



## Menstrual Hygiene Management among Rural Women in Punjab (India)

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### Abstract

About 52% of the female population globally is of reproductive age. It means menstruation is part of their normal life and menstrual hygiene is therefore an essential part of basic hygienic practices for the 1.8 billion women (House et al., 2012). Menstruation impacts development as well as the lives of girls and women in terms of health, education, work, mobility and quality of life. Despite this, menstruators keep on facing multiple social, cultural and non-secular restrictions that pose an additional challenge in ensuring adequate menstrual hygiene management. Millions of menstruators across the planet are denied the right to manage their monthly menstrual cycle in a dignified and healthy way. One of the reasons for the same is cultural taboos related to reproductive health. The study was carried out in village Sohana, District SAS Nagar in the State of Punjab in India. The findings of the study revealed that there are several myths that persisted in the rural areas which made this period a very difficult one for women. Most of the rural women had lack of knowledge and awareness about menstruation and menstrual hygiene. Hence, they blindly followed the cultural taboos and myths. The study also suggests remedial measures to overcome the challenges faced while ensuring effective menstrual hygiene management among rural women.

**Keywords:** Health, Hygiene, Mensuration, Rights, Rural Women.

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## Introduction

### I Un-mystifying Menstrual Hygiene Management from Historical Perspective

A woman's reproductive cycle can rightly be described as a miracle of nature. "Looked at without any context at all, it certainly seems odd that around half of the human species should spend the better part of their four decades bleeding without being injured, but women have been handling their periods since before we fully evolved as a species, so there's probably some sense to it" (Lecia, 2016). Despite this, there's little or no documentation about women's periods in ancient history, probably due to the fact that the majority of the scribes were men who chose not to record menstruation. For thousands of years, menstruating women wrapped up in labels and were misinformed about religious beliefs because of which at times they were considered holy and mystical and other times seen cursed and untouchable. "In Biblical Times, ancient Hebrews upheld laws of Niddah, during which menstruating women went into seclusion and had to remain separated from the rest of society for seven 'clean' days" (Lecia, 2016). Some historians also believed that menstruating women were associated with magic. According to Roman author and philosopher Pliny wrote that a menstruating woman could stop hail storms and lightning, as well as kill crops. It was also believed they could kill bees, dim mirrors and rust weapons just by watching them (Pliny, 1601).

"Some historical documents mentioned that most medieval women used rags or other absorbent materials during heavy periods. Otherwise, many ladies would just bleed free into their clothes. There was shame which was religiously associated with periods, so women went to insane lengths to hide their cycle from the public. They would carry little pouches of sweet-smelling herbs around their neck or waist to neutralize the smell of blood, and that they believed that burning a toad and wearing the ashes in a pouch around their waist would ease cramps and heavy flow" (Team KT, 2018). According to Jenner, G., With a certain amount of shame attached to the menstruation process, and genuine horror affixed to the blood itself, women took pains to mask their cycles from public view (Havelock, 1894). In the early 1700s, most women would simply use old rags as pads, similar to what they would use as nappies for their babies and would simply wash and reuse them. This is also thought to be where the very flattering term "on your rags" came from. Women who lived on farms would often use sheepskin as a menstrual aid and would boil the skin and then clean it with each use. The first commercial sanitary pads were produced by Johnson & Johnson in 1896 and named as Lister's Towels (on the name of Joseph Lister, a pioneer in sterile surgery) (Lecia, 2016).

In the late 19th century, people started realizing that it wasn't sanitary for ladies to continuously bleed into their clothes. This is where the history of menstruation products began. First came the Hoosier sanitary belt. From the 1890s to 1970s, women could purchase washable pads that were attached to a belt round the waist. In 1929, the first tampon was invented by Dr. Earle Haas. In the 1970s, self-adhesive pads women could attach to their underwear finally came into the market. Tampons and pads have been tweaked over the years to be more absorbent and customised to different levels of flow. There are now tons of options available to help women to deal with her menstrual cycle, including menstrual cup, and absorbent period underwear (Read, 2008). Gradually various new products have been introduced to maintain the menstrual hygiene of



the women and the scientific knowledge and awareness about the menstruation has increased; however, it is still considered a taboo in many countries across the world including India and there is a lot needs to be done as far as change in attitude is concerned.

