Putting the men into menstruation: the role of men and boys in community menstrual hygiene management

THÉRÈSE MAHON, ANJALI TRIPATHY and NEELAM SINGH

This paper examines how men and boys have an essential role in effective menstrual hygiene programmes and describes an initiative to engage men and boys in Uttar Pradesh, India. Cultural norms around menstruation are rooted in gender inequality and compromise women’s ability to manage menstruation hygienically and with dignity. While there has been significant progress in developing comprehensive approaches to menstrual hygiene management (MHM), the role of men and boys in supporting menstrual hygiene has been lacking. In India, WaterAid and Vatsalya have targeted men and boys to address this gap, in a programme that started in December 2011. Groups of men and boys were established and sensitized. Male teachers and masons were also trained to provide MHM services in school. Regular monitoring of software and hardware components, focus group discussions with male and female community members, and analysis of attendance registers has been undertaken to assess the emerging outcomes of the programme. As a result of the initiative, men and boys have begun to talk about menstruation more freely and are better able to support the MHM needs of women and girls within the household, community, and school.

Keywords: menstrual hygiene, gender, India, men and boys

Menstrual hygiene challenges are rooted in gender inequality

One of the underlying reasons why menstrual hygiene has been neglected is gender inequality. Unequal power relations between men and women result in women’s and girls’ voices not being heard in decision-making within households, communities, and development programmes. They have also led to cultural taboos, stigma, and shame around menstruation (House et al., 2012), including the belief, prevalent in many cultures, that menstrual blood, and menstruating women themselves, are
impure (WaterAid, 2009). During menstruation, women and girls may be excluded from using water and sanitation facilities, are unable to participate fully in social, educational, productive, and religious activities and, in some cultures, are even excluded from the home (House et al., 2012).

Therefore, addressing both the practical and strategic needs of women and girls related to menstruation and menstrual hygiene requires comprehensive programmes that target women and girls and men and boys. In the past few years, a growing body of research and practice-based knowledge has identified the key components of comprehensive menstrual hygiene programming. However, there is little documented on how to effectively engage men and boys in menstrual hygiene interventions.

The role of men and boys in menstrual hygiene

Men and boys can support women and girls to manage menstruation effectively across different social domains including household, community, school, and work. Men and boys influence women’s and girls’ experiences of menstrual hygiene management (MHM) through many roles, including as husbands, fathers, brothers, students, peers, teachers, community leaders, entrepreneurs, employers, development and humanitarian practitioners, and policymakers. While it is necessary to reach men and boys across all these roles, this paper will focus on those related to the household, community, and school contexts.

The importance of engaging boys and male teachers

Menstrual hygiene research and programmes highlight the challenges girls face at school and the need for appropriate water and sanitation facilities and menstrual hygiene materials, pragmatic information, and supportive staff and peers. Interventions that have addressed these needs primarily target girl students and female teachers. Yet one of the critical challenges girls face at school in relation to menstruation is the fear of being teased by boys, which impacts on their self-esteem. Physical and verbal bullying was one of the main grievances of girls interviewed in Malawi (Piper Pillitteri, 2012). As one girl shared, ‘Boys make you feel ashamed. They are rough with us and go into our bags and would see our cloths if we brought them to school.’

A study in Taiwan (Chang et al., 2012) explored boys’ experiences and attitudes relating to menstruation. One issue was that no one wanted to talk about menstruation with the boys and they could not discuss menstrual issues with their mothers or sisters or their fathers. As quotes from boys interviewed in the study show, they were also discouraged from talking about menstruation with each other at school. ‘If we talk about menstruation and girls hear about it. They snitch to teacher and seize us to see the teacher. Our teacher will admonish us, shake her head at us and punish us.’
The boys in Taiwan perceived that their parents did not want them to spend their study time on such topics as they were not important for their futures. The study also found that the information boys received from school, peers, parents, and the internet was often inaccurate or incomplete. Boys’ attitudes to menstruation and menstrual hygiene ranged from disinterested to extremely negative.

Sometimes, when they used the toilet, their menstrual blood often drips … drops are on the rim of the stool. When we sweep, we feel very disgusted. When we use water to flush it, we are afraid of using a broom or our feet to touch the water. I feel it is truly disgusting.

UNESCO’s Technical Note (UNESCO, 2014) emphasizes that teachers, particularly men, may not be adequately sensitized to girls’ needs and therefore may not allow girls to visit the toilets, and may misinterpret girls’ lack of participation in class during menstruation. Male teachers need to be informed and confident regarding menstruation and menstrual hygiene so that they can support female students and create a less stigmatizing environment at school. This is particularly important as there are far fewer female teachers in secondary schools in developing countries.

The role of men and boys in the household and at community level

At household level men are involved in decision-making on the allocation of household resources. In Nigeria, focus group discussions with women revealed that most men don’t discuss menstrual issues with their wives and daughters or provide money for menstrual materials (Onyegegbu, no date). In Malawi, males in the household were generally unaware about menstruation and pads, causing problems when girls had to ask male relatives for money to buy them (Piper Pillitteri, 2012).

