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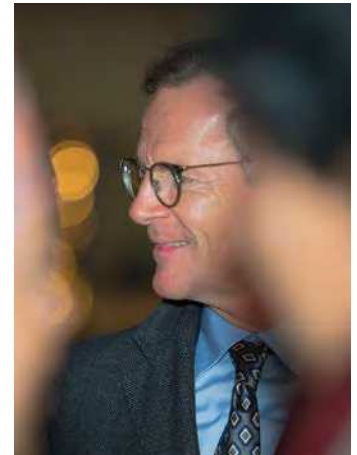
# NEPAL'S MENSTRUAL MOVEMENT

How 'MenstruAction' is making life better for girls and women in Nepal — month after month



# Content

<b>FOREWORD ROLAND SCHÄFER, GERMAN AMBASSADOR TO NEPAL</b>	<b>03</b>
<b>FOREWORD DR. PUSHPA CHAUDHARY</b>	<b>05</b>
<b>FOREWORD DR. MARNI SOMMER</b>	<b>06</b>
<b>INTRODUCTION</b>	<b>07</b>
<b>THE ANCIENT PRACTICE OF <i>CHHAUPADI</i></b>	<b>08</b>
<b>THE SCALE OF THE PROBLEM: SOME FACTS AND FIGURES</b>	<b>10</b>
Practice of Chhaupadi	11
Menstruation product access and usage	11
Other restrictions	12
Sanitation	13
<b>THE STORY SO FAR</b>	<b>14</b>
Right to informed choice	17
Moving the MHM agenda forward	18
Working together through the MHM Practitioner Alliance	19
<b><i>MENSTRUACTIVISTS. SOME MOVERS AND SHAKERS BEHIND MHM</i></b>	<b>20</b>
MHM is the biggest topic around	21
The need for better data and understanding of the issues	23
Reflecting on restrictive practices through film making	25
Five Days	27
<b>WATER AND SANITATION. THE KEY TO BETTER MENSTRUAL HYGIENE</b>	<b>28</b>
Nepal's geography is the biggest challenge	29
Addressing menstrual issues through WASH programmes	31
<b>EDUCATION TO TACKLE TABOOS</b>	<b>32</b>
The government is incorporating MHM issues into the school curriculum	33
<b>AWARENESS AND EDUCATION IN ACTION:</b>	
<b>THE EXAMPLE OF BIDUR MUNICIPALITY</b>	<b>34</b>
Raising awareness about menstrual health and hygiene management	35
Allocating resources to schools for MHM	36
Working with young people	38
Using radio to break down taboos	39
<b>INVENTIONS, INNOVATIONS AND SUSTAINABLE SOLUTIONS</b>	<b>40</b>
Producing low cost sanitary pads	41
Homemade eco-friendly, reusable cloth sanitary pads	42
'Wake Up, Kick Ass'	43
Nepal's first sanitary napkin vending machines	45
Mitini—a girl's best friend	46
<b>THE ROLE OF THE PRIVATE SECTOR IN PROMOTING MHM</b>	<b>48</b>
Social marketing of menstrual products	49
Building bridges between the private and public sectors	51
<b>CONCLUSION</b>	<b>52</b>
<b>RECOMMENDATIONS FROM TECHNICAL WORKING GROUPS</b>	
<b>AT THE MENSTRUATION SUMMIT HELD IN DECEMBER 2018 IN NEPAL</b>	<b>54</b>
Working group 1: Education, awareness and learning	55
Working group 2: WASH and health	55
Working group 3: Innovation and sustainability	56
Working group 4: Policy and advocacy	56
Working group 5: Research and analysis	57
<b>REFERENCES AND RESOURCES</b>	<b>58</b>
<b>IMPRINT</b>	<b>59</b>



## FOREWORD ROLAND SCHÄFER

German Ambassador to Nepal,  
German Embassy in Kathmandu, Nepal

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Everyday throughout Nepal, millions of women and adolescent girls face significant challenges when managing their menstruation hygienically, with dignity, security and confidence. These challenges often arise due to deeply ingrained cultural and religious beliefs alongside a lack of key infrastructure in Nepal. These challenges can have a negative impact on girls' and women's right to health, education and the articulation of their human rights.

Nevertheless, Nepal is changing; there is growing awareness about the health, education and social consequences of poor menstrual hygiene and harmful menstrual practices for girls and women. This report discusses both the complex set of challenges these girls and women face as well as the considerable progress that has been made in Nepal to address them. In the recent decade, menstruation has gone from a 'taboo subject' to a nationwide 'menstrual movement'. Now, Menstrual Health and Hygiene Management (MHM) is at the forefront of many development initiatives across Nepal.

I am very pleased to note that the government of Nepal has announced recently, on May 3rd 2019 that all Nepali schoolgirls will have access to free sanitary pads at school. As partners of the Government of Nepal, and of all activists involved, we as the German Development Cooperation think that this will serve as an opportunity to improve education on menstruation as well as a great step forward to providing period products like sanitary pads to the many girls who cannot afford them.

Access to period products should be a right, regardless of income, which is why we are moving ahead with plans to introduce a universal system of access to period products for everyone in Nepal. Affordable, sufficient and quality sanitary pads should be provided to every girl registered at school, as well as the provision of a safe and environmentally sound mechanism for disposal.

Girls' and women's health are at the centre of Germany's development partnership with Nepal.





MenstruAction Summit  
Kathmandu, Nepal  
December 2018



# Ending period shaming and poverty. Committed to change



## FOREWORD

DR. PUSHPA CHAUDHARY

Secretary at Ministry of Health and Population

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The MenstruAction Summit that took place in Kathmandu, Nepal in December 2018 was truly a breakpoint moment. More than 500 participants, ranging from activists governmental representatives, non-governmental organizations (NGOs), community-based organizations, to politicians, donors, social entrepreneurs and the private sector, to media, adolescent girls and other youth, came together to push forward the important agenda of menstrual health and hygiene management.

The energy and commitment in the room, together with the numerous menstruation-related activities happening across Nepal, demonstrate the power of collective action to truly transform the lives of all who menstruate.

The government of Nepal has announced recently, on May 3rd 2019 that all Nepali schoolgirls will have access to free sanitary pads at school.

We think that this will act as an opportunity to improve education on menstruation as well as a great step forward to providing sanitary products like pads and other menstrual products to the many girls who cannot afford them.

We believe that access to period products should be a right, regardless of your income, which is why we are moving ahead with plans to introduce a universal system of free access to period products for everyone in Nepal. Free, sufficient and quality sanitary towels must be provided to every girl registered at school, as well as the provision of a safe and environmentally sound mechanism for disposal.



# MenstruAction Summit 2018

## FOREWORD

### DR. MARNI SOMMER

Associate Professor for Socio-medical Sciences  
at Columbia University in the USA



The MenstruAction Summit that took place in Kathmandu, Nepal in December 2018 was truly a watershed moment. The energy and commitment in the room, together with the numerous menstruation-related activities happening across Nepal, demonstrate the power of collective action to truly transform the lives of those who menstruate.

Importantly, almost everyone who spoke – whether speaking from the stage or asking a question – kept girls, women and all people who menstruate at the forefront of their minds and the center of our focus, as they are the knowers of their own lives and menstruating experiences.

The global interest to understand and address the challenges facing girls, women and all people with menstrual periods began in a small-scale way almost fifteen years ago, with efforts to capture the lived experiences of those who menstruate in schools and beyond: their voices, their stories of first menstrual periods, their descriptions of managing menstruation in social environments that restrict their behaviors, and physical environments that create barriers to bathing, changing menstrual cloths and other products, and hygienically washing and drying cloths used during menstruation. Activists and local organizations have been at the forefront of the effort to bring attention to such issues, and worked hard to raise awareness about the need for government engagement to truly transform social and physical environments across

Nepal in order to assure that all people who menstruate can do so safely, comfortably and with dignity. In response, the government engaged, developing policy that seeks to protect the potentially harmful seclusion practices of certain regions, and additional planning for a national menstrual policy. This taking up by the government of such a taboo issue in itself is of profound importance, serving to diminish on-going stigma around the issue of menstruation, and impactfully breaking the silence.

Of additional significance, the importance and power of Nepal's commitment to addressing menstruation extends beyond its borders. Through the model that the Government of Nepal and its partners, along with the activists and the media, bring to addressing menstruation in and out of schools, during and after humanitarian emergencies, and tackling restrictive practices that reinforce gender inequality and increase the vulnerability of those who menstruate, a pathway is provided for other countries to follow. Although the ripple effects of each of these actions – how far they will reach to influence and shape the lives of girls, women and people who menstruate in neighboring countries and beyond – may never be measured, this does not diminish the importance of Nepal serving as a leader in the menstrual global community. Nepal's role in continuing to address the harmful social norms and environmental barriers confronting those who menstruate, while also celebrating menstruation as a natural part of human life, is of profound importance to both Nepal and the global community's effort to reach the Sustainable Development Goals around sanitation, gender, health, education, economic empowerment and beyond.

# Introduction

Although menstruation is a natural process that signals a girl's entry into womanhood, discriminatory practices and policies prevail around the world. In many low-income countries, such as Nepal, adolescent girls face significant challenges to managing menstruation hygienically and with security, dignity, and confidence. Cultural constraints and lack of access to accurate information can prevent girls from participating fully in society during menstruation. In addition, lack of proper toilets and sanitation facilities can make having a period a very undignified and traumatic process. Due to the high cost and unavailability of menstrual products in many places, girls are compelled to use unhygienic options, such as dirty rags, ashes or dried leaves.