## **II Menstrual Hygiene Management: International and National Perspective**

“Menstrual hygiene is an important aspect of reproductive health, which if not handled appropriately can cause infections of the urinary tract, pelvic inflammatory diseases and vaginal thrush, as well as bad odour, soiled garments and ultimately shame, leading to infringement on the girls' dignity” (Oche, Gana and Ango, 2012). Menstrual hygiene refers to the effective management of menstrual bleeding by women and girls. WHO and UNICEF Joint Monitoring Programme (JMP) for drinking water sanitation, and hygiene have used the following definition of menstrual hygiene management (UNICEF, 2019: 8):

“Women and adolescent girls are using a clean menstrual management material to absorb or collect menstrual blood, that can be changed in privacy as often as necessary for the duration of a menstrual period, using soap and water for washing the body as required and having access to safe and convenient facilities to dispose of used menstrual management materials. They understand the basic facts linked to the menstrual cycle and how to manage it with dignity and without discomfort or fear.”

Understanding MHH within the context of human rights requires a holistic approach to women's and girl's human rights. The biological fact of menstruation, the need of managing menstruation, and society's response to menstruation is linked with women's and girls' human rights and gender equality. The stigma around menstruation and menstrual hygiene leads to the violation of other human rights such as right to human dignity, non-discrimination, equality, bodily integrity, health as well as right to privacy.

Menstrual hygiene management is important for the fulfilment of women's rights, a key objective of the Sustainable Development Goals (SDGs). It is also a component of gender-responsive Water, Sanitation and Hygiene (WASH) services. SDG-6.2 acknowledges the right to menstrual health and hygiene, with the explicit aim to (United Nations, 2015):

“By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations”.

Women and girls' access to MHH is additionally central to achieving other SDGs. The lack of basic knowledge about puberty and menstruation may contribute to early and unwanted pregnancy; the strain and shame related with menstruation can negatively affect mental health; and unhygienic sanitation products may make girls vulnerable to reproductive tract infections, all affecting SDG's health outcomes (Goal 3). The chances of a girl student missing the school during menstruation or being less focussed in her class due to a lack of basic hygiene facilities in the school or due to the lack of cooperation from the school community, affecting education (Goal 4), or at work, affecting the economic opportunities (Goal 8). Gender equality (Goal 5) cannot be achieved when taboos and myths prevent menstruating women and girls from full participation in society. Failure to develop



markets for quality menstrual materials can impact on sustainable consumption and production patterns (Goal 12).

Recognizing the significance of menstrual hygiene management, May 28 was declared as Menstrual Hygiene Day by WASH United in 2013 (May 28, due to the reason that average menstrual cycle occurs after 28 days and lasts for 5 days). The core objective was to create awareness of the challenges faced by women worldwide due to their menstruation and to spotlight solutions that address these challenges. UNICEF has been functioning with local communities, schools and governments to research and supply information about menstruation to promote positive hygiene habits and break down taboos. Identifying the significance of the issues concerned, there has been an increased momentum from international donors, the national government, small and medium sized enterprises, and NGO's to address problems related to menstrual health. The focus has largely been on products and improving awareness about menstruation.

Lots of efforts have been made by the government of India (both at the centre and states) and civil society organizations to create more awareness about menstrual hygiene and safe practices, especially among adolescent girls. Some of the prominent initiatives are: Goonj, Jayashree Industries, Menstrupedia, UNFPA India, UNICEF India, WASH (water sanitation and hygiene). Besides these initiatives, a Menstrual hygiene scheme was launched by the Ministry of Health and Family Welfare, Government of India for the promotion of menstrual hygiene among adolescent girls (10-19 years) in rural areas of selected districts in 2011. From 2014 onwards the scheme was extended to all the districts under Rashtriya Kishor Swasthya Karyakram to enhance menstrual hygiene knowledge, improve hygiene practices, provide subsidized sanitary absorbents and raise awareness of Menstrual Hygiene Management at the school level. The SABLA programme of the Ministry of Women and Child Development focuses on nutrition, health, hygiene and reproductive and sexual health (linked to rural mother and child care centers). The National Rural Livelihood Mission promotes self-help groups and small companies to produce sanitary pads. Menstrual hygiene management is also an integral part of the Swachh Bharat Mission and Swachh Bharat: Swachh Vidyalaya. Menstrual Hygiene Management Guidelines issued by the Ministry of Drinking Water and Sanitation (MDWS) involves the support from state governments, district administrations, engineers and technical experts in line departments, and schools' head teachers and teachers for its implementation. Guidelines for Gender Issues in Sanitation (2017) have been evolved by MDWS to ensure gender equality and empowerment of women and girls with respect to sanitation. Due to these efforts, there has been a significant increase in the accessibility and use of sanitary napkins in India, in both rural and urban areas in the last two decades. With the existence of a large number of agencies supplying the menstrual products through local production, free distribution, and subsidised prices, the cost restraints have also reduced with easy availability of low cost variants.

