforcing mandatory national standards could lead to the exclusion of small-scale reusable sanitary pad producers from the market. As a solution, a gradual application or phased approach of mandatory national standards has been suggested, whereby small-scale manufacturers are included. Stakeholders acknowledge that while health and hygiene concerns necessitate strict standards, the capacities of local manufacturers must also be considered.

Taxation and Importation Barriers

Despite communication from EFDA to the Customs Commission regarding the classification of menstrual pads as medical devices, manufacturers continue to report paying multiple taxes, indicating coordination issues between government bodies. This issue is also partly attributable to the private sector's lack of awareness of applicable regulations. Failure to comply with relevant licensing requirements, such as obtaining an import permit, market authorisation, and product registration, contributes to the taxation burden.

Challenges of Sourcing Quality and Certified Cotton or Textile Products

Textile manufacturers produce generic cotton materials, which creates challenges for sanitary pad manufacturers in sourcing materials that meet sanitary standards. Manufacturers also experience difficulties obtaining Ethiopian Conformity Assessment Enterprise (ECAE) certification for raw materials sourced from textile manufacturers. Since textile manufacturers are not subject to mandatory certification requirements, sanitary product manufacturers face challenges in demonstrating the quality assurance of their raw materials. Establishing clear requirements and encouraging textile manufacturers to meet sanitary product standards could help address these issues.



Solutions

- Implement a phased compliance procedure for small-scale producers, especially for reusable pads, to meet national standards without being pushed out of the market. This could include tiered requirements based on production volume or capacity.
- Regulatory bodies to support SMEs with certification, registration, and market authorisation procedures, including guidance on the medical device classification benefits (e.g., tax exemptions on raw materials).
- Continuous monitoring of the impact of EFDA's reclassification of menstrual pads as low-risk medical devices, especially regarding its effects on taxation and import duties.
- Engage with textile producers to encourage voluntary conformity with sanitary product standards and promote collaboration with ECAE for raw material certification schemes.
- While EFDA has taken steps to improve awareness, ongoing, decentralised outreach programs (especially at the regional level) are needed to keep manufacturers informed of regulatory updates and certification pathways.

1.2. Finance PPD Discussion Group

Stringent loan access requirements are still persistent, which are very challenging, particularly for smaller enterprises.

Small and medium enterprises (SMEs) face significant barriers in securing financing due to banks' preference for larger, established companies with substantial collateral. While the Development Bank of Ethiopia (DBE) offer financing for priority sectors such as manufacturing, the minimum capital requirement for borrowing presents a challenge. DBE's lease financing scheme, for instance, requires a minimum capital of 500,000 birr, excluding many small-scale manufacturers who fall below this threshold. For businesses with capital below this threshold, Microfinance Institutions (MFIs) are expected to provide financing options tailored to their scale. However, stakeholders have raised concerns about whether these institutions sufficiently address the specific needs of SMEs in the MHH sector.

Furthermore, applicants seeking financing often struggle with technical documentation, including blueprint specifications and pro forma invoices, leading to delays and rejections. To address this, DBE is establishing a dedicated team to assist applicants with documentation requirements and ensure clarity from the outset. Additionally, internal process streamlining is underway to improve efficiency and reduce loan approval delays.



Underrepresentation of WASH and Menstrual Health in Financial Strategies

DBE prioritises the manufacturing sector in its lending policies, but stakeholders have emphasised the need for targeted financial strategies to support businesses in the WASH and menstrual health and hygiene (MHH) sectors, which predominantly operate at the micro level. Currently, banks lack a dedicated fund for this sector. Discussions suggest that under DBE, for instance, if a donor-backed fund were established, DBE could manage and facilitate access to it through partner banks and microfinance institutions. However, policy constraints remain a factor in determining the feasibility of such collaborations.

Relative progress on Foreign Currency Access and customs procedure

Recent policy reforms have temporarily improved foreign currency supply, addressing previous challenges related to the availability of foreign exchange for importing essential raw materials and machinery. The requirement to deposit funds at the National Bank has also been lifted, easing local financing constraints.

