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THE FUTURE OF WATER, SANITATION AND HYGIENE: INNOVATION, ADAPTATION AND ENGAGEMENT IN A CHANGING WORLD

# Schoolgirls' experiences of managing menstrual hygiene in Uganda

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A Knowledge, Attitudes and Practice (KAP) Survey was conducted among 134 secondary schoolgirls in Uganda about their experiences of managing menstrual hygiene in school. The first part of this paper outlines how sensitive information was obtained by using participatory tools in small focus group settings. The second section summarises qualitative and quantitative findings about schoolgirls' knowledge of biological facts and management methods, their attitudes about menstruation formed through their social and cultural environments, and their hygiene practices associated with accessing, changing, drying and disposing of sanitary products. The purpose of the study was to voice schoolgirls' opinions about very real, but rarely addressed, monthly challenges.

# Introduction

Menstrual Hygiene Management (MHM) is a relatively new research topic in the WASH sector that focuses on practical strategies for coping with monthly periods. This study adds to a small, but growing body of literature about the ordinary experiences of menstruating women in low-income countries. It was conducted as part of a research project for a Masters degree at WEDC (Crofts, 2010).

# Methodology

A total of 134 schoolgirls aged between 13 and 20 took part in 40 focus group sessions in 18 schools. These were located in five districts in southern Uganda predominantly inhabited by the Buganda tribe. Such participatory action research enabled two-way learning: the researcher could understand the needs of schoolgirls and the schoolgirls could have opportunities to hear and challenge one another's menstrual knowledge and hygiene behaviours. Table 1 overleaf summarises the six activities undertaken.

# Findings

The most frequently cited menstrual problem was feeling unwell, with stomach cramps a significant concern. Difficulties were also attributed to back pain, loss of appetite and general lethargy. Almost half the groups ranked stomach pain as the top menstrual-related obstacle to schooling. Other top ranked problems were the high cost of sanitary pads and fear of blood leaking. A lack of water was selected by one group but no group mentioned poor sanitary facilities to be their major concern. The findings suggest that menstrual-related school interventions that typically prioritise improving sanitation facilities and water supplies may not be congruous with what schoolgirls consider to be their greatest needs.

## Knowledge

## **Biological understanding**

Only two groups of girls correctly classified and explained 11 menstruation facts (Activity 1). This suggests that basic biology is not being communicated clearly. When groups were compared by school location (remote, average or non-remote depending on distance from a tarmaced road), girls from remote schools performed worse, implying a correlation between knowledge dissemination and infrastructure. Schoolgirls'

Table 1.			
	Activity	Description	Purpose for researcher
1.	Three pile sorting	Participants were given 11 statement cards to group as "true", "false" and "neither/ unsure".	To assess knowledge about menstruation facts, misconceptions or myths
2.	Prioritising problems	Menstrual-related problems were written on pieces of card and ranked in a ladder formation.	To learn about the biggest challenges for schoolgirls when managing menstruation
3.	Identifying solutions	Highest ranked problems were used as a discussion starter about solutions/ improvements	To determine girls' coping strategies and ability to solve their own problems
4.	Questionnaires	Semi-structured questionnaires generated conversations about hygiene behaviour.	To gain insight into hygiene practices and the use of sanitary products.
5.	Importance pyramids	Six out of 13 flashcards with names of family/ community members were placed on a pyramid chart representing importance: the key person at the top, two on the second level (important people), three on the third (significant people).	To ascertain the main sources of information about bodily changes at puberty and compare these with people identified as those to whom the girls turn for advice.
6.	Scenario: Presidential decisions	Imagining they were president of Uganda, participants devised a policy to help schoolgirls better manage their monthly periods	To hear schoolgirls' opinions of macro-scale needs and evaluate their solutions to governance challenges

misconceptions were about anatomical details and the effects of menstruation on daily life. Much confusion stemmed from their inability to distinguish between biological facts and traditional myths. A third of focus group participants were unaware that menstrual cramps were normal; many thought they were symptomatic of a serious illness. This could be the reason why pain was the most significant menstrual-related problem.

#### Sources of information

Most schoolgirls (88%) learned the biological facts of menstruation from their mothers, female relatives and friends. With many unschooled mothers in Uganda, the quality of this information is questionable. Only 33% of schoolgirls stated school-related sources (teachers, books and leaflets) as their primary information source. Information, education and communication (IEC) materials (such as posters and booklets) were severely lacking. Even though radio and newspapers were popular, only one schoolgirl reported receiving information about MHM this way.

## Awareness of sanitary products

All girls knew that cloth and toilet paper were used as sanitary protection materials. The product of choice was western-produced disposable pads, referred to as "Always" – the most common brand. Knowledge about low-cost products such as Makapads (disposable pads made from papyrus reeds) and Afripads (washable pads made from sewn fabric) was localised depending on outreach by the manufacturers or distribution by NGOs. Only one student had heard about tampons and other insertion products were unknown. Sanitary products are advertised in Kampala, but this is still uncommon.

## Attitudes

## Confidence and dignity

Schoolgirls' confidence correlated with the likelihood of leaks from sanitary materials. The better the perception of a material's absorption properties, the more the girls felt they could effectively manage their monthly periods, although perceived and actual absorbency did not always correlate. Social and psychological obstacles reinforced negative attitudes towards menstruation. The topic of menstrual hygiene was taboo. Some girls found it hard to trust one another, fearing they would be teased by other students. For many, menstruation was a very personal matter about which it was culturally inappropriate to seek advice.