However, it becomes pertinent to study whether these plans and strategies actually reach to women especially in rural areas. The present study was conducted in Sohana village of district SAS Nagar (Sahibzada Ajit Singh Nagar), Punjab.



## Objectives

The objectives of the study were

- To find out the availability and affordability of menstrual management products for rural women in sampled village;
- To analyse the access to adequate sanitation infrastructure to enable women and girls to change and dispose of menstrual materials;
- To identify the myths and misconceptions related to menstruation prevailing in the village;
- To find out the level of knowledge of the process of menstruation and of alternatives and resources available for menstrual hygiene management among the rural women and the attitude of the men towards the same in the family.

## Methodology

The study was conducted in Sohana village (District SAS Nagar/Mohali). Both quantitative and qualitative methods have been used for the study. Structured interviews were carried out with 100 women of different age groups. Focus group discussions of age-segmented groups of girls and women (10-12 participants) were also carried out to explore beliefs or perceptions and to capture voiced experiences. Women from all walks of life such as home makers, working women and adolescent girls from government schools were interviewed. Semi-structured interviews or discussions were carried out with 20 sanitation workers working in that area to understand the existing hygiene as well as the sanitary disposal practices of the village. Market assessments were made to explore the availability of hygiene products locally. The local authorities as well as Anganwari workers of the area were informally interviewed to know the implementation of hygiene management laws and policies in the village.

## III The Case Study

“Women have developed their own personal strategies to handle this period of time. Globally, these strategies vary greatly due to the personal preferences, availability of resources, economic status, cultural traditions and beliefs, education status, and knowledge about menstruation” (Kaur et al., 2018). Girls and women have full right to live healthy and productive lives, with dignity and menstrual hygiene is one of the key priority issues to ensure the same. In many areas, there is complete neglect of menstrual hygiene due to lack of awareness, lack of availability, accessibility and affordability to sanitary products. Besides this providing a regular supply of sanitary napkins and enabling other sanitation measures such as access to water and toilets in schools and in the community is highly significant. The menstrual health hygiene management has been analyzed in this unit under the following heads: (a) Availability and affordability of menstrual management products; (b) Access to sanitation infrastructure to enable women and girls to change and dispose of menstrual materials; (c) Myths and misconceptions related to menstruation; and (d) Knowledge of the process of menstruation and of alternatives among women and attitude of the men towards the same in the Family.



### **(A) Availability and Affordability of Menstrual Hygiene Products**

“Menstrual hygiene materials are the ones used to catch menstrual flow, such as clothes, reusable and disposable pads, menstrual cups and tampons. Girls and women manage their menstruation using many different materials and strategies, each developed for the specific context of her life” (UNICEF, 2019). However, limited availability of menstrual hygiene products and economic restraints lead to inability to maintain hygiene which consequently affect the health of menstruators adversely. Majority of the rural women in India do not have access to proper products due to their economic restraints which lead them to have no other option than to rely on reusable cloth.

