Menstrual hygiene: Manage it well

MHM virtual conference
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Theme: Approaches to addressing MHM for girls

Presenter: Mamita Bora Thakkar
UNICEF, Delhi

States represented: Delhi, Madhya Pradesh, West Bengal, Maharashtra, Orissa
Outline of the presentation

• WASH in Schools in India-basic facts
• Adolescent girls in India- basic facts
• Knowledge and practices regarding MHM
• UNICEF’s approach to address MHM for girls
• State initiatives – Maharashtra, Madhya Pradesh, West Bengal
• Key learnings and way forward
Status of WASH in Schools in India: Key facts

**Total no. of schools - 13,62,324**

- **2005-06**: 83
- **2006-07**: 85
- **2007-08**: 87
- **2008-09**: 88
- **2009-10**: 93
- **2010-2011**: 93

**Percentage of schools with drinking water facility**

- **2005-06**: 83
- **2006-07**: 85
- **2007-08**: 87
- **2008-09**: 88
- **2009-10**: 93
- **2010-2011**: 93

**Total no. of girls & Co-ed schools - 13,42,843**

- **2005-06**: 37
- **2006-07**: 43
- **2007-08**: 51
- **2008-09**: 54
- **2009-10**: 60
- **2010-2011**: 60

**Percentage**

- **2005-06**: 37
- **2006-07**: 43
- **2007-08**: 51
- **2008-09**: 54
- **2009-10**: 60
- **2010-2011**: 60
WASH in Schools status contd...

**Percentage of schools with soap/detergent for handwashing**

- Yes: 88
- No: 12

**Issue of scale:** - **1.37 million** schools in India.

Approx. **6.5 million** children (3.46 % children of total enrolment) do not have access to drinking water in schools.

Approximately **28 million** children, accounting for 14.7% of total children enrolled do not have access to toilet facility in schools.
SITUATION ANALYSIS OF ADOLESCENT GIRLS*

- **Demographic profile:**
  - 225 million Adolescents – 47% girls

- **Health & Nutrition Status**
  - 56% of Adolescent Girls (AGs) are anemic
  - 47% undernourished with low BMI
  - 30% AGs give birth to first child
  - 41% maternal deaths take place in 15-24 yrs

- **Education and Socio-cultural indicators**
  - 21% of AGs no access to education
  - Drop out rate (I-X) : 57.29%
  - 50% of AGs marry before age of 18 years

*Source: Presentation made by Ministry of Women and Child Development, GOI, on SABLA.*
Knowledge and practices related to menstruation

**Awareness**
- Only 13% girls aware of menstruation before menarche
- 56% of girls - both in and out of school – did not have any information about menstruation before onset of menarche
- 66% girls knew “nothing” about menstruation prior to starting.

**Use of materials**
- 75% of girls did not have any idea about what material to use to absorb the flow; Majority of girls (75%) use cloth.
- 27% of girls out of school did not use any material at all
- 85% use cloth during menses, only 16% used SN.
- 89% of the respondents use cloth as absorbents, 2% respondents use pieces of cotton, 7% use sanitary napkin, 2% use ash.

**Hygiene and access to products**
- An assessment in Pali Block, CG revealed that none of the shops from 65 villages stock sanitary napkin or other protection products
- 41% of adolescents hide the cloth in the room, 22% hide it in the roof, 11% share the cloth with others.
In summary: poor adolescent hygiene management

Two broad reasons for poor menstrual hygiene among women in rural India (Lakshmi Murthi, 2001)

1. Cultural factors:
   - Taboo subject: not discussed, most girls not prepared thus frightened
   - Secret and shameful, associated with impurity and negative attitudes: lack of emotional and financial support.
   - Limitations in mobility: preventing from going to school
   - When experiencing problems – not seeking help

2. Economic – technical constraints:
   - No access to affordable hygienic materials/products (use of polyester, sand filled pads, nothing at all)
   - Changing of pads only once or twice a day
   - Facilities not adopted to the needs of girls and women
   - Poor access to private and hygienic sanitation facilities at school and home.
National Rural Health Mission:

- 150 million adolescent girls (10-19 yrs) in 152 districts to be reached with NRHM brand of sanitary napkins – Freedays- pack of 6 napkins @ Rs. 6
- Supply for 107 districts (1091 blocks) by M/s Hindustan Latex Limited (a private company)
- Women SHGs to supply sanitary napkin packs for 45 districts

SABLA programme of MWCD:

- Improve their nutrition and health status. (Iron and folic acid supplements, pre cooked meal)
- Upgrade their life skills, home-based skills and vocational skills
- Promote awareness about health, hygiene, nutrition, Adolescent Reproductive and Sexual Health (ARSH) and family and child care.
- Mainstream out of school AGs into formal/non formal education

*Government of India flagship programme*
UNICEF’S approach: Hygiene Improvement Framework

- Access to Facilities and Products
- Hygiene Promotion and Awareness

Adolescent Hygiene Improvement

- Infection Reduction
- School Attendance Improvement
- Increased Self Esteem and Confidence

Enabling Environments
3 core input areas

- Building capacities/support flagship programmes.
- Promote hygiene
- Outreach and mainstream
Country Office initiatives

**Enterprise development**
- Partnership with Women on Wings
- Sustainable business model – based on study of existing enterprises
- Training of women SHGs in sanitary napkin production, sales and marketing - to create economic opportunities.
- Training manuals and learning products.