Social, cultural and religious factors play a strong role in influencing attitudes and beliefs about menstruation. In the Far- and Mid-Western regions of Nepal, according to some religious and cultural beliefs, menstruating women are considered 'untouchable', dirty and impure and have to endure being separated and isolated from their families for the duration of their monthly period. Although this practice, known as Chhaupadi (see page 8), was declared illegal by Nepal's Supreme Court in 2005 and was criminalised in 2017, it still continues.

In Nepal, millions of women and girls are believed to face a complex set of challenges relating to managing menstruation and deeply entrenched cultural and religious beliefs. These challenges can also have negative impacts on their health, education and human rights.

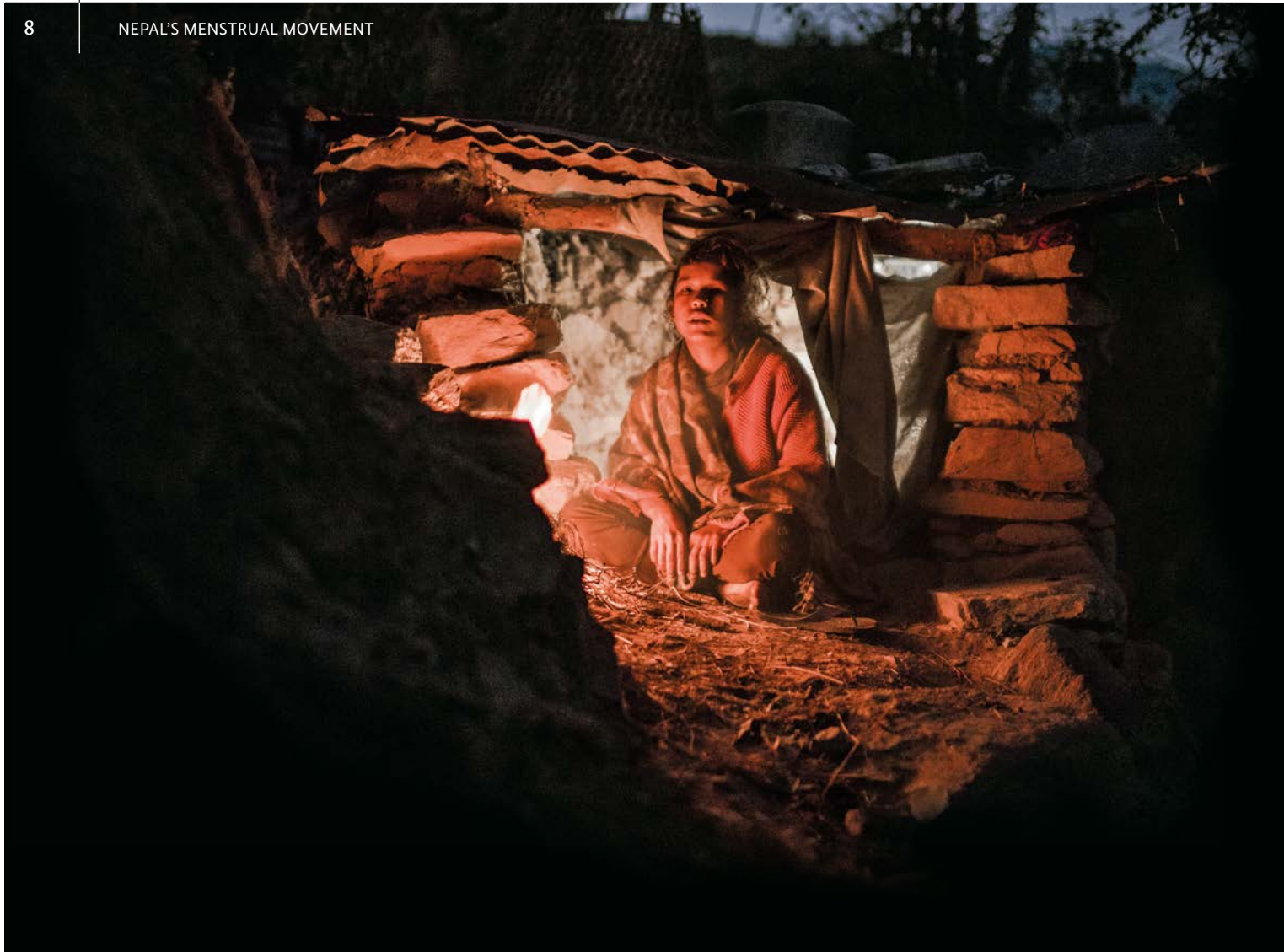
This report describes both, some of these challenges, and the considerable progress that has been made in Nepal in the last few years to address them – improving millions of women's lives in the process. From being a taboo subject that few people talked about a short time ago, a 'menstrual movement' is taking place in Nepal, and menstrual health and hygiene management (MHM) is now at the forefront of many development initiatives.

A few years ago, only a handful of organisations concerned themselves with these issues, but now more than 50 different public, private, government and NGO organisations are working on at least 80 initiatives. The formation of a MHM Practitioner Alliance two years ago has also improved coordination of this work, enabling members to share experiences and information, and strengthen efforts to drive the menstrual health and hygiene agenda forward.

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This report is not meant as a comprehensive summary of all the work being done in the field of MHM – that would not be possible within the scope of a report of this length – but it does summarise and give examples of some of the MHM initiatives being undertaken at this particular point in time, with a view to both documenting these efforts so far and inspiring further MHM momentum, both in Nepal and elsewhere.

The experiences and efforts of just a few of the policy makers, researchers, educationists, development partners, technologists and innovators, young volunteers and activists working in this field are documented in this report, largely in their own words. The opinions expressed are their own, not necessarily those of GIZ's, although all are united in the belief that every girl deserves access to better health, wellbeing and empowerment, and that ensuring better menstrual health and hygiene management is one way of achieving this.



# The ancient practice of *Chhaupadi*

*“In the winter it was very cold, and in the summer it was hot and I was dehydrated. Half of my life seemed to be spent in the goat hut. I couldn’t wait to be free to go home. Now I no longer have to sleep in the goat hut — I can be in a hut closer to the house. But I still can’t eat there in case I touch the house or animals and bring harm to them. The isolation is still there.”*

Says one girl who had to practice Chhaupadi.

↑ A teenage girl sits in a typical Chhaupadi house.



According to some persistent ancient beliefs in some remote rural areas largely in the Far West of Nepal, a menstruating girl or woman is considered to be unclean and untouchable, and must observe the tradition of Chhaupadi. She is isolated from the rest of her family and confined to a goat shed or hut during menstruation.

In addition, she is not allowed:

- to touch men,
- to prepare food in the kitchen,
- to visit the temple to pray,
- and often not allowed to bathe using water from communal taps.

Failure to observe these practices, it is believed, will bring harm:

- to animals,
- to crops,
- and even to people in the local community.

Isolating women and girls in Chhaupadi huts during their period exposes them to dangerous and unsanitary conditions, where they can be at risk of ill-health and extreme cold or snake bites, rape and even in some cases, death. In a recent tragedy in western Nepal's Bajura district, 35-year old Amba Bohara and her two sons aged 12 and nine suffocated to death in a windowless Chhaupadi hut. It appeared the family had lit a fire in an attempt to keep warm inside the freezing mud hut but were overcome by fumes.

In the most extreme cases, such beliefs can have fatal consequences for girls and women, but on a daily basis they also exclude them from fully participating in their community, education and work. For example, as the facts and figures below show, these practices also have a negative impact on girls' school attendance and performance.