Another household decision that may be taken by men is whether to build a household latrine, where women and girls can also change menstrual materials in privacy. In India cultural norms around gender were found to be a key factor that determined men’s decisions to have a household latrine as it was not socially acceptable for women family members to defecate outside (O’Reilly and Louis, 2014). However, taboos around menstruation can prevent women and girls using latrines during menstruation. As one female teenager in India stated, ‘How can I wash blood in the toilet? The drain that leads out is not covered. My father and brothers are in the courtyard’ (Water for People, 2008).

The perpetuation of cultural norms that stigmatize menstruation is a complex cultural process and restrictions are also enforced by women themselves. In far western Nepal many women and girls observe Chhaupadi during menstruation, requiring them to stay in a makeshift hut outside the home. Interviews with NGO workers and villagers (George, 2014) reveal resistance to change the taboos from both men and women. ‘We can change them,’ says Madan Kumar Majhi, [talking about attitudes of older men], a member of the Chhaupadi Minimization Committee. ‘But it’s the women who are the barrier. The mothers and mothers-in-law are the worst.’
A study by WaterAid (2009) found that fathers and brothers are becoming increasingly lenient in whether girls observe menstrual restrictions. A girl from Dhading reflected how girls turn to their fathers for rescue. ‘During winter it is very difficult, we have to sleep alone, and there is not enough warm clothes at night. Many times I have to ask father for quilt.’

Men can contribute towards changing cultural norms and challenging the taboos around menstruation, and are involved in decisions relating to women’s menstrual hygiene needs. However, development practitioners face potentially greater challenges in engaging men and boys due to the strong perception that menstrual hygiene is not to be discussed with men and boys. As shared by an adult man interviewed for a study in Nigeria (Onyegegbu, no date), ‘It is a taboo to talk about it and worse when women and girls are around.’

Practical approaches for engaging men and boys: the experience of WaterAid and Vatsalya in India

Background
India is a patriarchal society where men have greater power in decision-making. Women do not generally share information about menstruation with men and boys (Sudha and Ramajyothi, 2011). Most men do not know about the normal physiology of menstruation, such as the menstrual cycle. A study in Uttar Pradesh, where this project is being implemented, showed that only 22 per cent of men knew at which point in the menstrual cycle a woman was most likely to conceive (Singh et al., 1998). However, men are responsible for decision-making regarding facilities and services needed by women and girls, including access to toilets and the availability of sanitary napkins, and women and girls’ participation in awareness raising sessions and community meetings. In this context WaterAid and Vatsalya are implementing a community-based menstrual hygiene and WASH programme in Uttar Pradesh, India. The project is being implemented in 66 rural villages in Lucknow District to empower women and adolescent girls by addressing MHM. The project aims to increase awareness and build self-esteem; provide access to water, sanitation, and high-quality, affordable sanitary materials; and ensure their safe disposal in an environmentally friendly manner. The team realized the importance of engaging men and boys for the success of their intervention and this became integral to the approaches developed.

An assessment of the programme was undertaken in 2014 after the project had been running for two and a half years. The assessment involved review of project monitoring reports (software and hardware outputs), observation in community and schools, interviews and focus group discussions with women, girls, boys, and men, analysis of school registration data from 33 schools and registers maintained by ‘change agents’ who run community-based sanitary napkin outlets and counselling centres.
How men were involved

In each of the 66 villages, separate groups were established for adolescent girls, women, boys, and men. Focus group discussions were held to assess the existing knowledge, attitudes, myths, and practices around MHM within each group. The project team wanted to reach out directly to the stakeholders and understand the challenges, needs, and solutions from their perspectives. Support groups were established in schools and the community to act as a communication medium between the project team and the stakeholders. These groups were sensitized on WASH, gender, and MHM. Male groups were formed in the communities for boys, youths, and married males. Community meetings were held involving school teachers, youths in and out of school, and elderly men in community.

Men and boys were involved through different, innovative approaches, including games and a film (Vatsalya and WaterAid, 2013) made with the communities to share their experiences and perceptions, to stimulate discussion. Information, education, and communication (IEC) materials were used to share information on menstruation and menstrual hygiene. The groups were also sensitized to gender issues. This enabled them to recognize the significance of MHM and support the behaviour changes required for women and girls to realize their reproductive rights. At the preliminary stage it was very difficult to talk with men on MHM due to reluctance, prejudices, myths, and misconceptions surrounding the issue, but through regular meetings and inter-personal communication things started changing.

Other strategies were adopted to engage men and raise awareness of menstrual hygiene issues and their relationship to water and sanitation. For example male masons were engaged and their capacity was developed to design incinerators and household and school toilets. Male members of school management committees were also involved through training and awareness-raising sessions to provide supportive environments for effective MHM in schools and to inspire men to become change agents.

Assessment of the intervention

Project reports show that 66 male groups have been trained, involving 456 boys and 470 elderly and married men, to support the community on MHM in the project area. They are engaged as guardians to support female members of their family, as community members to challenge taboos, social stigma, and the attitudes of others, and as teachers by ensuring sanitation facilities and hygienic sanitary materials in school for girls. Twenty masons were trained in the design of toilets and construction of low-cost incinerators. In 20 schools sanitary complexes were improved to provide water, MHM materials, and safe disposal ensuring access for nearly 2000 school-going adolescent girls. Analysis of school registers and discussions with school staff showed a 40 per cent increase in attendance of adolescent girls during the project period.