**Hygiene promotion**
- Partnership with IKEA – hygiene and communication strategy.
- Formative research and base line surveys.
- Project area – 3 districts of UP

**MHM in Schools/Flagship programmes**
- Develop educational materials aimed at improving awareness.
- Support to SABLA for developing communication materials, integrating WASH messages.
- Advocacy for gender friendly WASH infrastructure in schools
State initiatives: Maharashtra

Promoting hygiene practices among adolescent girls in school through Meena Manch

MHM part of the SABLA Module

Orientation of Adolescent Girls Groups outside the school on MHM through SABLA

Theatre for Development on Adolescent Hygiene

Counselling and support for girls on menstrual hygiene as part of life skills package under Deepshikha
State initiatives: Maharashtra

Social Marketing of Sanitary Napkins by Girls’ Group

Locally made SN

BCC materials prepared

Convergence - very high on the desirable list

Orienting different government machineries on MHM and an integrated intervention on MHM

Initiating and facilitating district level action plans on MHM
State initiatives: Madhya Pradesh – Past Experience

- **MHM in Tribal Residential Schools** in 2 Districts (2008): Training on safe and hygienic menstrual hygiene management

- **Training manual** on sanitary napkin production has been developed.

- **Incinerators** for safe disposal of Sanitary napkins made part of Government’s new toilet Design;

- Tribal Welfare Department **allocated 180,000 USD** for MHM for tribal girls hostel in the year 2010, for capacity building and awareness programme in all the tribal residential schools.
State initiatives: Madhya Pradesh – Way Forward

• MHM integrated in SABLA - in 15 Districts of the State, benefitting 800,000 adolescent girls.

• Training module on SABLA has **exclusive section on MHM**

• 10 State-level Master Trainers, 241 District level Master Trainers, 1073 ICDS supervisors and 50,000 AWW and **“Adolescent Facilitators” (Sakhi-Saheli)** have been trained on MHM

• **Sanitary napkins production** by Women Self-Help Groups in 2 SABLA Districts

• **Supply chain** and marketing of the existing producers: demand creation, mapping of catchment areas of existing production centers

• **Expanding the reach** - technical support to Women Self-Help Groups for development and marketing of low cost sanitary napkins (2013-2015).
State initiatives: West Bengal

• **Capacity building** of selected leaders of women Self Help Groups (SHG) on MHM.

• **Quality Certification** of sanitary napkin.

• Development and adaption of **Communication materials** on MHM.

• Collaboration with School Education department for educating teachers and adolescent girls on MHM.

• School Education Dept. installed around 50 **incinerators** - to cover all 510 girls upper primary schools in the UNICEF supported district.

• **Napkin Vending Machines** have been installed on pilot basis in schools and Youth centers (21 institutions) - napkins are supplied by SHG led manufacturing unit.

• **Partnership** with HLL to enhance the capacity of SHG led production units and facilitate meeting the bulk demand for supply of quality sanitary napkin in 9 NRHM districts.
West Bengal: Way forward.

- Collaboration with National Rural Health Mission (NRHM), a national flagship programme, aims reaching 3.14 million adolescent girls (10-19 years)
- Collaboration with Civil Society Organizations for capacity building and production in two districts
- MHM facilitators team (1500 SHG members) formed and trained for raising awareness among school students in 12 districts
- Adolescent (including underprivileged) girls in KGBV schools have started procuring & using the sanitary napkin in integrated district through SHG network
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<th>Issue /status</th>
<th>Consequence</th>
<th>What this means for UNICEF</th>
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<td>No integrated/coherent approach to addressing the MHM by GoI or UNICEF</td>
<td>Many state governments simply don’t engage</td>
<td>Risk that if UNICEF doesn’t promote MHM, nobody will</td>
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<td>Rich data exists but it isn’t yet looked at through a sector-specific lens</td>
<td>Barrier analysis by UNICEF in different states isn’t yet providing an ‘overall’ story</td>
<td>Adolescent girls are now a PCR focus in the new India CP; urgent need for clarity re: MHM convergence</td>
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<td>Within UNICEF levels of engagement vary by section and state office</td>
<td>A framework for MHM is required</td>
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<td>Lack of equity for girls</td>
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<td>GoI priority is distribution of SN, not promotion MHM</td>
<td>Girls do not have balanced information about options for MHM</td>
<td>Advocacy role with GoI Continued need for advocacy aimed at girls; within ‘life-skills’</td>
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MHM- Opportunities to scale up in India through WASH in Schools

Holistic package

- **Hygiene and behaviour change** communication strategy. (IKEA UP project)
- **Hygiene Education** for girls about personal hygiene, especially how it relates to cleaning the body and reusable cloth during menstruation;
- **Social Support** mechanisms in schools to ensure that girls have someone to talk to about menstruation and other WASH-related issues (*eg. Adolescent groups in schools of Taminladyu*)
- **Communication materials** and approaches.

Advocacy for:

- **gender segregated** toilet and washing facilities in schools,
- **inclusion of incinerators** as a part of toilet designs,
- **sustained access** to water and consumables like soap.

Technical support to both the national flagship programmes-

- **expand the reach** to all schools,
- **improve access** to sanitary napkins,
- **strengthen the focus on adolescent hygiene** component in the programmes
Thank You