

The solution

When I delved into the issue of period poverty, I could see that if we wanted to overcome the problem of pupils not going to school because they couldn't afford pads or tampons, these products would have to be provided for free.

Once you have your specific problem, you need a solution. I'm not saying this bit is always easy. I *know* it isn't. Even though you're confounded by a burning sense of injustice, it's not always straightforward to think of an immediate or logical solution that sounds reasonable.

A good place to start is to think of a world where this issue didn't exist. A perfect world. What does that world look like?

What will make the problem go away? What needs to change? The onus is on the campaigner to present a solution to the powers that be, to show them that change is achievable!

There are not many women like Edna Adan Ismail. She was Somaliland's first midwife, and set up her own hospital before becoming the First Lady and the country's first female cabinet minister. She is a formidable campaigner and pioneer for women's health. I was lucky enough to interview her in the summer of 2019, when she was in London promoting her book, and I was amazed at her ability to identify a problem, figure out a solution, and fearlessly make it happen. For her, finding solutions to the most entrenched of injustices was straightforward because her will to see change was powerful and unapologetic.

Edna was born in Somaliland, a country that remains culturally conservative, where women have limited agency, no voice and no power. When she was just eight, Edna's mother and grandmother arranged for a friend with no medical training to subject her to female genital mutilation (FGM), a brutal and primitive operation that involves cutting or removing some

or all of the external female genitalia. In some countries, it's considered to be a form of 'purification', a belief grounded in gender inequality and a desire to limit women's sexuality. It can cause chronic pain, infections, increased risk of HIV transmission, birth complications, infertility, and even death.

Edna can still remember lying on the floor in shock, bleeding and crying in excruciating pain. It was a severely traumatic experience. Somaliland is a country with a population of 4 million, where 98 per cent of women between the ages of 15 and 49 have been subjected to FGM, and as an adult Edna realised that change was urgently needed. However, she knew that in a culturally sensitive climate, talking about FGM was dangerous.

Her solution was smart.

She talked about how FGM caused bleeding, infections, and possible infertility, rather than the trauma it caused. By approaching the topic from a health perspective, she didn't offend people but instead was able to sensitively and cleverly raise awareness of just how damaging FGM is to a girl. As a nurse, she had always spoken about the need for preventing diseases in children by vaccinating them, about attending prenatal check-ups and so on, and this was no different.

Sometimes your solution isn't as obvious as the problem itself. Think through different options and ask yourself whether the solution is specific enough to stop the problem you've identified. Is it something that can feasibly be done, or are you being too idealistic or too general? Period poverty is a global phenomenon ruining the lives of children everywhere. From Australia to Japan, across the length and breadth of Africa, from states in India and America to countries in Europe, students have told me that period poverty is hitting them hard. But there isn't a one-size-fits-all solution when each country has so many different cultural, social, and religious influences.