Globally, many women and girls face challenges when managing their menstruation. Failure to address the menstrual hygiene needs of women and girls can have far-reaching consequences for basic hygiene, sanitation and reproductive health, ultimately affecting progress towards the SDG goal of gender equality.

Menstrual Hygiene Management (MHM) refers to the practice of using clean materials to absorb menstrual blood that can be changed privately, safely, hygienically, and as often as needed for the duration of the menstrual cycle. PMA2020 is the first survey platform to provide data on MHM indicators on a large scale. The data presented here are from a nationwide survey in Ghana of 3,663 females age 15 to 49, conducted by PMA2020 Ghana.

61% SLEEPING AREA

33% SANITATION FACILITIES AT HOME, SCHOOL, WORK OR OTHER PUBLIC FACILITIES

6% BACKYARD / NO FACILITY

MAIN ENVIRONMENTS USED FOR MHM

65% OF WOMEN in Ghana report having everything they need to manage their menstruation. This does not vary by age, indicating that across their reproductive years, the majority of women are able to adequately meet their MHM needs.

85% OF WOMEN REPORT USING SANITARY PADS AS THEIR MAIN MHM MATERIAL.

SAFETY, CLEANLINESS, AND PRIVACY OF MHM FACILITY

DISPOSAL OF ABSORBENT MATERIALS

*Women are asked to select all types of disposal methods they use.

WASHING, REUSE AND DRYING OF MATERIALS

14% of women report that they wash and reuse their MHM materials. Of those who wash and reuse, 92% reported that their materials were completely dry before reuse.

PMA2020 uses innovative mobile technology to support low-cost, rapid-turnaround surveys to monitor key indicators for family planning and water, sanitation and hygiene (WASH). The project is implemented by local university and research organizations in 11 countries, deploying a cadre of female resident enumerators trained in mobile-assisted data collection. PMA2020/Ghana is led by the Kwame Nkrumah University of Science and Technology (KNUST), School of Medical Sciences in collaboration with University of Development Studies (UDS) and with the support of the Ghana Health Service and Ghana Statistical Service. Overall direction and support is provided by the Bill & Melinda Gates Institute for Population and Reproductive Health and the Johns Hopkins University Water Institute through a grant from the Bill & Melinda Gates Foundation.