Exploring Menstrual Hygiene Management in Schools

Research tools for exploratory studies conducted by Water For People India & Sanhita Gender Resource Center, West Bengal, India
Study 1. “Menstrual Hygiene Management: a pilot study in West Bengal”, Water For People (India), 2008

**Objective:** Explore students’ MHM behaviour and knowledge and the impact of school facilities on MHM behaviour

**Findings** used to enhance gender sensitivity of WASH interventions and create enabling environments for better MHM in schools

**Location:** 20 high and secondary schools in South 24 Parganas district and East Medinipur district in West Bengal, India

**Partnership:** 5 local NGOs

**Sample:** 650 school girls (14 to 19 years old), 86 teachers (male and female), 270 mothers

- 3 year pilot project to assess impact of awareness programmes on MHM behaviour among school girls (13 to 19 years)
- MHM knowledge and practices assessed at health check up camps and compared with results after hygiene promotion sessions
- Reviewed WASH infrastructure in schools
- Findings led to project strategy redesign, hygiene promotion module modification, and advocacy for scale up in other schools

Location: 10 high & secondary schools, Bankura district, West Bengal
Partnership: Sister Nivedita Kalyan Samity (a local NGO)
Sample size: In each of the 10 schools, 100 to 350 school girls were interviewed & 400 to 1500 students were screened in health camps at each school.
Qualitative Tools and Instruments
(FGDs, In-Depth Interviews, Photo Documentation)

A. To research and document:

• MHM knowledge, attitudes and practices among school girls
• How WASH infrastructure in schools enables or hinders hygienic practices
• Girls’ access to information about menstruation
• Menstruation management practices, coping mechanisms, and challenges
• Related social and cultural issues that influence menstruation management
B. To assess impact of:

- Provision of MHM information via discussions and periodic training
- Involving girls in planning, designing and monitoring WASH infrastructure in schools
- Recasting and strengthening institutional structures for qualitative improvements in personal hygiene of school girls

C. To test the utility of innovative research tools:

- Provide cameras to school girls to document MHM practices
- Child engineers: In-schools sessions where girls design toilets
- Discussion & interaction: Students, teachers, mothers’ committees
Poor WASH infrastructure impacts hygiene behaviour...

**Drinking water source**
- 70% Tap Water
- 20% No water source in school
- 10% Tube well

**Changing and disposal facilities in toilets**
- 70% Can change but no disposal system
- 30% No changing or disposing facilities

**Toilet facilities for teachers**
- 80% Separate toilet for male and female teachers
- 20% Toilets for female teachers only

**Toilets cleaned regularly**
- 50% Occasionally
- 30% Regularly
- 20% Rarely
• **Cloth pads** are most commonly used and reused
• 18% use sanitary pads, 30% use both cloth and sanitary pads
• **47%** mention ‘sanitary pads’ as the most preferred option
• Girls change **once or twice a day**. Soiled cloth pads carried back home in school bags, as schools do not have toilets / water
• Cloth pads **washed in ponds and dried in secluded parts** of the house, generally away from public view and sunlight
• **39%** use **soap** for washing genitals during menstruation, rest manage only using water, in most cases pond water
• **78%** dispose of used menstrual pads by **burying** them in or alongside ponds, while bathing. Only **2%** burn pads.
Photo Documentation: Health hazards

- Washing and disposing in dirty ponds
- Drying in dirty corners
- Storing in dark dirty spaces
Hazards to privacy and dignity

• White uniforms pose a constant challenge during menstruation
• Girls avoid school for fear of staining
• Challenge is greatest during examinations when they have to sit for long hours and cannot miss school
• Girls are perpetually scared of ‘being discovered’, the challenge greatest in co-education schools

Socio – cultural taboos challenge interventions
Child engineers – Children are the best judge of their needs

School Sanitary block being designed by students

Girls check whether construction is as per their design

Sanitary towels at school

School WATSAN Committee
Unconventional methods engaged to break the silence around MHM & encourage participation

1. **Photo documentation** by school girls
   - Information gathered without intrusion into their privacy

2. Encouraging *Child engineers* to design & monitor sanitary blocks in school
   - Quality Sanitary Blocks, as per real needs expressed by girls
   - Addressing & assigning O&M responsibilities

3. Including **mothers, teachers, doctors & government** in group discussions
   - MHM opened up for discussion
   - Historical / social perspective about MHM understood
   - Encouragement to participate in “Mothers’ committees in schools
   - Promote resource convergence

4. MHM **information module** shared, medical professional screening at health camps
   - MHM module tested, modified accordingly & shared
Emerging Actions

**Hardware**

- Urinals and latrines *proportionate to student numbers*
- Running water inside sanitary blocks
- Hand-washing stations close to toilets
- Adequate drinking-water stations
- 2-3 separate enclosures fitted with incinerators in girls’ toilets
- Proper *drainage* of waste water
- Safe disposal of all solid waste
- Special arrangements for the physically challenged
- School sanitary block within safe distance of school

**Software**

- Sensitise teachers, government, community representatives, parents adolescents
- Build capacities through training and workshops
- Mobilise and converge available resources

**Incinerators for disposing menstrual waste**