Qualitative methods were used to assess the effectiveness of male involvement, including 18 focus group discussions with the male groups formed in the communities. The involvement of males has generated a more positive environment
for establishing counselling centres where affordable and hygienic materials and counselling on safe MHM practices are available. The men have supported their wives to be involved in the centres and become change agents. Case studies collected also suggest that the engagement with boys and men as well as women and girls is resulting in a range of positive effects on individuals and their communities. Community members have become aware of their rights and gained knowledge of their responsibilities towards menstrual hygiene management.

The voices of the community (Pathak, 2014) illustrate the positive deviations that were identified:

_The perception of boys and men towards menstruation has changed_ which has helped in reducing shame and embarrassment and restoring women and girls’ dignity and self-esteem.

In the beginning I also believed that this is a woman oriented issue, but however later on we all [referring to the village community members] recognized that how as men we are also related to it. India is a patriarchal society where we exercise power, but I personally presume that we need to share this power dynamics with women. We need to walk with them in similar equal steps so as to push their confidence, their aptitude, skills and capacities to a new high so that they come out without any quotient of fear or low self-esteem (Bhanu Pratap Singh, 72 years, senior male resident of Duggor Village, Lucknow District).

As now I am more familiar with the subject I can freely talk and hold a discussion on the subject of menstrual hygiene management. Not only my knowledge has increased but eventually has raised my confidence to truly believe that I have nothing to be ashamed of. I now freely go to the sanitary napkin outlet and buy myself, irrespective who the shopkeeper is, male or female.

... I do not have problem sharing my reproductive health concerns within the courtyards of my family or with my family members. I easily share and discuss the issues related to menstrual hygiene management with both males and females of my family with equal ease and comfort. When required I request my elder brothers to get sanitary napkins for me (Chandini Singh, female resident of Duggor Village, Lucknow District).

_Challenging taboos, social norms, and stigmas around menstruation has helped in reducing gender inequity and exclusion._

My village people have faith in me. I remember the day when the village Pradhan [village head] came to my home to invite me for a community and school level meeting. We had a conversation regarding the agenda of the meeting to be organized at Panchayat level, which was indeed an honour for me and my parents. Well, menstruation is such a big issue for us. I believe it is important to sensitize men separately or with women about our rights. Men and women need to be equally clear in their understanding and capacities, so that we women can walk freely with pride and honour. That’s why the participation of men is an important key to change, to empower men. If they are
equally educated we shall be more empowered and strong holistically (Shweta Mishra, female resident of Rasulpur Village, Lucknow District).

*Household budgeting for sanitary napkins has started* that enables girls and women to manage their menstruation hygienically and supports their mobility as there is a lower risk of stains and embarrassment.

In the past it was extremely rare to see men buying sanitary napkins for their women in our village. Initially they were hesitant to buy the sanitary pads from us but now they confidently ask for them. This shows that men have started recognizing the necessities and more significantly the reproductive health rights of girls and women which we believe is a big welcome change (Seema Khatoon, female change agent, Rasoolpur Village, Lucknow District).

*Infrastructure support including constructing household and school toilets has enabled girls and women to manage their menstruation with dignity* having privacy to change their menstrual hygiene materials as often as necessary.

Men should know about the sexual and reproductive health rights of women of his family, he should be familiar with the basic need of women during menstruation, their accessibility to sanitary materials and disposal to manage their menstruation. I feel a welcome change within myself as I am knowledgeable and conversant with the ladies of my village. I freely address and discuss with them on the subject of menstrual hygiene and management.

Women and girls need privacy to change, wash and dispose sanitary materials during menstruation. As I realized the paramount importance of toilet I shared and discussed the issue of constructing a toilet in our home. Now we have a toilet in our home. The women and girls of my family are safe, healthy and above all can exercise their reproductive health rights merrily without any conjecture of apprehension or stigma in their heart. I now motivate families and community members about the importance of constructing toilets in their homes. Now there are 34 toilets in my village (Mohit Gupta, 20 years, male resident of Raitha Village, Lucknow District).

**Lessons learned**

For any programme that is focused on community awareness, it is always essential to sensitize all stakeholders for effective results. No one should be left behind and an inclusive programme should be planned.

- An inclusive approach where men are equal partners ensures greater support and leads to successful empowerment of the whole community especially women and girls.
- The involvement of men and boys through creating spaces for open dialogue has enabled men and boys to realize the importance of MHM as well as issues of reproductive health, women’s self-esteem, and empowerment.
• For effective MHM it is essential to have toilet facilities along with water and soap so that females have a safe place to change and clean themselves. For this sensitization of men is essential as they make decisions on investment.
• It is essential to orient the school management and teachers on MHM. Providing an MHM-friendly environment in schools, including awareness-raising and toilets for girls with sanitary napkin disposal facilities has been seen to be helpful to increase the attendance of adolescent girls in schools.

References


