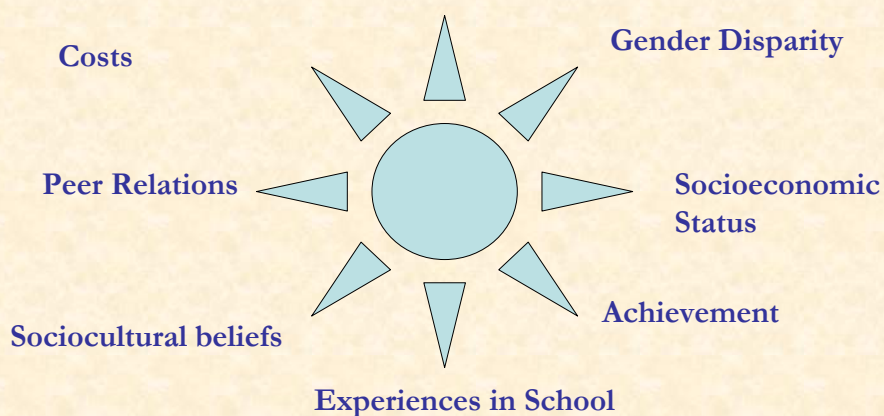


Women's Issues & Water, Sanitation & Hygiene Education for Schools:

Menstrual Hygiene & Management



Why Girls do not stay or learn in school




The complexity of girls poverty or lack of soap leads to sexual risk behaviour, i.e. selling sex or massive girl dropout from school at puberty. Without soap a girl stinks and boys mock. Her rags (for sanitary towels) are recycled yet inadequately washed due to lack of soap. If she attends school, there are no girl-friendly sanitation facilities at school: no privacy, no water for washing hands.”

Evaluation report for the Government of the Netherlands UNICEF Malawi

Formal education is not accommodating to menstruating girls. The prospect of sitting for long periods of time, staining their clothes with blood and being noticed & teased by boys makes adolescent girls feel anxious & uneasy. Their psychological discomfort is compounded by physical symptoms such as headaches & fatigue, which may be aggravated by malnutrition and contribute to poor school performance & absenteeism

Red Nacional de Promoción de la Mujer & World Education



“When sanitation-related diseases make other family members sick, girls are often kept at home to help out. Long or frequent absences cause girls to fall behind & contribute to higher dropout rates. Girls’ attendance also suffers, especially once menstruation begins, in schools that fail to respond to their greater need for privacy by providing safe separate sanitation facilities.”

25th January, 2005 Junction Social *FRESH*

MHM: Taking Stock

- No articulation of issue
- Poor articulation on MHM in:
 - Reproductive Health Issues
 - Girls Education
 - Literature on gender mainstreaming in WatSan
 - Infrastructure design
 - Waste Management Training, Design
- Focus on software aspects of Hygiene promotion
- Minimal effort in production and social marketing
- Absent from discourse on environmental sanitation
- Experiences poorly documented

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MHM- what we understand by it

1. Health and Hygiene issue
2. Management issue
3. Rights Issue



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Health and Hygiene issue

Health

- **Physiological**
 - » Dysmenorrhea
 - » Pre-menstrual Syndrome
 - » Increased susceptibility to anaemia
- **Psychological**
 - » Stress
 - » Vulnerability



Hygiene

- **Facilities + awareness**

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Management issue

- **Hygienic products**
 - Availability
 - Affordability
 - Environmentally friendly
- **Linked sanitation facilities**
 - Washing and Drying Spaces
 - Safe Disposal Facilities
- **Community involvement**
 - Articulation, Recognition
 - Awareness



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Initiatives

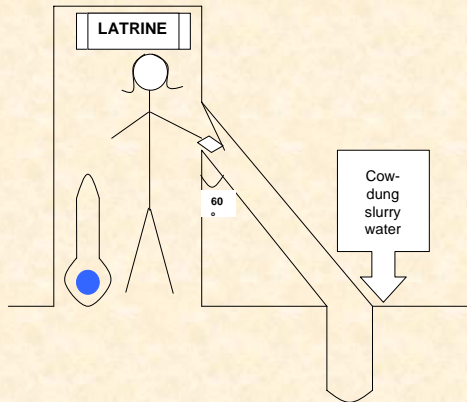
- **Uganda:** *“FAWE, Uganda conducted a campaign to dispel the silence around sexual maturation and to advocate for affordable sanitary towels to be available at the local market. Lawmakers want the government to buy sanitary towels for female pupils in primary schools.”*
- **Kenya:** *“Girls are staying on longer in school in Kisumu District in Western Kenya, after a sustained set of activities around hygiene (including menstrual issues) and sanitation. The schools have become more 'girl-friendly', have created a culture in which boys in School Health Clubs share the duties of cleaning latrines, sweeping classrooms and compounds and providing water to the latrines. The girls at the schools after the interventions said they were managing menstruation more easily and were more committed to remaining in school because new school latrines had been built.”*
- **Bangladesh:** *BRAC has a network of production centres wherein young women produce low cost sanitary towels which are distributed by BRAC health workers within the community.*