In the selected village, 78% of the women were using commercial sanitary napkins as these were found to be easily available in comparison to other options such as tampons or menstrual cups. 13% women were using reusable clothes during their periods. Interestingly, 9% of women were using both cloth and pads. Not a single woman was found to be using tampons or menstrual cups, the reason for the same was lack of availability as well as lack of knowledge about the products. Most of the women agreed that they used disposable sanitary pads during their menstrual cycle as they found it more comfortable. The 13% women who were using cloth and 9% who were using both cloth and pads stated that they would prefer to switch to pads as pads were more comfortable and convenient. Many mothers were found to be using cloth while they were buying pads for their daughters. They stated that they used pads while going outside or for attending functions occasionally as they found it comfortable and convenient. Hence, the affordability of pads was a major barrier while making choices amongst the different menstrual hygiene products.

According to health experts, the sanitary pad must be changed once every four hours. However, the study revealed that though 78% of the women were using commercial sanitary napkins, 47% of them admitted that they changed the absorbent once in a day as they were unable to afford the pad. Another 39% changed the pad twice a day. Only 14% changed it more frequently as they were aware that wearing the same pad for a longer time would make them more prone to develop rashes and vaginal yeast infections. 69% women stated that they frequently faced infection or rashes when they used disposable or commercial pads as commercial pads have absorbing gel and perfuming chemicals which reacts to skin if not changed after 4-5 hours in a day. However, they reiterated that they were helpless as they couldn't afford to change it frequently.

The survey revealed that the monthly household income of 52% women of menstruating age in the village was less than ₹5000 a month. Hence, they could only afford a menstrual product which is economical and must be easily available. The others who had monthly family income of more than ₹5000 could easily spend on menstrual management products. 36% women stated that they could spend less than ₹100 for their menstrual products as they could not afford or their family did not allow them to spend more than ₹100 on their menstrual hygiene. 33% and 28% could afford to spend ₹100-₹200 and ₹200-₹500 respectively for their menstrual products. Only 3% females stated that they can spend more than ₹800 on menstrual hygiene products.

As the study was carried out during Corona pandemic, 20% of the sampled females reported that they had to switch to cloth pads as they were not able to buy sanitary pads due to lock down. The women mentioned that there has been no napkin distribution programme run by the



government or any non-governmental organization in their village. Most of the women were not aware about any such programme. The study revealed that the majority of the women preferred to use disposable products due to its easy accessibility as well as convenience. “Use and throw convenience of disposable sanitary napkins, the aspirational aspect projected by the popular media and the inconvenience in maintaining cloth given the social taboos surrounding the menstrual cloth seem to be major reasons for the rural women shifting to disposables” (Sahu, 2017); however, economic limitations restrained them from changing it as per the health directives which leads to adverse health implications. Moreover, the fact that these pads are not good for the environment cannot be overlooked.

### ***(B) Access to Sanitation Infrastructure to Enable Women and Girls to Change and Dispose of Menstrual Materials***

An important aspect of hygiene management is adequate private changing space, clean toilets and water for cleaning, changing and discarding. The studies time and again have revealed that girls have to miss their school during periods due to lack of private changing space and clean toilets. 89% women of the selected village mentioned that they have privacy for changing materials, washing body with soap and changing clothes at home while 10% admitted that they do not have privacy to change or wash at home due to shortage of space. Interestingly, all these women (100%) admitted that privacy of changing materials, washing bodies and changing clothes is totally missing at their workplace as well as in public spaces. They informed that though toilets have been constructed in the markets; these are poorly maintained with no water and cleanliness. Changing at such an unhygienic place may lead to virginal infections; hence, they prefer to wait till they reach home. The anganwadi workers of the village told that the toilet of the anganwadi Centre is non-operational for the past 14 years. As anganwadis are a rural childcare centre, both children and pregnant women visit there for administration of vaccines and for monthly health check-up; defunct public toilets raised serious menstrual health concerns of the females who visited anganwadi. It was further revealed that the structure, which housed public toilets for both men and women, was built by Greater Mohali Area Development Authority (GMADA) in 1994. However, as it remained defunct, the panchayat decided to allow an anganwadi to operate in its lobby. In the absence of proper space for the anganwadi, the questions about other basic amenities such as disposal bin for disposing the menstrual products, sanitary pads dispensing machine and privacy to change appeared meaningless.