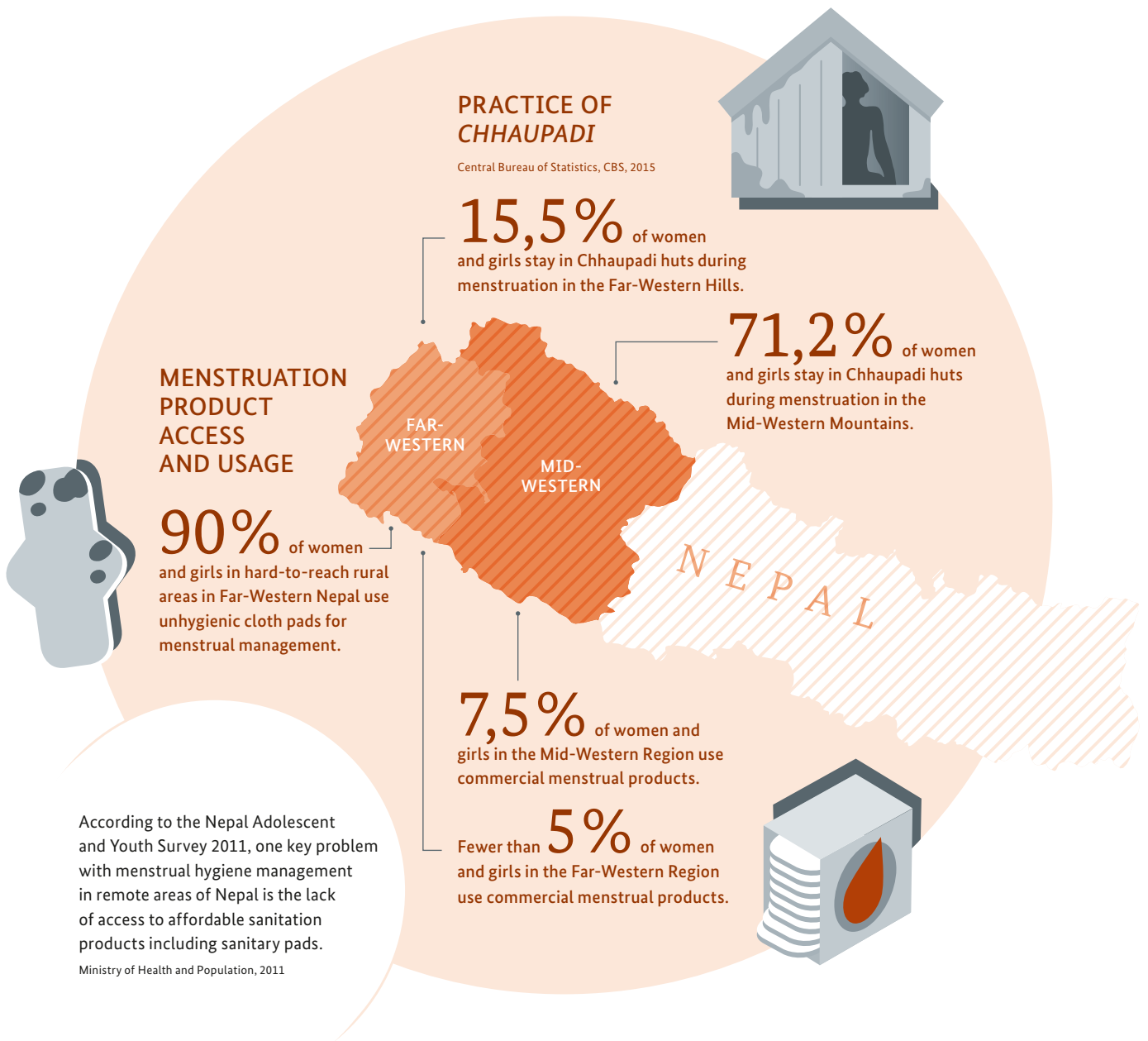
Despite Chhaupadi officially being banned in 2005 and later criminalised in 2017 (with penalties including a 3,000-rupee i.e. around 20 Euro fine and a three-month jail term introduced last year for those convicted of perpetuating the custom) it remains deeply embedded in some communities, particularly in the country's western regions.

Although the issue of Chhaupadi has tended to dominate the MHM debate in Nepal, it is only one aspect of many more restrictive practices and broader issues. Health, hygiene and rights are all related and health is often compromised because menstruating women have few rights. Even many educated, urban women still observe these restrictive menstrual practices, which makes it even more challenging to change mind sets and behaviour.

# The scale of the problem: some facts and figures

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In 2016, a comparative study of 528 girls from eight districts was supported by the Nepali-German Support to the Health Sector Programme (S2HSP) with technical assistance provided by the Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) on behalf of the German Federal Ministry for Economic Cooperation and Development (BMZ). A summary of some of the findings of this study, as well as other research conducted on MHM follows 'menstruation product access and usage'. Data from other studies conducted in Nepal by different organisations have found facts about the 'practice of Chhaupadi', 'other restrictions' and 'sanitation'.



*“When I was growing up, I used sari rags, but one of the biggest problems is when you are washing and drying because everybody will know that you have your period, and there’s a lot of embarrassment around this. There is also this myth that if someone finds your rag and burns it, you will be infertile, so to say that to a 12 to 13 year old who has just started her period, that’s almost like a scar. They start drying their rags inside or hide them under other clothes – so they don’t dry properly and cause infections.”*

RUBY RAUT, co-founder of WUKA period pants – see page 43



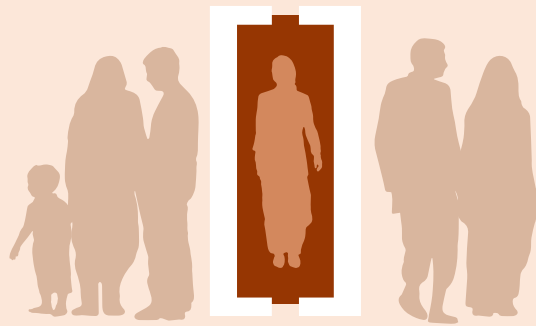


*“I remember feeling ashamed and embarrassed as a teenager whenever menstruation was mentioned. It is all about mind sets. This mentality has been in our heads so long we think twice about entering the kitchen or religious places. The mentality needs to change. We need to look at ways of helping people who cannot even afford the cheapest menstrual pads. One lady featured in the film I made had only two sets of clothes. During her period she clutched the lungi between her thighs and washed it overnight.”*

NIKITA CHANDAK, former Miss Nepal 2017, who has made a film in which she visited women in rural communities to find out about the various practices and beliefs surrounding Chhaupadi.  
[www.youtube.com/watch?v=MCreK7Mu4S8](http://www.youtube.com/watch?v=MCreK7Mu4S8)



#### OTHER RESTRICTIONS



#### STUDY AMONG 204 ADOLESCENT GIRLS IN NEPAL:

**89%** experienced some form of restriction or exclusion during menstruation (WaterAid, 2009).



#### 15 TO 29 YEAR OLD WOMEN IN NEPAL:

**25%** stay in different room of the house (CBS, 2015).



**8,8%** bathe in a separate place (CBS, 2015).



**57,6%** avoid social gatherings (CBS, 2015).

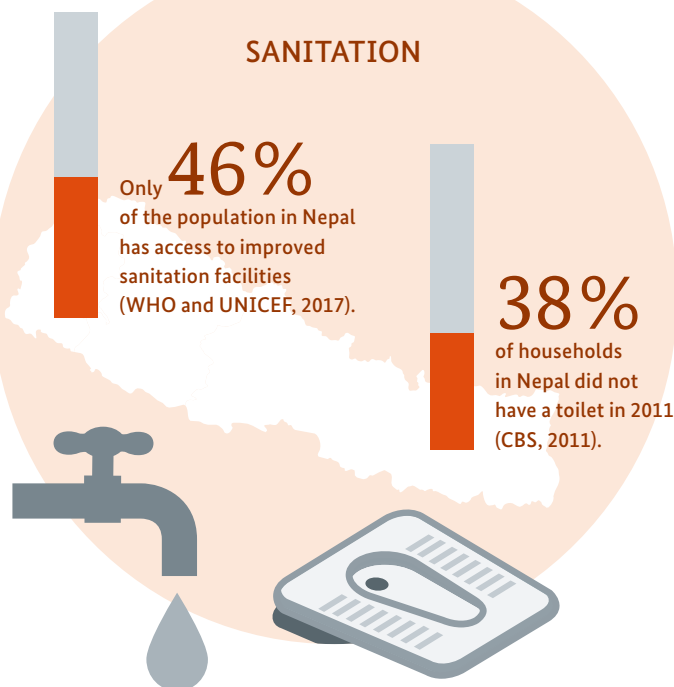


*“My initial excitement about my first period was soon replaced by embarrassment and dread. My days were now divided into ‘pure’ and ‘impure’ days. It was a shameful thing to talk about. And if this was how it was for me as a city girl, how would it be for rural girls? We heard about a girl who died from smoke suffocation in the Chhaupadi hut. Girls like us suffer every day because of these taboos.”*

MALVIKA NEUPANE, 16-year old, addressing the MenstruAction Summit held in Kathmandu in December 2018.



## SANITATION



*“My own family is from eastern Nepal and we are Buddhists, but until I was in my late teens, my sister and I also followed restrictive practices of not entering a kitchen or temple when menstruating until one day the daughter of a monk told my mother that it is not required in our religion and that menstruation is a completely natural thing. My mother then put an end to the restrictive practices, but the truth is that before that we simply didn’t know.”*

DR. LAXMI TAMANG,  
freelance researcher and consultant

# The story so far

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The devastating 2015 earthquakes, which destroyed so many homes and buildings and forced people to live in temporary shelters without adequate water and sanitation or health care facilities proved a catalyst for change. The devastation highlighted and exacerbated the challenges of menstrual hygiene management faced by girls and women and triggered a new awareness about these problems.





German Development Cooperation through GIZ has been working on menstrual health issues in Nepal since 2015. The programme is funded by the German Federal Ministry for Economic Cooperation and Development (BMZ) and Nepal's Ministry of Health and Population is the main implementing agency.

The Ministry of Health and Population assigned the Recovery Programme Nepal (RPN) to support the reconstruction of damaged health facilities and school buildings in Nuwakot, Rasuwa and Dhading districts after the earthquake. As part of these reconstruction efforts the RPN also supported the economic development of communities through vocational training, especially for women. Through Support to the Health Sector Programme, German development cooperation worked with the RPN in Semjong Village Development Committee (VDC) in Dhading district and Sikre VDC in Nuwakot district to implement small start-up initiatives to assist with recovery efforts.