In the customs sector, prior tax assessments were based on prices set by a single company, affecting subsequent imports by other businesses. Recent reforms have introduced a more transparent system where import prices are assessed based on the submitted documentation, reducing inconsistencies in customs duties and eliminating subjective pricing practices.

Solutions

- Identify ways to review and revise minimum capital requirements (e.g. DBE's 500,000 birr threshold) for lease or manufacturing loans to be more inclusive of micro and small-scale MHH manufacturers.
- Accelerate the DBE's technical assistance team's initiation to guide SMEs through financing documentation, particularly for product specs, blueprints, and quotations.
- Advocate for the formal recognition of MHH as a thematic priority within the financial sector and industrial policy agenda.
- Explore the creation of a dedicated donor-backed blended finance fund for MHH/WASH SMEs, managed by DBE and disbursed through commercial or microfinance partners.
- Encourage inclusion of MHH under green or social impact financing portfolios where relevant.
- Work with the Ministry of Finance and EFDA to issue clear guidance on the customs treatment of essential materials like PUL/TPU and reusable pad components, reinforcing tax exemption eligibility.



1.3. Distribution PPD Discussion Group

Absence of Formal Inclusion of Sanitary Pads in EPSS Distribution

EPSS has not been involved in the formal distribution of sanitary pads. Its current focus is on supplying medications and medical supplies to healthcare facilities in collaboration with the Ministry of Health. Although EPSS operates 19 branches across the country and reaches the woreda level, sanitary pads are not included within its existing distribution network. Without official integration, sanitary pads remain outside the scope of EPSS's supply mandate, limiting accessibility for underserved populations. Further, the regulatory classification of sanitary pads as low-risk medical devices under the EFDA's Low-risk Medical Devices Directive places them within the scope of EPSS's supply mandate. However, despite this classification, sanitary pads have not yet been included in EPSS's procurement and distribution processes.

Challenges in Reaching Rural Areas and Healthcare Facilities

Private sector manufacturers face logistical difficulties in reaching remote areas due to the absence of a structured distribution network for sanitary pads. The government's existing supply infrastructure, such as EPSS, has the potential to bridge this gap, but it has not yet been leveraged for menstrual health products. Additionally, hospitals and healthcare facilities lack a reliable supply of sanitary pads, despite their necessity for postpartum mothers and patients requiring menstrual hygiene products.

Legal Constraints on Direct Sales by Manufacturers

Ethiopian trade law mandates a structured supply chain where manufacturers sell to distributors, who then supply wholesalers, followed by retailers, before products reach consumers. Direct sales from manufacturers to end users are not permitted. This regulatory framework shapes distribution strategies and affects how companies can structure their supply networks. While demand for sanitary products is high, the lengthy supply chain significantly increases costs. If the number of intermediaries could be reduced, prices would become more affordable by applying a Recommended Retail Price (RRP) stamp on product packaging, contingent on government support, and advocating for tax reductions to further improve affordability.

Lack of Recognition of Promotional Expenses by Revenue Authorities

The lack of recognition of promotional expenses by revenue authorities directly impacts awareness efforts, which are crucial for effective distribution. Advertising and promotional activities play a key role in informing consumers about available menstrual health products, their benefits, and where to access them. When businesses face financial strain due to unrecognised promotional expenses, they may limit



or reduce their advertising efforts, leading to lower consumer awareness. This, in turn, affects distribution, as uninformed consumers are less likely to seek out these products, reducing overall demand and accessibility.

Solutions

- Advocate for the official inclusion of sanitary pads within the Ethiopian Pharmaceutical Supply Service's (EPSS) procurement and distribution mandate, following their classification as low-risk medical devices.
- Utilise EPSS's existing woreda-level network to extend menstrual product access to remote areas, especially where private distribution is unviable.
- Explore options for regulatory waivers or pilots that allow for limited direct sales (e.g., from manufacturers to schools, clinics, or cooperatives) in underserved regions, under supervision or licensing.
- Support the adoption of Recommended Retail Price (RRP) labelling, with enforcement guidelines, to reduce pricing volatility and consumer exploitation across the chain.
- In the short term, engage sector associations to develop a unified position paper on the role of advertising in public health markets like MHH, to influence tax code revisions.

