

Status of Menstrual Hygiene Management among Adolescent Girls in Nepal

Brief description of study

A survey on Status of Menstrual Hygiene Management among Adolescent Girls in Nepal was conducted in all seven provinces of Nepal. The survey assessed knowledge, attitude and practice and psychosocial well-being of adolescent girls (10-19 years) in menstrual hygiene management. The study also explored the experiences of differently abled adolescent girls with regard to menstruation. Field work and data collection was conducted in Oct-Dec 2019.

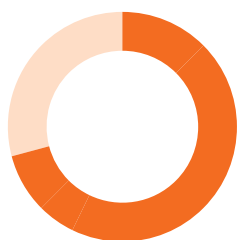
Methods

Cross sectional study, using both quantitative and qualitative methods, was conducted for comprehensive results. Total sample size was calculated using an estimation of 30% adolescents with allowable error of 5% and z value of 1.96. The sample size was 525 in each province and with a non-response rate of 2.1%, the total sample size in this study was 3,495. The study also conducted 12 FGDs among out-of-school girls and 14 in depth interviews with differently abled girls. Adopted version of MR-SSS (menstrual related stress and self-efficacy) tool was used to assess the knowledge, attitude and practice and psychosocial well-being of adolescent girls. All participants were interviewed after obtaining informed consent. Ethical approval for this study was obtained from Nepal Health Research Council.

Key Findings

KNOWLEDGE AND PERCEPTION

01



71.7%



OF ADOLESCENT GIRLS KNEW ABOUT MENSTRUATION **BEFORE** MENARCHE



SUDURPASCHIM

PROVINCE WITH LEAST KNOWLEDGE (47.4%)

02



50%



OF THE ADOLESCENT GIRLS HAD NO IDEA ABOUT THE **PHYSIOLOGY OF MENSTRUATION AND PREGNANCY.**



My mother came to know on her own and asked me, still I felt uncomfortable telling her. I shared it with her only on my second menstruation cycle.

- Adolescent girl,
Sankhuwasabha, Province I

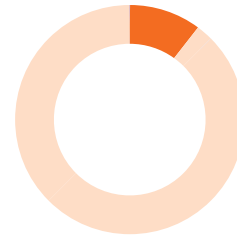
03



59.2%



MORE THAN HALF OF ADOLESCENT GIRLS KNEW CHAUPADI IS **ILLEGAL**



10%



SAID IT IS **LEGAL** AND REST DID NOT KNOW

04



MOTHERS WERE THE PRIMARY SOURCE OF INFORMATION AS WELL AS PROVIDING GUIDANCE AT FIRST MENSTRUATION, FOLLOWED BY ELDER SISTERS

05



ADOLESCENT GIRLS FELT MOST COMFORTABLE TALKING ABOUT MENSTRUATION WITH **MOTHERS, FRIENDS** AND **ELDER SISTER**.

06

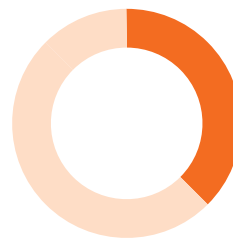


36%



REPORTED **FEELING SCARED** FIRST MENSTRUATION

07



38.4%

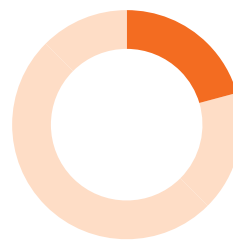


ADOLESCENT GIRLS HAD TALKED OR DONE ANYTHING AGAINST RESTRICTIONS AT **HOME**

08



IF THERE WERE NO RESTRICTIONS, ADOLESCENT GIRLS PREFERRED MOST TO **TAKE BATH, EAT DAIRY PRODUCTS** AND **SLEEP IN THE SAME BED AS BEFORE** WHILE THEY LEAST PREFERRED TO **ENGAGE IN RELIGIOUS ACTIVITIES**.



21.2%



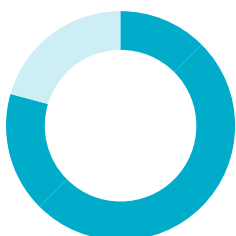
ADOLESCENT GIRLS HAD TALKED OR DONE ANYTHING AGAINST RESTRICTIONS AT **COMMUNITY**