One of these initiatives was the production of low-cost sanitary pads, using the innovative design of Mr. Muruganantham Arunachalam from Coimbatore, India, who designed and marketed a simple and easy to operate

manufacturing system. GIZ facilitated the procurement of two of these the machines and provided technical training to two women's cooperatives for the production and supply of the raw materials for low-cost sanitary pads. The first of these was the Sana Kishan Women's Cooperative in Dhading district, and the second was the Namaste Agriculture Women Cooperative in Nuwakot district. The two cooperatives are led entirely by women and each production process currently provides employment for 4 to 8 women.

The machines cost approximately EUR 3,500 each and can produce 1,600 pads per day (480,000 per year) at a cost of six Nepali rupees (around 0.05 Euros) per pad. The pads are biodegradable and contain no harmful chemicals, and are an alternative option to cloth napkins.

The main idea behind this project is to help women in isolated rural areas to obtain access to affordable sanitary pads while simultaneously providing them with a means of income and economic empowerment through a sustainable and scalable business model. By engaging women in the manufacturing and selling of sanitary pads, the initiative also helps to address the culture of restrictions, silence and taboos around menstruation.

→ 'Padman' – Mr. Muruganantham, center, receives GIZ team from Nepal in Coimbatore (2016).





→ Women are employed by two cooperatives to produce low cost menstrual pads.

Both the cooperatives had to overcome a range of initial challenges, such as irregular electricity supplies for the plant, limited human resource capacity and ensuring regular supplies of raw materials.

A year after the two cooperatives started producing low-cost sanitary pads, a strategic partnership was established between the cooperatives, GIZ and the Chaudhary Foundation, which is responsible for the corporate social responsibility programmes for the Chaudhary Group, one of Nepal's foremost private companies. The aim of this partnership was to improve and promote a socially inclusive business model for the cooperatives, with the Chaudhary Foundation providing training and advice on business plan development, management and accountancy, marketing and product development.

This initiative has inspired more organisations such as the Radha Paudel Foundation and others to replicate the model and search for sustainable alternatives to menstrual health and hygiene management. The Minister of Water Supply Bina Magar has also supported the introduction of low cost sanitary machines for her constituency.

German Development Cooperation, along with other development partners, is also supporting the Ministries of Health and Population, and Education and Sports to implement a school-based programme aimed at improving menstrual health and hygiene management in over 500 schools in earthquake-affected areas and in the mid- and far-west regions. This programme focuses on training teachers and health workers in how to educate girls and boys about menstrual health and hygiene management. A student leadership programme has also been started to empower youth leaders to address the taboos and dialogue with community leaders in order to find joint pathways for change. An app providing information on adolescent health and rights and other materials tackling MHM is aimed at adolescents and youth.

The school programme also teaches school students how to make reusable cloth sanitary pads and how to address the waste management issues associated with other menstrual hygiene products. In addition, a youth radio project was started in 2016, to provide specific information on sexual and reproductive health and rights, including MHM, through district radio stations.





→ A school-based programme aimed at improving menstrual health and hygiene management in schools has been established.

## RIGHT TO INFORMED CHOICE

Menstrual pads are of course not the only MHM option available or necessarily the best option for all. Some women may prefer to use menstrual cups, tampons or other products, and women and girls should have the personal choice to choose the method that is right for them – although these choices are often determined by cultural attitudes, water supply, waste disposal, access and the cost and availability of sanitary products.

New solutions also sometimes bring with them new challenges to be tackled. For example, better access to and more affordable menstrual products will lead to greater use, and this in turn creates a problem of safe, hygienic waste management and disposal – which is a growing environmental and planetary problem not only for low-income countries like Nepal, but for wealthier countries too. It is estimated that during the course of her reproductive life-time, an average woman fills two minibuses with disposable menstrual products.

*“Girls and women are valuable drivers of development, and one of the simplest things we can do to empower them is by giving them access to menstrual health and hygiene education and advice on practices.”*

VALERIE BROCH ALVAREZ, Senior Technical Adviser  
for GIZ's Support to the Health Sector Programme in Nepal





It is an indication of how far menstrual health and hygiene issues have come in Nepal that over 500 participants from all over the country and region attended a Summit on Menstrual Action hosted by GIZ and the MHM Practitioner Alliance in Kathmandu on 11th December 2018. Previously shrouded in silence about harmful practices and taboos, menstrual health management has now become a dynamic development issue.

◀ Welcome address by Valerie Broch Alvarez,  
GIZ, Senior Technical Advisor

## MOVING THE MHM AGENDA FORWARD

In her welcome address, Valerie Broch Alvarez, Team leader and Senior Technical advisor from Support to the Health Sector Programme reminded participants that it had only been two years since Nepal had held its first ever national conference on adolescent health and development, which had highlighted some of the MHM challenges the country faced and resulted in the setting up of a MHM Practitioner Alliance to coordinate efforts. From a handful of organisations working on menstrual health and hygiene in 2016, today the Alliance comprises 50 organisations working on around 80 initiatives throughout the country. Valerie Broch Alvarez says:

***“There is now a real commitment to promoting informed choice for women and girls in Nepal – particularly in rural and remote areas – and to break the silence on harmful menstruation taboos... what we can achieve together can go beyond our own efforts and imaginations.”***

In her key note speech to the Summit, Dr. Marni Sommer, Associate Professor for Socio-medical Sciences at Columbia University in the USA, began by saying: “It’s extraordinary to see how full this room is. We have been working on this issue since 2004 but it is only now in 2018 that we see such engagement.” She also welcomed the fact that there were – unusually – many men present at the meeting, adding: “These are our allies.”

She said a great deal of progress had been made globally in MHM in the last 15 years, as the agenda has broadened from being largely a water and sanitation issue, to a

multi-faceted social, health, legal, gender and educational issue. There is growing recognition, said Dr. Sommer, that MHM is cross-sectoral issue that impacts health, education, jobs and equality and it affects our ability to achieve the global Sustainable Development Goals. Dr. Sommer praised Nepal’s efforts to address these issues and said it had become a model for other countries around the world. The question now, she said, is: “where do we go from here?”

“When I started working on this in 2004 MHM was not an issue at all. In 10 years that’s all changed. Now there are menstrual health policies in many countries. International donors are now talking about these issues. It is a conversation in schools, in the media. Do we have a long way to go? For sure... there are such a range of solutions and experiences and challenges.”

Dr. Sommer said practices such as Chhaupadi make media headlines because they are extreme. Whilst it was good that the silence and taboos about such issues had been broken, she said, “I worry that the focus on more extreme practices drowns out the issues that even the average girl or woman faces every month.”

She also raised the issue of menstrual waste management, which she said was threatening to become “a barrelling disaster...you can’t just be pushing products without challenging these issues.”

Although there was still a long way to go, Dr. Sommer said she was optimistic.

***“It won’t change overnight, but things are changing. We need to keep women and girls at the centre of MHM work and consult them.”***

For a fuller account of the MenstruAction Summit please see: [health.bmz.de/events/Events\\_2018/menstruaction](http://health.bmz.de/events/Events_2018/menstruaction)



## WORKING TOGETHER THROUGH THE MHM PRACTITIONER ALLIANCE

Addressing the MenstruAction Summit, Guna Raj Shrestha, Coordinator of the MHM Practitioner Alliance said that over the last two years, the Alliance had held discussions with key ministries on how to improve MHM. Before and during the Summit, Alliance members had worked together to come up with recommendations (see page 55) which will form the basis for a Plan of Action for 2019/20. This will be submitted to government for consideration, with a view to driving the MHM agenda forward and ultimately cascading the recommendations to local areas for implementation.

Dr. Paul Rueckert, Programme Manager and Chief Technical Advisor for Support to the Health Sector Programme in Nepal said that GIZ was very proud to be a part of the Alliance, and was committed to supporting its work

*“because better menstrual hygiene management changes lives”.*

“It is important to show the government that there is a growing movement on MHM in this country,” said Dr. Rueckert. “The government has a fragmented approach on these issues with different ministries working on different areas, but not necessarily collaborating. Government needs also to be a part of this movement, and we hope that the Action Plan will be the next step.”

In the rest of this report, we will focus on a few of the many and varied initiatives being undertaken by different members of the MHM Practitioner Alliance, and talk to some of the individuals behind them. We also met some prominent ‘MenstruActivists’ from both Nepal and beyond. Their experiences and views are documented in their own words. The opinions expressed are their own, not necessarily those of GIZ’s.



↑ Mr. Guna Raj Shrestha — National Coordinator MHM Practitioner Alliance

→ Dr. Marni Sommer discusses recommendations for the Action Plan during the MenstruAction Summit in Kathmandu.

↓ MHM changes lives, says GIZ’s Dr. Paul Rueckert.

*MenstruActivists.*  
Some movers and  
shakers behind MHM





**PEMA LHAKI**

Executive Director Nepal Fertility Care Centre (NFCC)  
an NGO founded in 1988 to focus on reproductive  
health and family planning issues in Nepal.