It is really tragic that despite a plethora of policies for maintenance of hygiene, we still lack in providing basic human facilities such as clean toilets. The crores of rupees spent on schemes for providing free disposable pads to girls and for creating awareness about hygiene management become useless unless there is an access to sanitation infrastructure to enable women and girls to change and dispose of menstrual materials.

Another very important area of growing concern is disposing of used plastic sanitary napkins. While women face this question every month, government agencies are still unable to find a tenable solution to handle the increasing amount of sanitary waste generated monthly. By 2018, 26% of the global population or 2 billion people were of menstruating age (UNICEF, 2019). On average one person uses 250-300lb of menstrual products in a lifetime (Borowski, 2011). According to the Economic Times (May 2019), a woman in India, typically, disposes over 10,000



tampons/pads in her menstrual life cycle. 12 billion pads are produced and disposed of annually in India alone (WSSCC, 2019). “While the numbers are startling, the problem of proper disposal of sanitary waste is a bigger concern. Menstrual products like tampons, pads, panty-liners, etc. take years to decay as a majority of them use up to 90 per cent plastic or non-degradable material. For example pads, that take over 500-800 years to decompose” (The Economic Times, May 2019).

According to an article in Hindustan times, the lack of concern for sanitary waste management in India is reflected in the fact that there are no reliable statistics available on this subject. According to the Centre for Science and Environment, one major issue of sanitary waste has always been their categorization, i.e whether it is biomedical or plastic waste (The Hindustan times, 2016). The Government of India has already framed strict guidelines as far as safe disposal of non-biodegradable products are concerned. According to the Municipal Solid Waste (Management and Handling) Rules (2016):

- (a) Manufacturers or brand owners or marketing companies of sanitary napkins and diapers shall explore the possibility of using all recyclable materials in their products or they shall provide a pouch or wrapper for disposal of every napkin or diapers alongside the packet of their sanitary products.
- (b) All such manufacturers, brand owners or marketing companies shall educate the masses for wrapping and disposal of their products.

As per Bio-Medical Waste (Management and Handling) Rules (2016):

“The treatment and disposal option for the items contaminated with blood, body fluids like dressings, plaster casts, cotton swabs and bags containing residual or discarded blood and blood components are incineration or plasma pyrolysis or deep burial hydro-claving followed by shredding or mutilation or combination of sterilization and shredding. The treated waste shall be sent for recovering energy”.

Despite the above mentioned strict rules, 78% women in the sampled village were found to be disposing off their menstrual waste in open by wrapping it in newspaper or plastic bags to cover the traces of blood increasing the quantity of non-biodegradable waste generated. 11% of women buried their used product, 7% of women burnt it so that there are no traces of their menstrual product usage and 4% of women flushed it in the drain because they do not know how to dispose of their menstrual product. Many women believed that it is the blood that is the source of pollution, not the products. Few of them were found to be throwing them even without bothering to cover it. The study revealed that 80% of the sanitation workers admitted that they frequently found uncovered menstrual products in the village. When menstrual products are left uncovered they attract harmful germs and diseases. As there was no segregation of waste at household level, the sanitation workers had to separate used napkins from recyclable items by hand, exposing them to micro-organisms like E-coli, salmonella, staphylococcus, HIV and pathogens that cause hepatitis. They further stated that the stray animals tear off the used sanitary products, which further creates a mess and makes it more difficult for them to clean it. Besides health implications, the improper disposal of menstruation waste or burning of pads has adverse consequences on the environment. The highest percentage of choking in India is due to improper disposal of menstruation waste



(Sharma, 2019). Hence, there is an urgent need to segregate the waste at source and dispose of the sanitary waste in a proper manner. The onus lies not only on the local authorities but also on the community at large.

### ***(C) Myths and Misconceptions related to Menstruation***

The prevailing myths and misconception related to menstruation adversely affect women in their daily life. It also impacts the women's perception about themselves, their bodies and their roles in the society. A variety of menstrual-related traditions persist and although there are differences by country, culture, ethnos, class or family; gender discrimination has its effect on issues concerning reproductive health, the genital system, its functions and its processes. Most striking is that the confined control, which many women have over their own mobility and behavior during menstruation due to their 'impurity' which was considered, including the myths, misconceptions, superstitions, cultural and religious taboos concerning menstrual blood and menstrual hygiene (Ten, 2007).