PRACTICES

Menstrual hygiene management practices

01

Restrictions during menstruation



79.1%



WITH REGARD TO **RELIGIOUS ACTIVITIES**



51.9% IN HOUSEHOLD CHORES
46.1% IN SOCIAL ACTIVITIES
36.95% IN PERSONAL ACTIVITIES

02



51.2% 
 OF ALL GIRLS USED DISPOSABLE SANITARY PADS

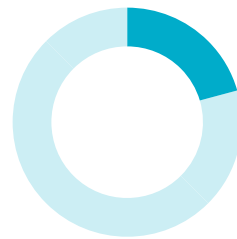



37.7% 
 OF ALL GIRLS USED REUSABLE SANITARY PADS

03



65% 
 OF ADOLESCENT GIRLS WERE HAPPY WITH THE MATERIAL



20.9% 
 SAID THEY WOULD PREFER A DIFFERENT MATERIAL

04

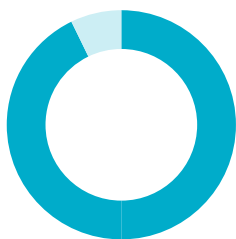



42.6% 
 OF THE GIRLS CHANGED PADS 3 OR MORE TIMES A DAY

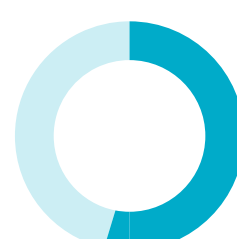
39.7% OF GIRLS CHANGED TWICE A DAY


11.9% OF GIRLS CHANGED ONCE A DAY

05



92.9% 
 WERE ABLE TO CHANGE SANITARY MATERIALS AS OFTEN AS NECESSARY AT HOME



55.2% 
 WERE ABLE TO CHANGE SANITARY MATERIALS AT SCHOOL AND THE REASONS CITED WERE: UNAVAILABILITY OF DISPOSAL PLACES, UNAVAILABILITY OF PRIVATE SPACE, AND EMBARRASSMENT WERE CITED AS THE MAJOR REASONS.



"(Sad face) we can't be involved in Bhai-Tika, which only happens once a year. I feel very disappointed. I feel like crying. My mother scolds me saying why I have to have my period during festivals. She wishes to send me off to another house by marrying early therefore she doesn't have to deal with it. That makes me feel bad and it hurts."

- Out-of-school adolescent girl, Jajarkot, Karnali Province



If my clothes get wet, I put it in my pocket and bring it home. I also wear it until it is worn out or if it's no longer in use, I burn it too or some time I throw it in the river.

- Adolescent girl, Jajarkot, Karnali Province

06

46.6%



GIRLS HAD ACCESS TO **TOILETS** FOR CLEANING PURPOSE

37.7%



WENT TO **WELL/TAPS**

15.6%



WENT TO **RIVER/PONDS**

93.7%



HAD ACCESS TO **SOAP** FOR WASHING AND IT WAS ALMOST THE SIMILAR ACROSS ALL PROVINCES

92%



WASHED AND DRIED SANITARY MATERIALS IN **SUNLIGHT** BUT AWAY FROM OTHERS VIEW

54.1%



OF THE GIRLS TOOK A **BATH DAILY**

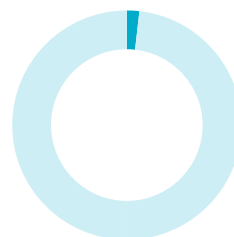
07



60.5%



GIRLS COULD EASILY ACCESS WASHING PLACE (<15 MINS)

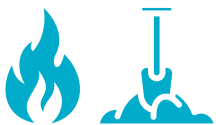


1.8%



HAD TO WALK **MORE THAN ONE HOUR**

08



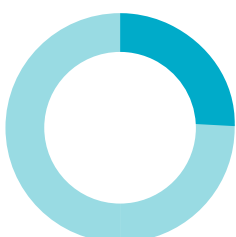
DISPOSAL MECHANISM OF USED SANITARY MATERIALS WAS **BURYING AND BURNING**

09



PLACE FOR CHANGING SANITARY MATERIALS WERE **TOILETS** FOLLOWED BY **BED ROOM**. MAJORITY OF GIRLS STATED THAT THE PLACE FOR CHANGING ARE **CLEAN, PRIVATE AND SAFE**.

10



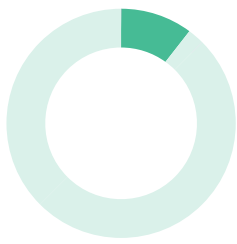
26.7%



GIRLS MISSED **SCHOOL** IN THE LAST 12 MONTHS WITH **DYSMENORRHEA** BEING THE HIGHEST REASON

Practices around Chaupadi

01



8.7%



OF ADOLESCENT GIRLS PRACTICE CHAUPADI

0.9% IN PROVINCE 5

20.5% IN KARNALI

47.7% IN SUDURPASCHIM

02



THE MAJOR REASON TO FOLLOW CHAUPADI WAS FAMILY DECISION

03



FAMILY MEMBERS WHO COMPEL ADOLESCENT GIRLS FOR CHAUPADI IS MOTHERS FOLLOWED BY GRANDPARENTS AND FATHERS



Staying and sleeping alone at night in a livestock shed is fearful and frightening. Family members can't even find if anything happens to us when we menstruate and it is a major problem."