# MHM is the biggest topic around

*“I call myself a menstrual-activist. Social systems, customs and beliefs have always interested me, and now I see there’s a big convergence between these things and public health. Disempowerment and marginalisation have a huge impact on health outcomes.*”

*When I originally said that we needed to talk about menstruation and hygiene management, people laughed and said – ‘are you serious?’ These things simply weren’t being discussed at all. Now it is the biggest topic around – everyone is talking about it and lots of organisations have jumped on the bandwagon. It’s a big change, and it makes me happy. However, menstrual rights are just in their infancy and there are still many challenges.*

*The reality in Nepal is that access to hygiene is linked to a particular mindset about menstruation: There’s such a stigma surrounding periods that many women can’t ask for sanitary products or help. Menstrual health management is compromised when there are restrictive practices in place.*

*Such views are strongest in rural areas, and for many women – especially in Western Nepal – this is all they’ve ever known. But a recent study we conducted amongst*

1,500 women in Kathmandu showed that many educated, urban women are also still observing these restrictive practices, which makes it even more challenging to change mind sets and beliefs.

As a result, we need to be proactive rather than reactive when it comes to menstrual rights, and we need to have clarity of vision to bring about effective change and change these mind sets. This can be done through school curricula, better training of health workers and teachers and providing relevant information in local languages.

It's good to have a law to create awareness about Chhaupadi, but we are waiting to see how it will be implemented – it will be very challenging to enforce. Last winter there was a case of a woman who died in freezing conditions in the cow shed as a result of Chhaupadi. But her husband who enforced these restrictive menstrual practices is also the local police-man, responsible for enforcing the new law – so whilst I welcome the new law, I struggle to see how it will work in reality.

I think there is also a lot of confusion about Chhaupadi and a danger that it may dominate the debate too much and stereotype every Nepali woman, even though it is only one aspect of many more restrictive practices. These menstrual issues are also part of much broader health issues. Health, hygiene and rights are all related and health is often compromised because menstruating women have few rights.

We are planning to start a radio project in 2019, funded by Amplified Change, to work with 22 radio stations in nine districts in the Far West province. Policy makers, local leaders and religious leaders will take part in the radio discussion programmes to give information. The programmes will focus on helping people to understand the policy and its implementation – how it affects them and their faith. There will also be a hotline manned by local-level counselors. We need a space where people can ask questions and get answers. Women should have the agency to decide what happens to their own bodies.

Education is the key to changing mind sets, especially if you can talk to girls before they start menstruating. NFCC has also been working with GIZ and the Ministry of Health and Population to produce menstrual health packages to be distributed in schools in different districts. Teachers and health workers have been working together to educate sixth graders about their menstrual health and rights. This is a start, but many young people are outside the school system and are illiterate, so we need to find other informal entry points as well as through schools – and, very importantly, we need to talk to the boys as well, before they become men who enforce restrictive practices.

The MHM Practitioner Alliance is good for strategic clarity and gives people a chance to connect. Lobbying collectively is more powerful, especially when we need a cross-sectoral approach. We now need to consolidate the work to take the Alliance to the next level.

We need a broader definition of MHM and broader debate and engagement because only then can you have multi-sectoral action. To do this, we obviously need to work closely with the government, but I've found the government to be very receptive to these ideas now. However, having policies in place is just the start. It takes a long time to change mind sets.”

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[www.nfcc.org.np](http://www.nfcc.org.np)

**LAXMI TAMANG**

is a freelance researcher and consultant who serves as a board member of the Nepal Nursing Council and is Vice President of the Women's Rehabilitation Centre and Perinatal Society of Nepal.

## The need for better data and understanding of the issues

*"In 2017 I was involved in the largest ethnographic research on MHM that we carried out with peer and key influencers' in 12 districts of Nepal – from east to west, south to north and amongst diverse ethnic and caste and religious groups. This was the biggest research project ever conducted on this subject in Nepal, and the purpose of this study, which was funded by PSI, was to obtain in-depth insights on adolescent girls' understandings of menstruation, including their behaviour, beliefs and practices, as well as to find out about key influencing factors regarding these attitudes, and their knowledge about and access to MHM products and services.*



The research helped us to understand how key-influencers such as mothers, religious leaders and traditional health practitioners impact on adolescent girls' social situations and menstrual health and hygiene issues, and to explore the practices that surround MHM in Nepal. We found that many of these practices were reinforced by mothers, families and religious leaders, and that teachers had relatively little influence by comparison.

One of the key findings was that many of these restrictive practices such as Chhaupadi are reinforced through fear and religious beliefs that God will punish or curse you if you do not follow these practices. We were also surprised by the extent of these restrictive practices – in some areas girls are not even allowed to read any books – not just religious texts – whilst menstruating.

Although these practices are generally associated with Hindu beliefs in Western Nepal, our research found that there are huge regional variations across the country, with the most extreme practices occurring in Western Nepal, but with many Hindus in the lowland plains generally have a much more liberal attitude and fewer social taboos about menstruation.

**My father used to say we are all strangers in Nepal because we are so diverse.**

We also found that where many of these practices were in the past associated with the higher castes from the mountains, as attempts have been made to dismantle the caste system and there is greater mixing of the castes, restrictive menstrual practices have actually increased amongst other groups. Even in the capital Kathmandu there are some educated families who follow some of these practices, although generally in not such an extreme way.

I think the earthquake of 2015 was a turning point for many people. Many international and local NGOs came in and distributed new things such as toilet paper and disposable pads that many people had never seen or been able to afford previously. However, these are not good for the environment because there is often no safe or hygienic means of disposal. I remember seeing disposable pads that had been thrown into a river, which was used for drinking water further downstream.

**It is all about mind sets – unless we have a revolution in our societal mind, nothing will change.”**

[www.worecnepal.org](http://www.worecnepal.org)



#### SARA BAUMANN

is a University of Pittsburgh PhD student who has been conducting research on Chhaupadi in Nepal since 2015. As part of her research, she worked collaboratively with seven girls aged 16 to 18 from Kanchanpur District who were given training to produce a film about their own experiences of menstruation. The girls are from different castes and religions and beliefs. In the film they reflect on menstrual practices and come to their own conclusions that Chhaupadi is harmful. The film (<https://vimeo.com/239271038>) was premiered at the Kathmandu International Mountain Film Festival in December and the girls are now advocating against the practice and mobilising young people in their areas.

## Reflecting on restrictive practices through film making

*“As a research project, it was not our intention to change behaviours, but to allow a process of reflection. Through making the film we found there were so many narratives and complex and nuanced details on a variety of restrictive practices, even where Chhaupadi is not followed. For example, they often weren’t allowed to use the communal water tap. Caste, religion, social norms and pressures are the main factors.*

*Although it is women who perpetuate these practices, we need to engage the boys too and use them to advocate for change. In 2019 we are planning a pilot project to assess attitudes to and knowledge of menstruation amongst adolescent boys and men. The results will be shared with the MHM Practitioner Alliance.*



*Asked whether they enjoyed the process of making the film, the girls say they were happy to show their culture and talk about Chhaupadi and other menstrual beliefs and practices.*

*The film has resulted a lot of change in our own lives. The film was a first step towards changing restrictive practices. It will be hard to stop Chhaupadi altogether, but there has been change in the two years since we've made the film. We now only observe restrictions for four to five days rather than for maybe 10 in the past. The Chhaupadi huts are now built near to the house so are less isolated. Family attitudes have also changed. We can now use the tap water for washing ourselves, whereas we couldn't in the past. We still can't go to the temple, but we can walk around it. Compared to the past, girls also attend school when menstruating and are no longer missing their education and studies.*

*When we have children of our own we do not want our daughters to have to follow Chhaupadi and will not impose the practice on them. But we cannot bring about change by ourselves – we need help from outside organisations to change the mind sets of older generations.”*



→ Collaborative film-making project in Kanchanpur district





# Five Days

By DEEPA BOHORA a member of Word Warriors, a poetry collective based in Kathmandu.

*There is no rule in the Nepali constitution that says that a mother and a child need to be separated from each other after she held that child inside of her womb for nine months.*

*So how come I have to believe that menstruation, a natural process, must separate a mother from her daughter and a daughter from her mother once every month for at least five days?*

*Mom, you know your left hand is my pillow, and your right hand is my summer blanket.*

*You know I am afraid of not seeing anyone by my side at night. Every time I go to the bathroom in the middle of the night, you wake up to be my company and you wait until I am done.*

*Feel like I am inside your womb again. It's safe and I can always keep dreaming.*

*But why this tradition is so cruel? My dreams of it are always waking me up.*

*Those sounds at night of dogs and foxes beat hard in my ear drums. I start shaking in the middle of the night. I want to hug you tight, Mom! But I find nobody by my side – neither my pillow nor my summer blanket. I can't even turn on the light, it's beyond my reach. All I can hear are those rough sounds and all I can feel are those rough, thin rags on the floor.*

*Mom, you know that every month I take 10 times 30 pills. You know how much I suffer with the overflow of blood, back pain, stomach pains. And I always want my pillow to walk over my back, my waist and my stomach with a little mustard oil. And my blanket to feed me those five days.*

*But you always show me that rough muddy floor instead of a soft bed by your side.*

*You give me a separate plate, a separate glass for five days. I carry it myself and stay behind our kitchen's door. "Don't cross the line," You say. Then it feels like stabbing knife in my heart. I get emotional. Yes, you are my real mother, you gave me a place to stay inside of your womb for nine months. You fed me from your breast. But now you don't feel comfortable giving me a small space in your kitchen, a side in your bed for five days.*

*I was only 12 when I started hating five days.*

*Now, I am turning 20 and I still hate those five days.*

*It's January, I am waiting for five days.*

*It's December, I am again waiting for those five days.*

*But I am yet to change my mom.*

*Sometimes I think, I realise that changing the world – just like turning on the lights – is beyond my reach. I am afraid that I have a false dream.*

*Then all I can see in front of me are question marks.*

*Not just a single one, but so many...*



# Water and sanitation. The key to better menstrual hygiene

**NABIN KUMAR SHAHI**

is the WASH theme leader for the Karnali Integrated Rural Development and Research Centre (KIRDARC), an NGO established in 1999 to work in one of the most remote areas of Nepal, and a member of the MHM Practitioner Alliance.