The root cause of the existing myths related to menstruation is lack of understanding of the human body and the habit of deductive reasoning based on symptoms. Culturally in many parts of India, menstruation remains to be considered dirty and impure. Further, within the Hindu faith, women are prohibited from participating in normal life while menstruating. She must be "purified" before she is allowed to return to her family and day to day chores of her life (Garg and Anand, 2015). Some of the myths and misconceptions related to menstruation in the sampled village have been discussed in Table-1.

**Table 1: Myths and Misconceptions related to menstruation in the Sampled Village**

<b>Sr No.</b>	<b>Myths and Misconceptions Faced by Women</b>	<b>No. of Women (Out of 100)</b>
1.	Menstruating women is impure	73
2.	Menstruating women cannot offer prayers, take part in religious ceremonies, are forbidden from touching a sacred object or enter a place of worship	79
3.	Menstruating women should not cook food or even enter the kitchen. As doing so would spoil food items in the kitchen and anyone consuming them will fall sick	53
4.	Intercourse with a menstruating women, spreads sexually transmitted disease and if a woman conceives while she is menstruating, the baby will be born abnormal	48
5.	Contact from a menstruating woman or even her presence in the vicinity will spoil a wine or bread or pickle or any other food in making	68
6.	Menstruating woman should not take bath or go for swimming	15
7.	Menstrual blood is impure	95
9.	After a girl's first menstruation, any kind of physical contact with a boy can get her pregnant	10
10.	It is impossible to get pregnant during menstruation	64
11.	Menstruating women can influence elements of nature like sun, moon, seasons and climatic conditions	15



The above table clearly shows that there are multiple myths and misconceptions prevalent among rural women. Many women did not know the biological aspects related to periods and hence, were unable to guide their children. As mothers were the primary contact person of the menstruating girls, most of these myths and misconceptions have been passed on by the mothers to their daughters. The mothers when interacted stated that these restrictions were imposed on them by their mother and later on by their mother-in-laws; hence they started accepting these as facts without even questioning about the scientific or logical reasoning for practicing these restrictions. As they themselves believed it to be true, they passed on the same myths to their daughters as well. Though the adolescent girls going to school were found to be challenging these taboos, they asserted that it is not easy to change the mind set of their mothers at home. Their mothers refused to let them help in preparing food or doing religious activities during their periods. According to Joseph S, of Mythri, a Bangalore based NGO that spreads menstrual health awareness among adolescent girls; the entire controversy is centered on a misunderstanding. It is not that women are unclean, it is the limits they place on women's mobility and freedom that make the silence menstruation in India so pernicious. As a lot of inhibitions and myths have existed since centuries, it has to be a continuous process of dissemination of information that can help in breaking the vicious circle of myths prevalent in rural India regarding menstruation.

***(D) Knowledge of the Process of Menstruation and of Alternatives among Women and Attitude of the Men towards the same in the Family***

The major hindrance in the path of menstrual hygiene is little, inaccurate and incomplete knowledge about reproductive functions and reproductive health and associated problems amongst adolescents (Warenius et al, 2007; Mahon & Fernandes, 2010). Women have very little or no knowledge about reproductive tract infections caused due to it, thanks to ignorance of private hygiene during menstruation. Although the majority of respondents in the sampled village were aware of menstruation before menarche, most of them experienced fear and panic when it occurred. 79% females were guided by their mothers, while others were guided by their sisters, friends or teachers on the onset of their menstruation. Though 89% females were comfortable answering the questions related to mensuration, 11% females were not comfortable in talking about periods even with the female researcher. Periods have always been treated as an issue not to be discussed in the public domain especially in rural India. Moreover, periods are something which is associated with smells, mess, blood, gore, impurity and disgust which is why many women felt uncomfortable talking about their periods. This leads to women remaining silent. As far as knowledge of the process of menstruation was concerned, only young girls in the sampled village had knowledge about menstruation process and alternatives available. While 44% women had heard about availability of biodegradable products/ reusable products, only 15% of the women knew about incinerators as disposal techniques.

