



Addressing the Menstrual Health & Hygiene

This editorial is based on [Menstrual health is a public health issue](#) which was published in The Hindu on 29/05/2023. It talks about the stigma around Menstrual health and hygiene, its effect on women.

Prelims: [NFSH-5](#), [Right of Women to Menstrual Leave and Free Access to Menstrual Health Products Bill](#), [anemia](#)

Mains: Menstrual health - Challenges, Consequences and Way Forward

In a recent incident, a man from a city in Maharashtra allegedly killed his 12-year-old sister because he mistook period stains on her clothes as a sign of a sexual relationship.

India is home to more than 350 million women and girls who menstruate every month. However, menstruation is still a taboo and a source of shame and discrimination for many of them.

In urban India, girls and women navigate a good part of their life in the public domain — a young working woman travels for hours by public transport, a teenager living in slums makes her way to school through narrow lanes, a sanitation worker begins her day before dawn cleaning the city, a vegetable vendor spends hours by her stall, and a nurse works busy 12-hour shifts. Their lives are very different, but they all navigate public spaces on a daily basis while dealing with a private aspect of their lives: their periods.

Periods are normal, but continue to be shrouded by shame, stigma and discrimination. Consequently, people face barriers in getting accurate information about periods and related products, using toilets, and seeking help when needed.

[Menstrual health](#) is not only a matter of personal hygiene, but also a public health issue that requires urgent attention and action from governments, civil society and individuals.

How grave is the Issue of Menstrual Health and Hygiene in India?

- According to the [National Family Health Survey \(NFHS-5\)](#), even though there has been significant progress in the past years, approximately 27% of young rural women still resort to unsanitary means of protection during their menstrual cycle.
- Among the urban population, 10% of young women reported using unhygienic methods.
- As per the report, 16 states and union territories (UTs) have a usage rate of over 90% for hygienic menstrual products. Nevertheless, some of the most impoverished states in India have a poor record in this regard. Bihar has the lowest usage rate (59%) of safe menstrual protection, followed by Madhya Pradesh (61%) and Meghalaya (65%).

What are the Consequences of Poor Menstrual Hygiene?

- **Health:** Poor menstrual health can lead to infections, irritation, dermatitis, alteration in pH balance, and increased risk of cervical cancer. It can also affect mental health by causing stress, anxiety, and low self-esteem due to stigma and shame.
- **Education:** Poor menstrual health can affect school attendance, performance, and retention of girls and [transgender](#) students due to lack of facilities, products, information, and support. It can also create barriers to participation in sports and extracurricular activities.
- **Marriage:** Poor menstrual health can affect the sexual and reproductive health and rights of women, girl students drop out of school, are pushed into [child marriage](#), and are more like to experience [domestic violence](#), infections, reproductive illnesses, [malnourishment](#), and poor mental health.
- **Work:** Poor menstrual health can affect the productivity, income, and career opportunities of women and transgender workers due to absenteeism, discomfort, discrimination, and harassment. It can also limit their access to decent work and social protection.

What are the Barriers for Menstrual Hygiene?

- **Period Poverty:** Lack of awareness about menstrual hygiene and related issues is a significant barrier in India. Many girls and women, particularly in rural areas, have limited knowledge about menstrual health, including proper hygiene practices, use of sanitary products, and management of menstrual discomfort.
 - A survey conducted by the NGO Child Rights and You (CRY) revealed that access to sanitary pads was limited to many girls, with 44.5% of girls admitting to using homemade absorbents or cloth.
 - The report also found that around 11.3% of the girls did not know the correct cause of menstruation and said that it was a curse from God or caused by disease.
- **Stigma and Shame:** Menstruation is still surrounded by social stigma and cultural taboos in many parts of India. Menstruating women often face discrimination, restrictions, and isolation, leading to feelings of shame and embarrassment. This stigma can prevent open discussions, limit access to information and resources, and perpetuate negative attitudes towards menstrual hygiene.
 - The CRY report also found that Hesitation or shyness to purchase pads from the shops, difficulty in disposing of pads, poor availability and no knowledge of pads were the reasons for not using sanitary pads.
 - As much as 61.4% of girls have accepted that a sense of embarrassment existed in society with regard to periods.
- **Lack of Access to Affordable Sanitary Products:** Access to affordable and hygienic menstrual products is a major challenge in India. Many women, especially those from low-income backgrounds, struggle to afford sanitary pads or tampons. This can result in the use of unhygienic alternatives like cloth, rags, or even ash, which can increase the risk of infections and other health issues.
- **Inadequate Sanitation Facilities:** In many areas, the lack of proper sanitation facilities, including clean toilets and water supply, poses a significant barrier to menstrual hygiene. Insufficient infrastructure in schools, public places, and households can make it difficult for women and girls to manage their periods safely and with dignity.
 - Women in informal work (e.g., construction work, domestic work etc.) often have no access to washrooms, clean water for bathing, and to cost-effective hygiene products and their safe disposal. Often, they also lack privacy to change their menstrual products.
- **Limited Healthcare Services:** Rural areas often face a shortage of healthcare providers, including doctors, nurses, and midwives, who are specifically trained in addressing menstrual health issues. This shortage further hampers women's access to knowledgeable healthcare professionals. This lack of healthcare infrastructure also contributes to the persistence of myths and misconceptions about menstruation.
- **Cultural and Religious Practices:** Certain cultural and religious beliefs and practices can impede menstrual hygiene. For example, some communities consider menstruating women as impure and restrict their participation in religious activities or social gatherings. Such practices can further reinforce stigma and hinder proper menstrual hygiene practices.
 - In Maharashtra, a study found that the practice of segregating menstruating girls and women to 'kurmaghars', or "period huts", with no sanitation and other basic facilities poses a significant barrier to conducive sexual and reproductive health outcomes among females.
- **Lack of Policy Measures:** The 2022 [Right of Women to Menstrual Leave and Free Access](#)