Nepal's  
geography is  
the biggest  
challenge for  
water and  
sanitation

*“Geography is the biggest challenge for getting water and sanitation (WASH) services to these remote areas, which have been neglected by government for a long time. The costs of providing services to these areas are very high, and there is a lack of awareness, lack of adequate services and lack of resources and accountability.*

*Our organisation is trying to fight against these problems by providing WASH facilities, in so far as we have available funds, and educating girls in school and women in communities about hygiene. We are also strongly advocating to Government that these services should be provided.*

*MHM is also a social issue so the WASH sector cannot tackle this alone. These are very deep-rooted social taboos. We need to have lots of different forces working together very strategically and we need to facilitate multi-stakeholder platforms at local level, and to make government accountable.*



The Alliance has helped to provide national coordination and encourages us in our work because it brings together different donors and organisations from government and the development and private sectors. All the Alliance members share their experiences, best practices, resources, documentation and approaches and we can share tools and messages under one umbrella. It also helps to give MHM a higher profile at national and government level –

**the Alliance is chaired by the government, and this in turn helps us at local level if the national government takes these issues seriously. So the Alliance is a good tool and platform for us. We need to have one voice.**

We need better data and monitoring of MHM issues, and working together in the Alliance can help with this. Messages and campaigns need to be appropriate and contextualised for different regions in Nepal so that there's local ownership and collaboration.

Women's voices also need to be heard. Many women do not understand their menstrual cycle or know that it is a natural phenomenon. Our research shows that more than 70% of girls and women do not use any menstrual pads, either due to lack of awareness, lack of availability or high cost. In remote areas, they may have to walk many hours to buy them. So these are major practical difficulties for many women and girls.

Many schools have no proper toilet facilities or water. Girls may have to walk three hours to get to a school where there are no toilets, or no gender-friendly toilets or water. Even where the services exist they are not managed properly because of lack of money. Boys and girls may have to queue, so girls suffer many problems like teasing from the boys. As a result, girls drop out of school for around five days every menstrual cycle, and this has a huge impact on their education.

We found that more than 70% women in Karnali practiced Chhaupadi and stayed away from their homes during menstruation. But after our intervention, this has reduced by almost 40%. Some communities have even been declared Chhaupadi-free. We used different strategies like talking to traditional leaders and healers to get the message across that these menstrual taboos are not necessary. We also include boys and men in education on MHM, and include political cadres at local level. Another thing we are trying to do is empower women by supporting them to set up businesses. Media and social communication campaigns can also be effective in raising awareness about MHM – everybody has mobile phones now, even in remote areas.

Decentralisation has helped with this campaign because local government bodies are now interested in these issues. It has given us more entry points for political backing. Now we need to think about a top-down approach and roll this approach out to provincial and local levels where real action needs to be taken. There should be focal-point people at local and national levels. If policies remain on paper and are not implemented, they mean nothing – they should be implemented at the local level.”

<https://kirdarc.org>





**RUBIKA SHRESTHA**

is Knowledge Management Coordinator for HELVETAS Nepal, an independent Swiss development organisation.

# Addressing menstrual issues through WASH programmes

*“In Western Nepal we are trying to address menstrual issues through the WASH programme. We are improving water and sanitation facilities in schools and adding MHM-related waste disposal facilities.*

*We are conducting hygiene literacy classes in the community – how to use different products and handle them so that people can choose whether to use homemade cloths or non-reusable pads. Of course not all the products are available in the area as there are no supply chains in the market, but we are trying to give them the information and give them trial samples.*

*We are also teaching people how to make homemade pads and use and clean them safely. Due to the taboos around menstruation many girls and women are embarrassed to dry pads in the sun. They hide them behind or under other clothes. I also used to do that myself during my period when I was at school because I felt uneasy about showing my cloth to my parents, my brothers and neighbours. So we need to educate girls in the rural areas about these things.*

***However, educating girls is not enough because these are deep-rooted cultural issues and girls cannot make the necessary changes by themselves. We also need to work with communities.***

*The biggest challenge is to break deep-rooted cultural beliefs around Chhaupadi and other restrictions, so that girls eat nutritious food such as milk. People are still not accepting these things. They believe that if menstruating women eat ghee or don't observe Chhaupadi bad things will happen and their animals will die. These beliefs and taboos are very difficult to eradicate. Talking about menstrual products can be an entry point to talking about these issues and breaking the silence around them.*

*We hope that if all the Alliance members work together, Chhaupadi can be eradicated. But we cannot do it alone – the Government of Nepal needs to take the lead.”*

[www.helvetas.org/en/nepal](http://www.helvetas.org/en/nepal)

# Education to tackle taboos







**SUMAN ADHIKARI SILWAL**  
is Curriculum Officer at the Ministry  
of Youth and Sports.

## The government is incorporating MHM issues into the school curriculum

*“Our task is to devise a curriculum and text books for children aged six to 16 that include content on MHM and reproductive health.*

*We are doing this because of the advocacy that has happened around these issues, and we are committed to doing this. The government has allocated a budget for updating the curriculum and text books, and for professional training. Most teachers at government schools have already been trained. Our textbooks now address Chhaupadi and tell people it’s a bad practice and try to sensitise them. It takes time but we are committed and we have made a start. Education is the key to changing mind sets and improving MHM.*

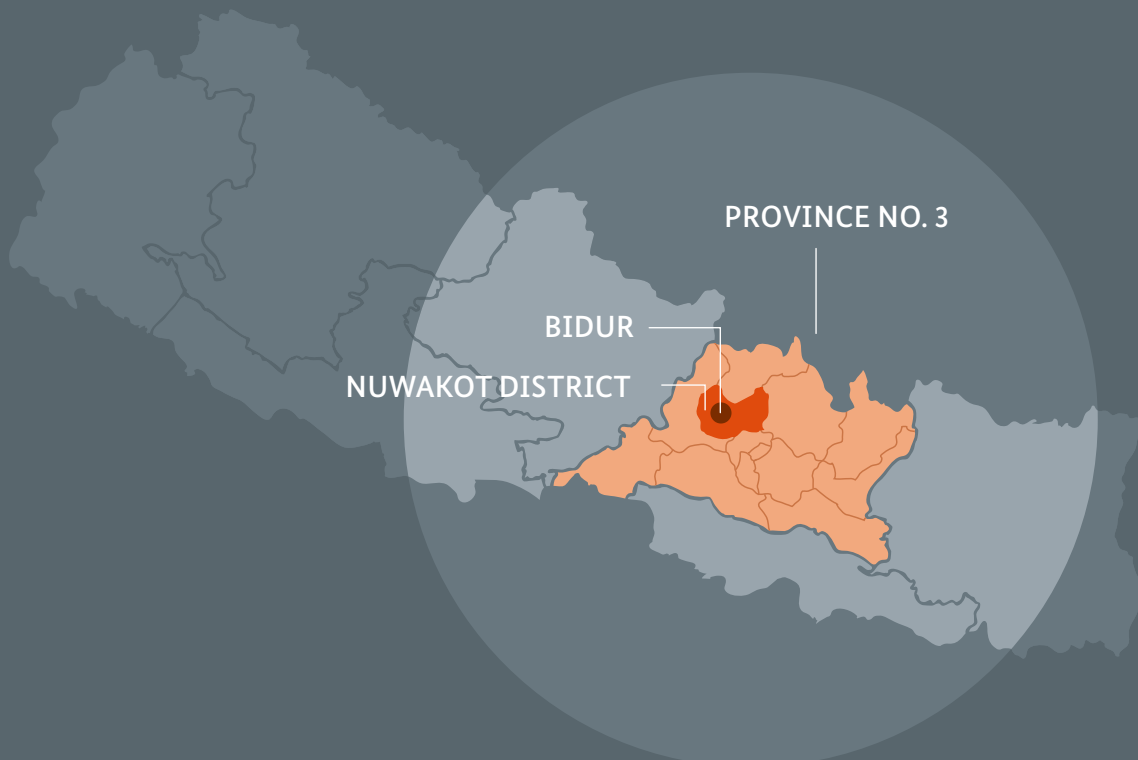
*However, I have to admit that so far the implementation work has been a bit poor, and the transfer of information has been difficult due to the stigma and lack of knowledge. There are still challenges in changing behaviour. Decentralisation has helped, but it requires strong coordination efforts.*

*Our upcoming generation is more aware and within a generation things will change.”*

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# Awareness and education in action: the example of Bidur Municipality

Bidur Municipality is the administrative capital of Nuwakot District in Province No 3. It has a population of around 60,000. The area was badly affected by the earthquake when many health facilities and schools, as well as homes, were destroyed or damaged. Although it is quite near to Kathmandu, poor roads and telecommunications make reconstruction efforts difficult.