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Disposal option: cloth



“A steep 60° chute made from a 6” PVC pipe, which leads from a hole in the cubicle wall to a simple unlined pit in the ground outside, separate from the septic tank and covered with a stone slab. Menstrual cloths can be dropped down this chute, and a mug of cow-dung-slurry water, once a week aids decomposition of all the organic waste and controls smell.

Almitra Patel, Bangalore

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Composting menstrual waste



“We constructed two concrete bins 3ft in length, 3ft in height and 2ft wide against our compound wall. We prepared a bed of coconut fibre, vegetable peels and Dr. Bhawalkar's Sujala powder. After 20 days we began adding sanitary napkins, placentae and dressing materials from the hospital. To date the system has converted 9000 sanitary napkins, 850 placentae and dressing materials from approx. 700 surgeries to a powdery mud like material. This has been approx. 300 Kgs. **Over the last 3 years we have not used the municipal bin. The volume reduction has been remarkable. Waste occupying four bins of 50 cu.ft dimension was converted to half a kilo of mud-like material. The BIOREACTOR has worked silently without making its presence felt- there is no smell, ;It does not attract flies. The end result is rich manure.** “Dr. Ganla

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Rights Issue

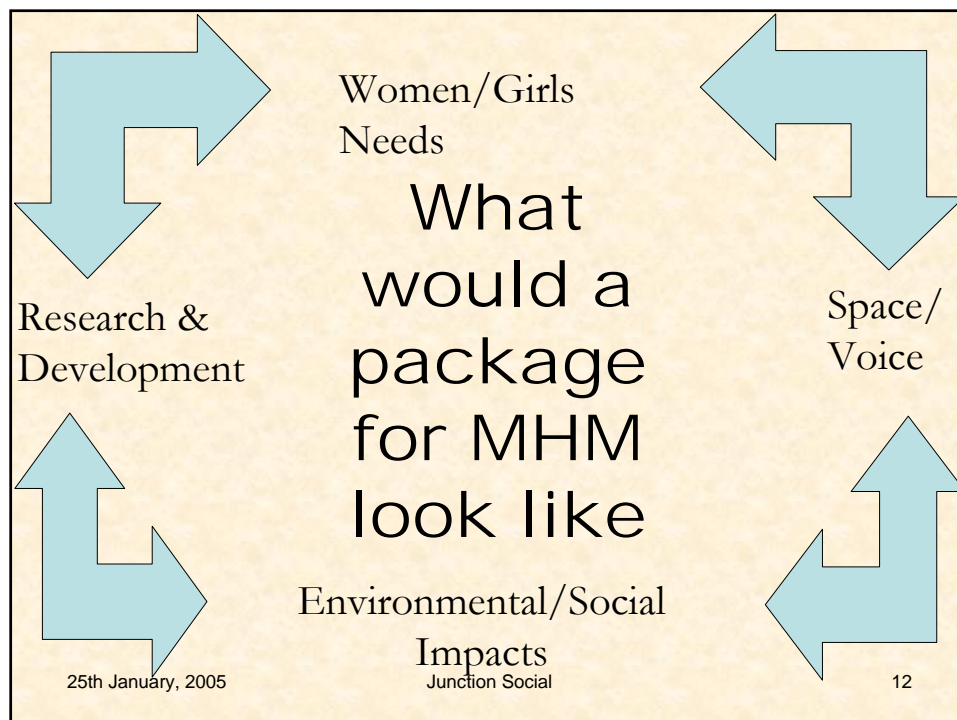
- Human dignity
- Gender issue
 - Privacy, safety
 - Mobility
 - School, Work days
- Essential component of the right to water and sanitation



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Call for Action

- **MHM is part and parcel of Environmental Sanitation**
- **MHM is an essential component of**
 - **School, Household, community, institutional sanitation**
 - **Solid Waste Management**
 - **Hospital sanitation**
 - **Hygiene promotion efforts**
- **MHM is reflected in budgets**
- **Indicator in M&E systems**



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