[to Menstrual Health Products Bill](#) specified three days of paid leave for women and transwomen during their periods, and additional benefits for students is yet to become act. Only two states, Kerala and Bihar, currently have menstrual leave policies for women.

What Needs to be Done?

- **An Inclusive Approach:** It must also cater to the menstrual needs of the differently abled, trans-male/female, and people with other gender identities who menstruate. Gender-nonconforming persons face safety problems and a lack of menstrual supplies. We need to urgently understand their unique needs as well.
- **Improve the quality of Sanitary Products:** Despite being cheap and affordable, officials have also noted quality issues in sanitary napkins distributed under various government schemes.
- **Promote better Alternatives:** Menstrual cups are a cheap, sustainable, and eco-friendly alternative to sanitary napkins, but they are still treated with scepticism.
- **Telemedicine and teleconsultation services:** Utilizing telemedicine platforms can provide remote access to healthcare professionals specialized in menstrual health. Through video consultations, women and girls in remote areas can receive personalized guidance, support, and expert advice on menstrual hygiene, ensuring that accurate information is easily accessible regardless of geographical constraints.
- **Community-based peer education programs:** Engaging local communities through innovative peer education programs can help break the silence and stigma surrounding menstruation. These programs can train and empower women and girls to become menstrual hygiene ambassadors.
- **Robust Waste Disposal:** Safe disposal of sanitary napkins and the associated difficulties and misconceptions.
 - [IoT technology](#) can be employed to develop smart toilets equipped with sensors for detecting menstrual waste and automatically initiating proper disposal mechanisms.
- **Constructing Smart Toilets:** These toilets can provide real-time feedback on hygiene practices, monitor supply levels of menstrual products, and send alerts for maintenance and restocking.
- **Raise Awareness:** Awareness must be raised among women through Initiatives like the use of mobile applications, interactive websites, and voice-based information systems to provide easily accessible and culturally appropriate information on menstrual health and hygiene.
 - [Augmented Reality \(AR\) and Virtual Reality \(VR\)](#) technologies can create immersive and interactive learning experiences for menstrual health education.
 - Virtual simulations and scenarios can be used to teach proper hygiene practices, demonstrate the biological processes involved, and address myths and misconceptions.
- **Policy Measures:** Policies like Reduction of tax, setting standards for sanitary products and creation of female friendly infrastructure should be implemented. Also, the 'Right of Women to Menstrual Leave and Free Access to Menstrual Health Products Bill should be made a law and implemented in Letter and Spirit.

Conclusion

Inadequate menstrual hygiene can harm women and girls physically, mentally, and socially, causing infections, [anemia](#), infertility, school dropout, violence, and discrimination. It is not just a personal hygiene matter but a public health concern demanding immediate action from governments, civil society, and individuals. To overcome these challenges, we need a comprehensive strategy involving education, awareness campaigns, policy reforms, infrastructure enhancements, and better healthcare services. By destigmatizing menstruation, ensuring affordable sanitary products, and providing comprehensive menstrual health education, we can enhance menstrual hygiene in India.

Drishti Mains Question:

Examine the barriers and challenges faced by women in accessing adequate menstrual health care and propose measures to ensure inclusive and comprehensive menstrual health management.

UPSC Civil Services Examination, Previous Year Question (PYQ)

Mains

Q. What are the continued challenges for women in India against time and space? (2019)

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