### SANUMAYA RANA

is Health Coordinator for Bidur Municipality in Nuwakot District in Province No 3. She's a former nurse who worked for many years on the safe motherhood campaign.

# Raising awareness about menstrual health and hygiene management

*“In the Bidur Municipality – unlike in some of the Far West regions of Nepal – women are usually allowed to stay in the house, and not banished to outbuildings during their menstruation. But even during their period, women in rural areas still have to work in the fields doing heavy work such as digging and cutting grass for cattle.*

*Generally, only some women in urban areas use and can afford to buy sanitary pads. Most rural women cannot afford to buy sanitary pads and have to use dirty rags or cloth. There is little awareness about hygiene during menstruation.*

*As a nurse I used to tell people in my home that it was a natural process, but it was tough. Even as a young girl I tried to convince my mother to change practices. It was very difficult. There were no facilities and it was hard to be anywhere, at school, in the home or later at work in offices during menstruation.*

***I’m a strong lady and I believe advocacy is the answer – advocacy to other women and schools. Things are changing but not fast enough.***

*I have noticed that after the earthquake in 2015, the previously taboo issue of menstrual hygiene management has become much more prominent and a lot of organisations are now taking an interest in it. The geography of Nuwakot is challenging, and the main thing we need for MHM is a sustainable water supply, which is very important for handwashing and hygiene. That’s the main priority.*

*Our health department is trying to raise awareness about these issues. Last year an international NGO called Samaritan’s Purse International ran a programme to teach adolescents about menstruation. It was carried out through all the health posts and health workers went to different schools in their area to talk to students about menstrual hygiene management.*

*GIZ has also assisted us with training on issues of MHM in Nuwakot, and we also organised a rally of government and NGOs, health professionals and students to celebrate Menstrual Health Day in May and to create awareness about MHM.*

*In May 2017 we held a meeting between the ward chairperson, mayor, deputy mayor and teachers from the area, and decided that MHM is an important issue and we need to do something about it. Officials need to visit remote areas to see the conditions on the ground for themselves, rather than just talk about these issues. I took all my team to the MenstruAction Summit in Kathmandu in December – including the Mayor and Deputy Mayor and a teacher – so that they would learn from the Summit.*

***If you don’t engage high-level people like this, you can never make an impact.”***





#### GEETA KUMASI DAHAL

is the Deputy Mayor of Bidur Municipality. The new constitution has given many new rights to Deputy Mayors and Geeta is the chair of the legal and financial committees and responsible for monitoring activities within the municipality and coordinating with NGOs.

## Allocating resources to schools for MHM

*“Decentralisation has empowered local governments to address adolescent health and MHM.*

*Everyone – girls, mothers and teachers should be more aware of MHM as it concerns everyone.*

*Only around 15 to 20% of local women and girls can afford to buy sanitary pads. Others use reusable cloths which – as long as they are cleaned properly – save money and are better for the environment.*

*Sanitary pads are not only expensive; they are also taxed by the central government because they are imported products. We do not have the power to reduce these taxes at local level.*

*So far, we haven't been able to change many of the customs and traditional ways of thinking about menstruation in our community – the old beliefs are still there and are being followed.*



## "WHAT GETS MEASURED GETS DONE" MENSTRUAL HYGIENE MANAGEMENT

Direct and indirect MHM Indicators within the Sustainable Development Goals (SDGs) WASH in Schools Monitoring Framework to be measured in each school using the EMIS – Education Management Information System



### EMERGING WHO-UNICEF JOINT MONITORING PROGRAMME SERVICE LADDERS FOR MONITORING WASH IN SCHOOLS IN THE SDGs

DRINKING WATER	SANITATION	HYGIENE
<b>ADVANCED SERVICE</b> Additional criteria may include quality, quantity, continuity, and accessibility to all users (to be defined at national level)	<b>ADVANCED SERVICE</b> Additional criteria may include student per toilet ratios, menstrual hygiene facilities, cleanliness, accessibility to all users, and excreta management systems (to be defined at national level)	<b>ADVANCED SERVICE</b> Additional criteria may include hygiene education, group handwashing, menstrual hygiene materials, and accessibility to all users (to be defined at national level)
<b>BASIC SERVICE</b> Drinking water from an improved source and water is available at the school at the time of the survey	<b>BASIC SERVICE</b> Improved sanitation facilities at the school that are single-sex and usable (accessible, functional and private) at the time of the survey	<b>BASIC SERVICE</b> Handwashing facilities with water and soap available at the school at the time of the survey
<b>LIMITED SERVICE</b> Drinking water from an improved source but water is unavailable at the school at the time of the survey	<b>LIMITED SERVICE</b> Improved sanitation facilities at the school that are either not single-sex or not usable at the time of the survey	<b>LIMITED SERVICE</b> Handwashing facilities with water but no soap available at the school at the time of the survey
<b>NO SERVICE</b> Drinking water from an unimproved source or no water source at the school	<b>NO SERVICE</b> Unimproved sanitation facilities or no sanitation facilities at the school	<b>NO SERVICE</b> No handwashing facilities available or no water available at the school

#### ADVANCED SERVICE

- > Access to information
- > Cleanliness of toilets
- > Water & soap in cubicles
- > Covered bins
- > Disposal mechanisms
- > Functional lighting
- > Emergency MHM material

SDG 4

#### BASIC SERVICE

- > Sanitation facilities
- Gender-segregated
- Usable: \_\_\_\_\_
- Accessible \_\_\_\_\_
- Functional \_\_\_\_\_
- Private \_\_\_\_\_
- > Handwashing facilities with water & soap



**TARGET 4.a:** Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non violent, inclusive and effective learning environments for all.  
**INDICATOR 4.a.1:** Proportion of schools with access to: (f) single-sex basic sanitation facilities; and (g) basic handwashing facilities (as per the WASH indicator definitions)



**TARGET 6.2:** By 2030, achieve access adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations.  
**INDICATORS:** See 4.a.1 for WASH in schools indicators

↑ Schools provide the ideal environment to reach all girls and boys as well as to address taboos and misconceptions about menstruation in a culturally sensitive manner. Ministries of Education have the power and the responsibility to transform schools into places with MHM-friendly sanitation facilities and easy access to information about menarche and menstruation. *Source: GIZ Fit for School, <https://bit.ly/2LHuyHU>*

**People believe that when a girl starts menstruating, she is ready for sex, and she tends to be looked at differently by her peers and teachers.**

Even female teachers tend to discriminate against girls who have their periods, and if girls ask for a sanitary pad they sometimes yell at them. It's a form of mental or emotional abuse and we still have not been able to create a supportive environment for the girls. We are now thinking of training both the girls and their teachers about MHM so that it will be easier for girls to ask for help when they need it.

But compared to a few years ago women and girls are much more conscious of and pay better attention to hygiene during menstruation. They know it is better to use a clean cloth or menstrual pad. We also have emergency supplies of sanitary pads in schools, so girls do not have to drop out of education every month. However, although there are girls' toilets in schools now, some still do not have running water, so that's still a big problem. No girl should feel that she cannot go to school because she has her period.

The budget allocation for this distribution of emergency sanitary pad supplies to schools is around 2,000 Euros, and this money will be allocated to schools to keep the distribution going. However, distributing free sanitary pads is not a long-term solution that we can do for ever. We need to think about sustainable solutions. If there's no water, nothing is going to work. There needs to be gender-friendly infrastructure. If schools do not have these in their construction plans, the local authorities will not approve those plans. Ensuring there's a proper water supply in each school is the priority.

In addition, we have just started psycho-social counselling for adolescent girls, including on the stigma and discrimination around MHM issues. We have already trained five counsellors and started the work in one cooperative, but are planning to roll it out throughout the municipality. We are also campaigning against early marriage and polygamy to bring about behavioural change and change mind sets. We want to build capacity and empower women."



### RASMITA PAUDEL

is GIZ technical advisor and focal person on adolescent health and development component.

## Working with young people

*“There are around 10–12,000 adolescents in Bidur Municipality, out of the population of around 60,000, and they will be the main focus of GIZ’s newly-launched adolescent health programme, working through schools. GIZ is supporting the municipal budget so that they can buy pads and distribute them to a few schools for free use during an emergency. In some schools girls need to replace the pads they use, in others they are given out for free.*

*There are lot of challenges. The biggest challenge is changing mind sets and that is hard to do. However, we also need to respect the culture as well as encourage positive change.*

*Reconstruction after the earthquake presents an opportunity to improve infrastructure and have girl-friendly and disabled-friendly facilities, but the government has not given much consideration to these issues. This has been a missed opportunity to improve MHM. Many municipal offices and health facilities do not have gender-friendly toilets. Even where the infrastructure exists it is not being maintained or being taken seriously. Men need be included in the discussions. We are including boys and men, male teachers and decision makers in the debate.*

*GIZ is also helping Alliance members and NGOs working in MHM to draw up recommendations for an Action Plan for the Government of Nepal to adopt. This will be the biggest step towards MHM – not the final step, but a beginning.”*





**RUPA ARYAL**

is Chief Executive Office of MIX FM,  
a community radio station in Bidur Municipality.