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### Advisors

A third of schoolgirls relied upon teachers for information about menstruation, but hardly any of them asked teachers for advice on the practical management of menstrual hygiene. A common reason for this was that authority figures were seen to be harsh, rather than compassionate, making it too difficult to disclose personal problems. Instead, 3 out of 4 girls turned first to a female family member for advice, and then their peers. Very few girls felt comfortable talking to men about MHM issues, even family members. The lack of advisors was particularly problematic in boarding schools with only male teachers and for refugee or orphaned schoolgirls. They would rely upon formal sources of counseling by health professionals or NGOs.

#### Cultural myths

At best, periods were regarded as occurrences that had to be endured. At worst they were feared owing to the pain, embarrassment and disruption to daily life. This was not aided by the Bugandan myth that menstrual blood could be used to curse. Typically, aunties (the sister of a girl's father) would demand the first menstrual cloth from their nieces and keep it for bribery throughout the young adult's life. With this, a witchdoctor could pronounce infertility, long periods or painful childbirth over them. Older women and school matrons often kept up this myth in order to train the girls to be discrete about menstrual hygiene.

A girl's first period is culturally significant for the Buganda tribe and signifies a girl is of marriageable age. It may provoke a father to covet bride wealth. 65% of girls had undertaken some form of ritual at menarche. Typically, the girl was isolated indoors for four days, refraining from housework, and kept away from male relatives. Some girls were told that the 'punishment' for non-compliance with this would be reproductive difficulties in later life. Boarding school students were less likely to observe such rituals. There was also evidence of a class divide, with those perceiving themselves to be "more educated" and "modern" describing such rituals to be for those "traditional people" dwelling "in the bush".

## Practice

## Product availability and affordability

Typically schoolgirls used a combination of sanitary products depending on the stage of their cycle, the family cashflow and access to available supplies. It was common for girls to use home-made pads (wads of toilet tissue or folded cloth) at the beginning and end of their period, but more absorbent disposable pads during heavier flow days. Although Always were preferred, they were expensive due to importation. Costing on average US\$ 1.36 for 10 pads, they were a luxury product or for use when the utmost discretion was required (e.g. during formal church services). Most trading centre stores stocked Always, but even girls who could afford them could not always get to these stores, due to their remoteness or the lack of fares.

#### Keeping clean

87% of schoolgirls bathed at least once a day in outside brick bathrooms. 59% of bathing places had no roof and 49% no door. This lack of privacy did not seem to trouble the girls. Only 20% said their facilities were inadequate or very inadequate. The reason for this was not established, although it might be due to their low expectations and/or having developed coping strategies (e.g. washing when it is dark).

Some day scholars could not wash themselves as they had no access to bathing facilities, either because there were none or because facilities were for boarders only. Where day scholars could use the facilities, most did not for fear that people would know they were menstruating. Instead they used the latrines or overpadded themselves and waited for the end of the school day.

#### Changing pads

Sanitary protection was usually changed at least once a day in school, although a few girls avoided changing due to poor hygiene in the changing facilities and/or a lack of privacy. Combining home and school data from 41 students, 54% used latrines to change, 27% changed in their dormitory or bedroom and 19% in the bathing places. 43% of girls did not feel they had enough privacy to change at school, compared to 13% at home. Doors and locks on public facilities were said to be the most significant ways to improve privacy.

#### Washing and drying sanitary wear

No day scholar was found to clean her pads/cloths at school, due to lack of appropriate places to do so. 95% of all girls washed pads/cloths in the bathroom, usually whilst bathing. The rest washed them in a basin in their dormitory or bedroom. No-one admitted to washing menstrual materials in public places.

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The predominant drying method for reusable sanitary pads/cloths was to use covered pant pegs indoors, to avoid public display. Less than 3% of girls said that cloths were exposed to direct sunlight during drying, thus the bacteria-killing properties of UV light were rarely exploited. Indoor drying practices meant that materials could become malodorous and took longer to dry. Hence, one in seven girls reported sometimes having to reuse materials that were still damp.

#### **Product** disposal

At home, all girls disposed of pads or materials in pit latrines. At school the figure was 65%. Other disposal points were buckets by squatting holes, incinerators or rubbish heaps. Five of the 18 schools had designated burning structures for sanitary wear, although they were not well used. Reasons for this were: a lack of established management systems to transfer pads from buckets in the latrine block to the burning sites; and girls were embarrassed to carry small rubbish bundles as the reason would be obvious. Girls feared sexual advances from male teachers or students if attention was drawn to their physical maturity.

Disposal of such materials in latrines led to the pits filling up quickly, especially when non-biodegradable commercially produced pads were used. No school pit latrines had been designed to make provision for sanitary waste. Consequently, waste regularly blocked suction hoses and some solid waste remained in the pit after each emptying such that over time, the pits required emptying more regularly.

#### Absenteeism

Disaggregating menstrual-related absenteeism from other causes was beyond the scope of this study. However, some general trends about attendance behaviours were glimpsed. Only 14% of respondents admitted missing school during their last period, but when estimating the percentage of those who miss one or more day of school each month due to menstruation, the average figure was 30.4%. There is then a discrepancy between perceived and admitted levels of absenteeism. Such inconsistencies were also apparent in the reasons given by girls: 71% stayed at home due to abdominal pains, whereas poor health, not having products and fear of leakage all ranked significantly as the perceived reasons for absence. This supports the hypothesis that the principal reason for menstrual-related absenteeism is pain.

## Conclusion

Schoolgirls' knowledge of the physiological processes associated with sexual maturity is limited and often shrouded in local myths perpetuated by female relatives. Consequently, fear and uncertainty affect schoolgirls' confidence. Additionally, the lack of pain relief, confidants and private sanitation facilities hinder the practical management of monthly needs. When this becomes too difficult in school, girls absent themselves. Tackling such barriers to education and dignity requires courage, diplomacy and time. It must begin by listening to schoolgirls' stories and then making them known to people who can influence change.

#### References

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