1.4. Awareness PPD Discussion Group

Misconceptions About the Role of Religious Institutions in Social Issues

Religious institutions play a significant role in shaping societal norms and values, yet there are common misconceptions about their involvement in addressing social issues, including menstrual health. The Addis Ababa Religious Institutions Council has recognised this gap and established the Women for Peace Forum to explore religious perspectives on such matters. This committee, composed of religious scholars from diverse backgrounds, examines viewpoints from Christianity, Islam, and other religious scriptures to foster a more informed understanding. A subcommittee has also been formed to focus specifically on menstrual health and related issues. Religious perspectives on menstruation vary, and in some traditions, menstruation is perceived negatively. Within both Christianity and Islam, certain restrictions exist which may influence attitudes toward open discussions on menstrual health. While some religious leaders understand these issues, many remain reluctant to engage in discussions about them. The Women for Peace Forum aims to differentiate between cultural beliefs and religious doctrines, ensuring that menstruation is addressed from an informed and balanced perspective.



Limited Inclusion of People with Disabilities and Contextual Gaps in Awareness Materials

Menstrual health advocacy efforts often fail to adequately include people with disabilities, despite there being over five million women with disabilities in Ethiopia. Existing awareness campaigns do not effectively address multiple disabilities, leading to gaps in accessibility and engagement. Standardised awareness manuals are not always suitable for diverse needs, requiring tailored approaches for different disabilities. Training programs also lack specialised methodologies, as demonstrated by the need for hands-on teaching methods for visually impaired individuals. Furthermore, a one-size-fits-all approach to awareness materials is ineffective across Ethiopia's diverse regions. For instance, in the Afar region, reusable pads are familiar due to their use in maternity care, but the nomadic lifestyle makes it difficult to sustain awareness efforts. Additionally, existing media representations of menstruation, such as the use of blue or green liquid instead of red, create misconceptions that hinder open discussions on the topic. Awareness campaigns need to be adapted to regional and cultural contexts to ensure effectiveness.

Inadequate Media Engagement and Representation

Media platforms, including religious media, have the potential to play a significant role in raising awareness of menstrual health. However, implementation remains a challenge due to the commercial nature of media, which prioritises profit-driven content over social issues. Journalists and media professionals often lack proper training on menstrual health topics, limiting their ability to report accurately. The Ethiopian Media Authority has initiated media monitoring efforts but has not yet established strong enforcement mechanisms to ensure consistent and widespread coverage of MHH issues.

High Cost of Media Airtime for Awareness Campaigns

The high cost of media airtime presents a significant barrier for small-scale menstrual health product manufacturers and advocacy groups. Many rely on private media outlets, where intermediary companies drive up advertising costs, making it difficult to sustain awareness efforts. Without proper media engagement, misconceptions about menstrual health and hygiene continue to persist.

Limited Awareness Among Media Professionals

Journalists and media professionals often lack the necessary knowledge to report on menstrual health, leading to misinformation and insufficient coverage. Given their workloads, they rarely engage deeply with social issues, necessitating the need to receive targeted awareness training. The Ethiopian Media



Authority has proposed short training sessions for media personnel, but there is a need for sustained engagement and monitoring to assess the effectiveness of these efforts.

Solutions

- Support the *Women for Peace Forum* to clarify scriptural views on menstruation across major religions and actively engage respected religious leaders in public awareness.
- Localise campaigns to fit cultural and geographic realities (e.g., nomadic regions, pastoralist communities, language diversity).
- Roll out structured, ongoing training for journalists and broadcasters to improve the quality and frequency of menstrual health coverage.
- Introduce subsidised media airtime schemes for menstrual health campaigns, especially for small manufacturers and NGOs.