The study found that the school teachers, both male and female, were hesitant in discussing menstruation and menstrual hygiene management with their students. The students said that most of the time, the teacher skipped the portions of chapters dealing with menstruation to avoid discussion or questions on the issue. Teachers seem to be hesitant and sceptical while discussing such topics in their classrooms. As teachers in rural areas had to discuss these topics in local language by using vernacular words, they found it more embarrassing to discuss the issue. The girls hesitated to answer teacher's questions during their periods in fear of leakage or smell and



also hesitated to write on blackboard in fear of any menstrual accident and blood stains on clothes seen by others. In some reported cases, parents did not allow girls to go to schools upon reaching puberty in fear of sexual harassment by boys and male teachers in schools (Kaur et al., 2018).

Periods have always been considered a women's issue with men posing to be indifferent towards the same. Due to unwillingness, myths, prejudices, and misconceptions, it is difficult to talk about menstruation with men and boys. As the parents do not discuss menstruation with boys, most of the boys received information about menstruation from friends and the internet which is many times inaccurate and incomplete. It has to be understood that men have a very significant role to play in promoting menstrual hygiene especially in Indian rural set up where most of the households are headed by men. Men can support the women in managing menstruation by effectively performing their roles as husbands, fathers, brothers, students, teachers, colleagues, leaders, and policymakers, in public as well as private domain.

According to the survey, 66% women were comfortable talking about menstruation to their husband. While 16% females stated that they can talk about menstruation with their brother, 10% and 8% females were found to be comfortable talking about menstruation to their boyfriend and father respectively. It was found that at household level men do not support women regarding menstrual hygiene and they never discussed menstrual issues with their wives and daughters. As they were the decision-makers at household level, in many cases they did not give money to buy menstrual products. In such cases, women had to compromise with their menstrual needs and personal hygiene. Decisions related to constructing toilets in houses were also taken by male members with major repercussions of the decision being on menstruating women. There are few exceptions such as Arunachalam Muruganantham, known as "India's Menstrual Man" who was not only sensitized about the issue but also developed an inexpensive and environment-friendly machine which produces semi-biodegradable sanitary pads.

One of the main reasons why menstruation is a taboo and menstruation hygiene is neglected is unequal gender relation in society. Disparity in the rights ensured to men and women within the households lead to women's voices being overlooked while making social welfare programmes. Hence, there is an urgent need to have menstrual hygiene programmes that ensure the engagement of both men and women.

## **Conclusion**

Menstrual blood is the only source of blood that is not traumatically induced. Yet in modern society, this the most hidden blood, the one so rarely spoken, except privately by women. Though efforts have been made by the government to promote menstrual hygiene, the positive outcomes are still not visible especially in Indian villages. The stigma associated with menstruation leads to women facing emotional and physical discomfort silently. The NGOs can play an effective role to promote education and awareness about menstruation and menstrual hygiene. Comprehensive health policies need to be framed at the school level to create awareness regarding health and safety issues as well as to ensure adequate water and sanitation facilities. Teaching a girl about menstruation before she has her first period is the best way to make sure she gets to know what will happen, and explain why she should not be scared. This will automatically resolve their doubts by providing them correct knowledge, promote social interaction, and also develop a trust relationship with fellow



friends and teachers. There is a need to build an atmosphere to encourage discussion about menstruation and hygiene practices. It can be done by adding female health education as a core curriculum at all levels of school education. Scientific research on menstrual hygiene management must be promoted to fill the gaps between knowledge and practices.

Besides this, eco-friendly ways for the disposal of the commercial sanitary pads and sustainable alternatives of plastic sanitary pads like reusable pads (cloth pads), biodegradable pads or menstrual cups must be explored. To reduce the quantity of plastic waste, alternative menstrual solutions are getting more widely available and affordable.

In order to provide the necessary conditions for improving the women's situation there is need for all stakeholders- parents, teachers, children, government and the community, to act in unity for the common good and a better future of women of the village. Safe and affordable menstrual products, reproductive justice, no menstrual restriction and de-stigmatization related to menstruation must be ensured so that women and girls are able to manage their menstruation with normalcy and in dignity. A holistic approach is required to transform attitudes, behaviours and practices surrounding menstruation for sustainable equity, peace and human rights.

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