



In Kenya, menstrual health & hygiene is increasingly recognized by government as evidenced by the Kenya Menstrual Health Policy, but policy implementation remains a challenge.

MHH CONTEXT

There is clear momentum, in Kenya, and buy-in behind menstrual health & hygiene (MHH) programming across ministries, but coordination, funding, and channeling these energies towards implementation of their MH Policy remains difficult. Inadequate MHH also excludes a large number of women and girls in Kenya from equitable health, education, and economic outcomes.

Absenteeism

There is a lack of rigorous academic studies to show the impact menstruation has on school attendance. Benshaul-Tolonen (2019) could not conclude a direct relationship between absenteeism and menstruation and attributed their assumptions to (1) students not being asked the questions directly and (2) stigma on menstrual health. However, anecdotal evidence and grey literature suggest that MHH does impact adolescent girls in schools especially those in rural and/or low socio-economic status households.

Access to products

Many girls and women in Kenya suffer menstrual inequity because of both cost and access to disposable pads. One study shows that 46% of women and girls in rural areas and 65% in urban areas have access to and use disposable pads (MOH 2020). Another study showed that close to 20% of women and girls from both rural and urban areas, as a consequence of being unable to afford MHH products, are forced to make proxy menstrual products to manage their menstruation. These proxy products include toilet paper, pieces of blanket, cloth, or other natural materials. In a study of 3,418 women in rural western Kenya, 10% of 15 year old pad users reported they had received their menstrual pads from sexual partners. Another study showed girls are being coerced into transactional sex so they can obtain menstrual products to manage their menstruation with dignity (Phillips-Howard et al. 2015).

Commonly promoted menstrual products include commercially manufactured disposable pads and menstrual cups, and locally manufactured reusable (washable) pads. Reusable pads have increased in popularity due to sustainability and environmental reasons. To help regulate the quality and safety of reusable pads, in January 2021, the Kenya Bureau of Standards (KEBS) announced a forthcoming product standard. The standard is anticipated to be operationalized this year.



50.3%
of the population are women
and girls (27 million)¹

Girl Friendliness Index²



17 / **52**

Household WASH Access³

- 62% have basic water
- 33% have a latrine
- 27% have basic hygiene services



Menstrual Product Access⁴



54% cannot afford
monthly
products

MHH CONTEXT

Access to education and information

In Kenya, the median age for menarche is 14.4 years of age. Within the population of menstruating girls, 87.7% receive information on menstruation from their mothers and 15.5% from their teachers. However, the majority of conversations between parents and daughters focuses on avoiding teenage pregnancy, so little attention is given to menstruation (MOH 2020).

Studies show that women and girls have limited access to comprehensive and accurate MHH education. Conversations and attitudes toward menstruation are often believed to be a part of a 'culture of silence' that does not allow women and girls' to discuss sexuality and menstruation. This stigma and silence leads to almost half of girls surveyed, by the Ministry of Health, to believe it is incorrect to talk about or discuss menstruation (MOH 2020). Access to accurate and age appropriate MHH education greatly influences the type and degree of menstrual stigma in communities – which can limit freedoms including food restrictions, social interaction, mobility, and ability to excel in school and work (Amaya, Marcatili, & Bhavaraju 2020). Negative consequences of women and girls being unable to discuss menstruation are shame and confusion, poor hygiene during menstruation, urinary tract and vaginal infections, absenteeism from school and work and a sense of poor self-worth.

Access to WASH, including schools

Many schools and communities in Kenya are faced with water and sanitary facilities challenges (Simiyu et al. 2020). MoH (2016) revealed that only 18% of learning institutions had water taps near toilets while 82% had water closets with no running water. The study further showed that many households ferried water from storage containers while urban dwellers purchased water from vendors.

According to Gudda (2019) and MoH (2018), general disposal of sanitary products in schools and families in Kenya is done in pit latrines. That is; 65% in the rural areas and 50% in the urban areas. Further, the study showed that 38% of the waste was either collected or thrown in the rubbish pit (9% in urban settings).

Myths and taboos

Majority of Kenyan cultures believe that menstruating women and girls are dirty and that menstrual blood is contaminated. For example, menstrual blood is believed to contaminate sacred places and menstruating women will cause chaos to others. Further, women are not allowed to go near the vegetable plantation because it is believed the vegetables will either dry up or be inedible/unsellable (MacLean, Hearle, & Ruwanpura 2020).

In one study conducted by the Ministry of Health (2016) 50% of the women and girl respondents reported that menstrual blood contains harmful substances.

Stigma & Taboo⁵

50%

of women and girls reported a belief that menstrual blood contains harmful substances



VAT on Products

0%

since 2004



MHH POLICY LANDSCAPE

MHM policies

In 2019, Kenya was the first country, in the world, to develop a comprehensive stand-alone MH policy. However, there is no allocated budget or coordinating body to guide the more than 10 ministries and departments charged with policy implementation.

Policies including MHM

- The Sanitary Towel Program under the Ministry of Education, first launched in 2011, as a mandate to supply free disposable pads for girls in public schools.
- In 2016 the Basic Education Amendment Act, placed the responsibility of providing free, sufficient and quality sanitary towels on the government. This program then shifted to the Ministry of Public Service, Youth, and Gender Affairs in 2017.
- In January 2021, the Kenya Bureau of Standards (KEBS) announced a forthcoming product standard for reusable pads. The standard is anticipated to be operationalized this year.
- MH has been mentioned comprehensively in both the Reproductive Health Policy 2020-2030, and the Adolescent Sexual and Reproductive Health Policy.

Product Standards

- Disposables
- Washable Pads
- Cups

Key Government Actors

- **The Ministry of Health is the ministry responsible for implementation and takes the lead on coordinating, supervising, and supporting the MH Policy.**

REFERENCES

1) The World Bank. (n.d.). Population, female (% of total population) - Kenya. The World Bank | Data. <https://data.worldbank.org/indicator/SP.POP.TOTL.FE.ZS?end=2020&locations=KE&start=2000&view=chart>

2) ACPF (2020). The African Report on Child Wellbeing 2020: How friendly are African governments towards girls? Addis Ababa: African Child Policy Forum (ACPF).

3) World Health Organization (WHO) and the United Nations Children's Fund (UNICEF). (2021). Progress on household drinking water, sanitation and hygiene 2000-2020: five years into the SDGs. License: CC BY-NC-SA 3.0 IGO

4) Republic of Kenya Ministry of Health (2020) Menstrual Hygiene Management Strategy, 2019-2030. Kenya Ministry of Health. <https://www.health.go.ke/wp-content/uploads/2020/05/MHM-Policy-11-May-2020.pdf>

AUTHORS & KEY CONTRIBUTORS

Janet Mule
Kenya Ministry of Health

Neville Okwaro
MHM Lead USAID- Western
Kenya Sanitation Project

Diana Nelson
Days for Girls International

FOR COMPLETE REFERENCES AND ADDITIONAL RESOURCES, CLICK [HERE](#)