The way forward

Some things we can only achieve together, while others are within our own hands. In this table, a summary of possible action points is provided as a basis for our discussion on the way forward:

As an alliance	<ul style="list-style-type: none"> - Promote the formal inclusion of sanitary pads into EPSS distribution channels to improve rural access. - Push for recognition of promotional and awareness expenses as deductible business costs to incentivize public education efforts by the private sector. - Promote coordination platforms to support the development of disability-inclusive, regionally contextualized MHH awareness strategies.
Manufacturers	<ul style="list-style-type: none"> - Engage with EPSS and explore advocacy options for inclusion in public health supply systems. - Work with local media to co-develop affordable promotional strategies or seek pooled media airtime with NGOs. - Label products with Recommended Retail Prices (RRPs) to support transparent pricing and reduce excessive markups in the distribution chain.
Regulatory Bodies	<ul style="list-style-type: none"> - Clarify the implications of sanitary pads being classified as “low-risk medical devices,” and consistently enforce relevant benefits (e.g., tax reductions). - Engage in proactive dissemination of updates to policies and processes (e.g., customs valuation reforms) in plain language to manufacturers.
NGOs	<ul style="list-style-type: none"> - Partner with disability advocacy organizations to make awareness content and training inclusive for persons with diverse disabilities. - In collaboration with testing agencies, support sealed-sample methods in procurement to ensure post-delivery verification. - Build regional contextual variations into communication strategies (e.g., for Afar or Somali regions).
Testing Agencies	<ul style="list-style-type: none"> - Work with regulators to ensure alignment of test parameters with emerging standards and EFDA requirements. - Consider third-party witness testing for market surveillance to support credibility.



Banks and Microfinance Institutions	<ul style="list-style-type: none">- Inform bank officers and MFIs on the MHH business model and its capital cycle to reduce document-based loan rejection- Support DBE's efforts to build a dedicated unit to help applicants with technical documentation.
Ministries / political stakeholders	<ul style="list-style-type: none">- Create dedicated funding windows within DBE or other national finance institutions to support WASH and MHH-focused enterprises.- Mandate engagement of disability inclusion and regional representation in all public awareness and education campaigns.



Annexe: Events and Participants Overview

A. Financial PPD Discussion Group

10 February 2025, 09:00 am – 12:30 pm, Elilly Hotel, Addis Ababa

Invited Discussion Group Members

No.	Name of Organization	Type of Organization	Assigned Participant Name
1	National Bank of Ethiopia	Public Entity	Mrs. Ambawork Mekonnen
2	Ministry of Finance	Public Entity	N/A
3	Development Bank of Ethiopia	Public Entity	Mrs. Meaza Woldie
4	Enat Bank	Private Financial Bank	Mrs. Mekdes Abate
5	Aqua For All	International NGO	Mr Hizekiel Aynalem
6	Awash Bank	Private Financial Bank	Mrs. Kidist Zerihun
			Mr. Tewodros Tadewos
			Mr. Melkamu Tadesse
7	Cooperative Bank of Oromiya	Private Financial Bank	Mr. Geteneh
8	Negat Reusable Pads	Private Entity	Dr. Tsebaot Asmelash
9	BINA Pads	Private Entity	Mr. Cherinet T/Haimanot
10	Lilac Sanitary & Baby Diapers Manufacturing Company	Private Entity	Mr. Mohammed Fuad
11	Mela for Her	Private Entity	Ms. Eden Befekadu
12	GIZ_SEQUA	International Development Cooperation	N/A
13	Palladium	Implementer of International Development Programs	Mrs. Metasebia Feleke
14	Mastercard Foundation	International NGO	Mrs. Simret Yasabu
15	Expert		Mrs. Elbethel Getinet
16	Akiyamos Import and Export-SINA Pads	Private Entity	Mrs. Hilina Gizachew
17	Ethio Hygenic Industrial PLC-Lady Perfect	Private Entity	Mr. Eshetu Biru
18	Banchealem Ambachew Import-	Private Entity	Mr. Kinfemichael Okubasilassie
19	Ashagari	Local NGO	Ms. Aster Bekele
20	Ministry of Labour and Skills	Public Entity	Mrs. Erkennesh Yohannes
21	Ethiopian Customs Commission	Public Entity	N/A