- Out of School, Adolescent Girls, Achham, Sudurpaschim Province

04



75%



OF GIRLS SAID CHAUPADI IS BAD

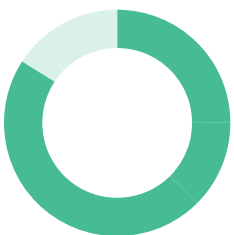


10%



FELT SACRED AND ANXIOUS ABOUT THE PROCESS

05



83.9%



OF ADOLESCENT GIRLS THINK CHAUPADI SHOULD NOT BE PRACTICED



22.5%

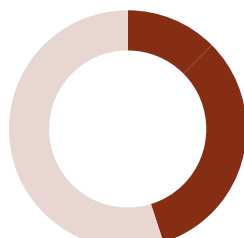


OF ADOLESCENT GIRLS FROM SUDURPASCHIM THINK THIS SHOULD BE CONTINUED

PSYCHOSOCIAL IMPACT

01

Secrecy and shame scale



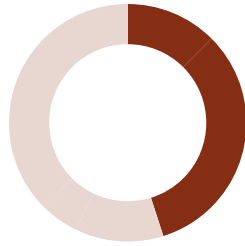
45.2%



OF THE GIRLS RELATED MENSTRUATION TO HIGH SECRECY AND SHAME

02

Annoyance scale



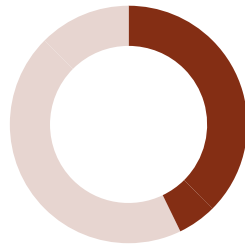
45.4%



OF THE GIRLS EXPERIENCED HIGH LEVELS OF ANNOYANCE

03

Menstrual stress scale



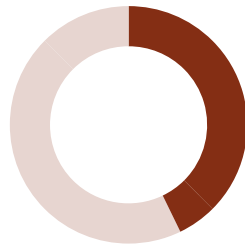
42.5%



OF THE GIRLS EXPERIENCED HIGH MENSTRUAL STRESS

04

Menstrual self-efficacy scale



42%



OF THE GIRLS EXPERIENCED LOW SELF-EFFICACY

MENSTRUATION FROM DIFFERENTLY ABLED PERSPECTIVE

Experiences of differently-abled girls varied with the nature of their impairment. Major challenges were



NOT HAVING ACCESS TO **DISPOSABLE SANITARY MATERIALS**



DIFFICULTIES IN **DISPOSAL MECHANISMS**



RELIANCE ON IMMEDIATE **FEMALE FAMILY MEMBERS** FOR CHANGING SANITARY MATERIAL



RELIANCE ON **FEMALE FAMILY MEMBER** TO OBLIGE *CHAUPADI*



ABSENCE OF **DISABLE FRIENDLY WASH FACILITIES** OUTSIDE HOME RESULTING IN THEM STAYING HOME DURING MENSTRUATION



At home, my mother used to wash the used cloth, but in my hostel, I used to wash it with my feet. It is difficult for me. I feel it is difficult to wear a piece of cloth, wash and dry them. There must be a pad. I wish I could use pads so that I don't have to wash clothes.

- Differently-abled Adolescent Girl, Rukum, Karnali Province

I think the distribution of free pads and the availability of disabled-friendly toilets will be helpful.

- Adolescent girl with paraplegia, Kanchanpur, Sudurpaschim Province)

General needs of differently abled adolescent girls were to have access to disposable sanitary materials, disable friendly disposal mechanisms, disable friendly WASH facilities in school, distribution of free pads from government and care and support both at home and school



We have to dwell at chhaupadi hut, Because of my visual impaired during night my sister sleep with me in chhaupadi hut but it is difficult during summer days due to presence of the mosquito so, we light a fire for emitting smoke and sleep.

- Visually impaired adolescent girl, Bajura, Sudurpaschim Province

Conclusion

- Adolescent girls' knowledge around menstruation is inadequate as one quarter are unaware about menstruation before menarche and one half are unaware of the link between menstruation and pregnancy. This may have direct implications on the level of reproductive health knowledge among adolescent girls and subsequent reproductive health programs.
- Adolescent girls continue to face restrictions during menstruation ranging from restrictions in religious activities, issues of touchability to food consumption. Mothers are the primary source of information and guide for menstrual management as well as major bearers to continue restrictions during menstruation.
- Chaupadi continues to be practiced in three of seven provinces with Sudurpaschim practicing most. Three fourth of adolescent girls know chaupadi is bad but cultural practice is deep rooted.
- Menstruation management among adolescent girls were found to be good: majority had access to disposable sanitary materials, half of the girls were able to change pads thrice or more per day, more than 90% had access to soap for washing and was able to dry menstrual materials, majority had a safe and private place to change. However, home was more comfortable place for menstruation management compared to schools.
- One quarter of girls missed school due to menstruation related issues.
- Menstrual needs of differently abled adolescent girls is largely neglected. Their needs are related to availability of menstrual material and disable friendly WASH beyond home. Their needs are largely fulfilled within household only.
- Majority of girls felt sacred during their first menstruation. Almost half of the girls experienced high menstrual stress, high annoyance and low self-efficacy.

Recommendation

- School education and MHM programs should focus on educating adolescents about physiology of menstruation and the linkage to reproductive health.
- Restriction around menstruation is deep rooted and therefore should engage primary bearers and influencers including mothers and grandparents to change malpractices including chaupadi.
- Schools need to ensure an enabling environment for menstruation management including; access to gender friendly toilets, access to water and soap, access to menstrual materials, proper disposal mechanisms and pain management in order to reduce absenteeism.
- Menstrual needs of differently abled girls should be addressed at all levels including household, community, public places and schools.
- Given the high levels of menstrual stress, support mechanisms should be provided to adolescent girls at community and schools.