22	Ministry of Revenue	Public Entity	Mrs. Aster Lisanu
23	African Development Bank (Regional Multilateral Development Finance Institution	N/A
24	UNFPA	UN Agency	Mrs. Metsihet Ayeneku
25	TIKA	International Development Cooperation	Mrs. Nejat Ahmed
26	FHI 360	International NGO	Mrs. Rozina Zerabiruk
27	Engender Health	International NGO	Dr. Bezawit Workneh

Absentees

No.	Name of Organization	Type of Organization	Assigned Participant Name
1	Ministry of Finance	Public Entity	N/A
2	Cooperative Bank of Oromiya	Private Financial Bank	Mr. Geteneh
3	Negat Reusable Pads	Private Entity	Dr. Tsebaot Asmelash
4	Lilac Sanitary & Baby Diapers Manufacturing Company	Private Entity	Mr. Mohammed Fuad
5	Mela for Her	Private Entity	Ms. Eden Befekadu
6	GIZ_SEQUA	International Development Cooperation	N/A
7	Palladium	Implementer of IDP	Mrs. Metasebia Feleke
8	Mastercard Foundation	International NGO	Mrs. Simret Yasabu
9	Expert		Mrs. Elbethel Getinet
10	Akiyamos Import and Export- SINA Pads	Private Entity	Mrs. Hilina Gizachew
11	Ashagari	Local NGO	Ms. Aster Bekele
12	Ministry of Labour and Skills	Public Entity	Mrs. Erkennesh Yohannes
13	Ethiopian Customs Commission	Public Entity	N/A
14	African Development Bank	Regional Multilateral Development Finance Institution	N/A
15	FHI 360	International NGO	Mrs. Rozina Zerabiruk



B. Regulatory PPD Discussion Group

11 February 2025, 09:00 am – 12:30 pm, Elilly Hotel, Addis Ababa

Invited Discussion Group Members

No.	Name of Organization	Type of Organization	Assigned Participant Name
1	Ministry of Health	Public Entity	N/A
2	Ministry of Education	Public Entity	N/A
3	Ministry of Industry	Public Entity	Mrs. Alemnesh Yehuala
4	Ministry of Trade and Regional Integration	Public Entity	Mrs. Girum Endale
5	Ministry of Labour and Skills	Public Entity	Mrs. Erkennesh Yohannes
6	Ethiopian Environmental Protection Authority	Public Entity	Mrs. Adanech Woreti
7	Addis Ababa Food and Drug Authority	Public Entity	Mrs. Tsehay Demissie
8	Ministry of Women and Social Affairs	Public Entity	Mrs. Zinash Mekonnen
9	Ethiopian Food and Drug Authority	Public Entity	Mr. Achalu Abadir
10	Institute of Ethiopian Standards	Public Entity	Mr. Ayele Biresaw Mr. Befekad Tsegaw
11	Ethiopian Conformity Assessment Enterprise	Public Enterprise	Mrs. Martha Molla
12	EiTEX	Public Entity	Dr. Tamrat Tesfaye
13	Ethiopian Women Lawyers Association (EWLA)	Association	Ms. Tensae Ayalew
14	Markos PLC	Private Entity	Mr. Tesfamichael Dires
15	Lilly Pads	Private Entity	Mrs. Tsion Bahiru
16	Hans with Care	Private Entity	Mrs. Hanan Ahmed
17	She for Her/ She design	Private Sector	Mrs. Woyнешet Guangul
18	Mela for Her	Private Sector	Ms. Eden Befekadu
19	Hewan Pads	Private Sector	Mr. Tewodros Yosef
20	Ethiopian Medical Women Association (EMeWA)	Association	Dr. Semira Hasen



21	Akiyamos import and export-SINA Pads	Private Entity	Mrs. Hilina Gizachew
22	Mullege PLC	Private Entity	Mr. Gebrewold Ashengo
23	Ethio-Hygenic Industries PLC (Lady Perfect Pads)	Private Entity	Mr. Eshetu Biru
24	Banchealem Ambachew Import-Sassy	Private Entity	Ms. Hanan Jemal
25	Ashagari	Local NGO	Ms. Aster Bekele
26	Yeti Pads	Private Entity	Mrs. Yetnayet Solomon

Absentees

No.	Name of Organization	Type of Organization	Assigned Participant Name
1	Ministry of Health	Public Entity	N/A
2	Ministry of Education	Public Entity	N/A
3	Ministry of Industry	Public Entity	Mrs. Alemnesh Yehuala
4	EITEX	Public Entity	Dr. Tamrat Tesfaye
5	Markos PLC	Private Entity	Mr. Tesfamichael Dires
6	Lilly Pads	Private Entity	Mrs. Tsion Bahiru
7	Hans with Care	Private Entity	Mrs. Hanan Ahmed
8	Mela for Her	Private Entity	Ms. Eden Befekadu
9	Hewan Pads	Private Entity	Mr. Tewodros Yosef
10	Ethiopian Medical Women Association (EMeWA)	Association	Dr. Semira Hasen
11	Akiyamos import and export-SINA Pads	Private Entity	Mrs. Hilina Gizachew
12.	Mullege PLC	Private Entity	Mr. Gebrewold Ashengo



C. Distribution PPD Discussion Group

12 February 2025, 09:00 am – 12:30 pm, Elilly Hotel, Addis Ababa

Invited Discussion Group Members

No.	Name of Organization	Type of Organization	Assigned Participant Name
1	Ministry of Health	Public Entity	N/A
2	Ministry of Education	Public Entity	N/A
3	Ethiopian Pharmaceutical Supply Service	Public Entity	Mrs. Hirut Hailu
4	Ministry of Transport and Logistics	Public Entity	N/A
5	Expert		Mrs. Elbethel Getnet
6	Ministry of Women and Social Affairs	Public Entity	Mrs. Zinash Mekonnen
7	Ethiopian Women Federation	Association	Mrs. Etsegenet Mulugeta
8	UN Women	International NGO	N/A
9	Progynist	Local NGO	N/A
10	PSI Ethiopia	International NGO	N/A
11	Kidame Mart	Private Entity	N/A
12	Yene Health	Private Entity	Diana Gebregiorgis
13	Maryod Reusable Pads	Private Entity	Mrs. Tsehaynesh Debele
14	Liyu Pads	Private Entity	Mr. Dawit Girma
15	Expert		Mrs. Bezawit Negash
16	CARE	International NGO	Mrs. Mihret Fikadu
17	Ashagari	Local NGO	Ms. Aster Bekele
18	Clean Material and Child Health Supplies Manufacturing PLC	Private Entity	Mr. Zelalem Yitbarek
19	Engender Health	NGO	Mrs. Bezawit Workneh
20	Banchealem Ambachew Import-Sassy	Private Entity	Mr. Kinfe Michael Okubeselassie
21	Mullege PLC	Private Entity	Mr. Gebrewold Ashengo
22	Imagine 1 day	NGO	Mrs. Semira Berhanu
23	Norwegian Church Aid	International NGO	Mr. Gedewon Teka
24	UNFPA	UN Agency	Mrs. Metsihet Ayineku
25	iDE Ethiopia	International NGO	Mrs. Martha Gebeyehu



26	WISE	Association	Mrs. Aster Yosef
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Absentees

No.	Name of Organization	Type of Organization	Assigned Participant Name
1	Ministry of Health	Public Entity	N/A
2	Ministry of Education	Public Entity	N/A
3	Ministry of Industry	Public Entity	Mrs. Alemnesh Yehuala
4	EiTEX	Public Entity	Dr. Tamrat Tesfaye
5	Markos PLC	Private Entity	Mr. Tesfamichael Dires
6	Lilly Pads	Private Entity	Mrs. Tsion Bahiru
7	Hans with Care	Private Entity	Mrs. Hanan Ahmed
8	Mela for Her	Private Sector	Ms. Eden Befekadu
9	Hewan Pads	Private Sector	Mr. Tewodros Yosef
10	Ethiopian Medical Women Association (EMeWA)	Association	Dr. Semira Hassen
11	Akiyamos import and export-SINA Pads	Private Entity	Mrs. Hilina Gizachew
12	Mullege PLC	Private Entity	Mr. Gebrewold Ashengo



D. Awareness PPD Discussion Group

13 February 2025, 09:00 am – 12:30 pm, Elilly Hotel, Addis Ababa

Invited Discussion Group Members

No.	Name of Organization	Type of Organization	Assigned Participant Name
1	Ministry of Women and Social Affairs	Public Entity	Mrs. Zinash Mekonnen
2	Ministry of Education	Public Entity	N/A
3	Inter Religious Council of Ethiopia	Association	Ostaza Fatima Hussien
4	Ministry of Water and Energy	Public Entity	Mrs. Yewbdar
5	Addis Ababa City Health Bureau	Public Entity	Mr Tesfaye Daba
6	CARE	International NGO	Mrs. Mehret Fikadu
7	Splash International	International NGO	Mrs. Belen Moges
8	Population Service International (PSI)	International NGO	N/A
9	Lilly Pads	Private Entity	N/A
10	Propride	NGO	Abeba Kassahun
11	Hewan Pads	Private Entity	Mr. Tewodros Yosef
12	ZUZU for Health & Education	Private Entity	N/A
13	Firma Media and Communications PLC	Private Entity	N/A
14	Adey Pads	Private Entity	Mrs. Michal Mamo
15	Hans with Care	Private Entity	Mrs. Hanan Ahmed
16	Setaset	Initiative	Ms. Abigail Bahru
17	Ethiopian Institute of Textile (EITEX)	Public Entity	Dr. Tamirat Tesfaye
18	Addis Powerhouse	Initiative	Mrs. Meron Deribe
19	Inter Religious Council of Addis Ababa	Association	Mrs. Remila Kedir
20	Ashagari	Local NGO	Ms. Aster Bekele
21	Engender Health	International NGO	Mrs. Bezawit Workneh
22	Banchealem Ambachew Import - Sassy	Private Entity	Mr. Kinfemichael Okubasilassie



23	Norwegian Church Aid	International NGO	Mr. Gedion Teka
24	UNICEF	UN Agency	N/A
25	Asham TV	Local Private Television Station	N/A
26	UNFPA	UN Agency	Mrs. Rediet Mesfin
27	Setawit Movement	Initiative	N/A
28	FHI 360	International NGO	Mrs. Rozina Zerabiruk
29	iDE Ethiopia	International NGO	Mrs. Martha Gebeyehu
30	Ethiopian Media Authority	Public Entity	Mrs. Dureti Tadesse
31	WISE	Association	Mrs. Aster Yosef
32	Agiyet Pads	Private Entity	Ms. Hilina Tekle
33	Ethiopian Kale Hiwot Church Development Commission (EKHCDC)	Local NGO	Mrs. Aster Ayele

Absentees

No.	Name of Organization	Type of Organization	Assigned Participant Name
1	Ministry of Education	Public Entity	N/A
2	Inter Religious Council of Ethiopia	Association	Ostaza Fatima Hussen
3	Ministry of Water and Energy	Public Entity	Mrs. Yewbdar
4	Population Service International (PSI)	International NGO	N/A
5	Lilly Pads	Private Entity	N/A
6	ZUZU for Health & Education	Private Entity	N/A
7	Firma Media and Communications PLC	Private Entity	N/A
8	Setaset	Initiative	N/A
9	Ethiopian Institute of Textile (EITEX)	Public Entity	Dr. Tamirat Tesfaye
10	Ashagari	Local NGO	Ms. Aster Bekele
11	Banchealem Ambachew Import - Sassy	Private Entity	Mr. Kinfemichael Okubasilassie



12	Norwegian Church Aid	International NGO	Mr. Gedion Teka
13	UNICEF	UN Agency	N/A
14	Asham TV	Local Private Television Station	N/A
15	Setawit Movement	Initiative	N/A
16	FHI 360	International NGO	Mrs. Rozina Zerabiruk