## Using radio to break down taboos

*“The station already has around 30,000 listeners from all age groups in Nuwakot, Rasuwa, Dhading and Makwanpur. We broadcast a mixture of programmes, including news, music, informative and interactive shows, and teenagers often send us messages and call.*

*As a new station, it is difficult for us to produce our own content as we don't have the money or expertise to make specialist programmes about issues such as menstrual health and hygiene. One of the shows we broadcast is a 16 part series on adolescent health and development that GIZ gave us. There are episodes on topics such as love and affection, relationships, puberty, menstrual health management, sexual behavior, contraception and sexual and reproductive rights. The programmes last 40 minutes and we broadcast every Friday at 5:15 pm and on Saturday at 11:00 am. I believe such programmes can make a difference and help to educate and inform people about difficult issues that were previously little talked about.*

*In the past, menstruating women and girls weren't allowed to sleep or eat in the same area as men. Now a lot has changed and the community elders have started to say that menstruating women and girls can carry on with all the chores around the house after taking a bath.*

*Menstruation is something that happens to all women. And in my community we say 'samasyakorup ma mandainan aba you prakriyamancha' – 'it is not a problem but a natural process'.”*

# Inventions, innovations and sustainable solutions

A variety of ideas and solutions are currently being considered and developed in Nepal — including several types of low-cost, reusable or biodegradable menstrual pads as well as different types of menstrual cups, reusable period underwear, period subscription boxes and mobile applications for delivering products and information. Nepal's first menstrual pad vending machine is also being distributed and an innovative sanitary bin collection scheme has also been developed, along with projects using comic books on menstruation and interactive theatre to improve knowledge and information about menstrual issues. In this chapter we hear from a few of the people behind some of these initiatives.



← Menstrual cups and information materials on display at the innovations fair at the MenstruAction Summit in Kathmandu in December 2018.



### MANIKA BUDATHIKI

is the elected Chairperson of the women's cooperative supported by GIZ producing low cost sanitary pads in Semjong VDC in Dhading district. Along with another cooperative in Sikre VDC in Nuwakot district, Semjong was selected by GIZ to implement small start-up initiatives for the production of low-cost sanitary pads, using a simple and easy to use machine designed by Mr. Muruganantham Arunachalam from Coimbatore, India.

## Producing low cost sanitary pads



*“We do not follow the more extreme Chhaupadi traditions that are followed in the far west of Nepal. Traditionally in our community, when a women or girl starts menstruating they aren't allowed to touch or attend places of worship or allowed to go to the kitchen and cook. However, if there are no other female members in the house, they are then allowed to enter the kitchen, cook and clean. The first time a girl has her period she has to stay for five or six days in a 'Gufa' or separate room with thick curtains on the door and windows to block the sunlight. After that they bathe and the girls are given a present and blessings by the father, and they can subsequently sleep in the same room as other family members if there no space for her to sleep in another room.*

*I sometimes use a cloth during my periods, or sanitary pads when I'm travelling or away from home for a long time. Since my daughter got her first period she has been using sanitary pads. We bury soiled sanitary towels in the ground.*

*Before the local sanitary pad factory was set up I knew about sanitary pads, but it was difficult to buy pads locally, and my daughters used to get them for me in Kathmandu. Now I use our locally-produced products.*

*We sell the low cost sanitary pads made in our cooperative for 50 Nepali rupees (35 cents). Women come here to buy it or call us as we don't really supply it in stores. We haven't really had to do any marketing of the product in the community because with a hundred or so members of the cooperative, word gets around and whenever we meet new people we tell them about our product. It is mostly local women who come to buy the sanitary pads, and here are fewer buyers from the surrounding areas because the roads are inaccessible during the monsoon season.*

*We started production in April 2016 and members of the cooperative come in on a voluntary basis to help out for two or three hours a day. So far, the cooperative does not have enough money to hire or pay permanent staff. Once we start making a profit, we will be able to start paying people. This will be really helpful because before I started working at the low cost sanitary pad unit I did not have any steady source of income except what from I could grow in my garden.*

*We have received training from the Chaudhary Foundation, supported by GIZ, on running a business and how to do marketing and keep accounts of our income and expenses on a daily basis. As a result of this training we are now planning to market our products in local stores in the area. We are also going to give them to schools and tell the students how to use them.*

*It's exciting — some time ago, some senior people from the Ministry of Health and German Development Cooperation came to visit the production unit, and we have also had visits from other organisations keen to see what we are doing here and there has been a lot of media interest.”*





### GYAN MAHARAJAN

is President of X-POSE NEPAL, a Kathmandu-based NGO working against sexual abuse and exploitation and for menstrual hygiene.

X-POSE Nepal is currently working with 22 women's groups in the Kathmandu valley.



↑ Reusable pad produced by X-Pose Nepal.

*“Many city women and girls also suffer from MHM issues but they don't talk about it: It is not just a rural problem. We are training 22 women's groups to make eco-friendly, reusable cloth sanitary pads because thousands of tonnes of waste are generated every month when pads are disposed. We buy the pads from the women and sell them here at our shop. This gives the women some income and helps to empower them and gives them greater status within the family. We want to encourage them to generate income.*

*The reusable pads consist of two colourful pieces of cloth that fold into pads that sit inside a cloth frame. We supply the material for making them and train the women how to sew them using a template. We produce two types of pads – normal and thicker night-time pads. Everything is washable and they can be dried in the sun. We also teach the women how to use them and how to keep them clean.*

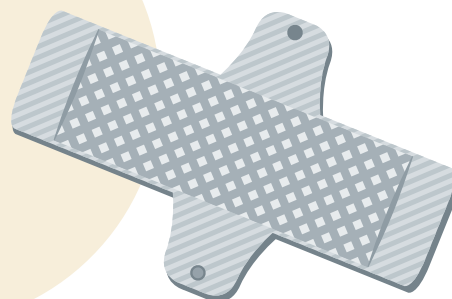
*We must also encourage the boys and men to learn and be aware about menstruation. Otherwise we cannot be successful in fighting discrimination. Menstruation is not only a women's problem – it's our problem also because we all have mothers, sisters, wives and daughters.”*

[www.xposenepal.org.np](http://www.xposenepal.org.np)



↑ Boys need to learn about menstruation too.

# Homemade eco-friendly, reusable cloth sanitary pads

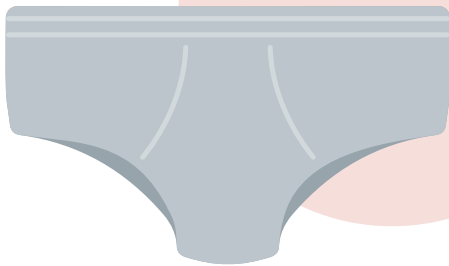




### RUBY RAUT

is the Chief Executive and co-founder of WUKA wear, a UK-based start-up company producing reusable period pants. Ruby, 20 years old, was born in Nepal and currently lives in the UK. WUKA – which means ‘Wake Up, Kick Ass’ – was set up just over a year ago with a £6,000 crowd funding appeal.

## ‘Wake Up, Kick Ass’

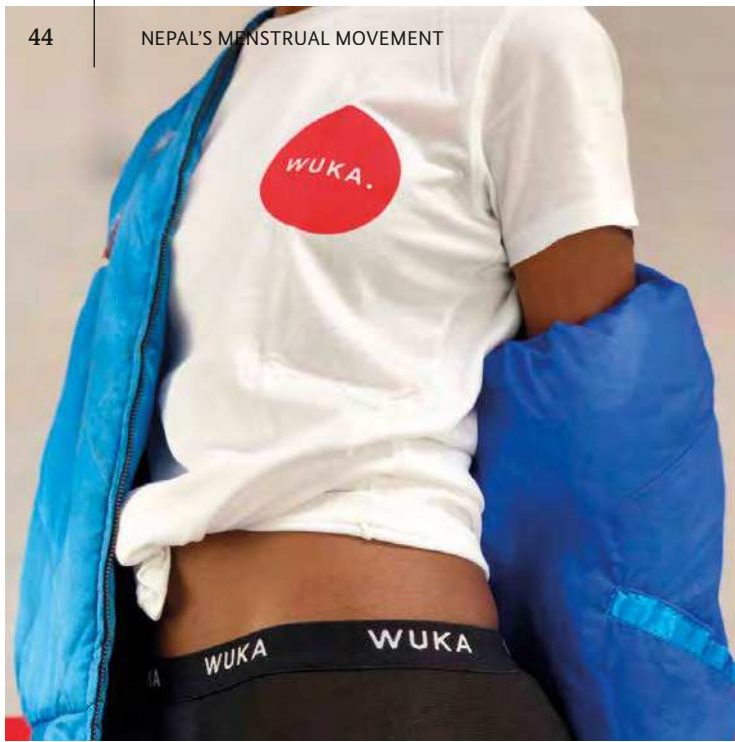


*“WUKA makes reusable period underwear that completely replaces tampons and pads. We are the only period underwear that does that, as opposed to others that are used as a back-up. The idea is that we should create less waste. Just in the UK, more than 200,000 tonnes of tampons and pads goes to landfill every year, so this is a significant amount of waste. As a passionate environmentalist I thought we could create underwear that completely replaces all of these products, so people who want to live a sustainable, eco-friendly life and have a comfortable period, have got an option.*

*Periods have very negative connotation: They make you feel emotional because of hormone fluctuation; there is physical pain, social taboos around periods and the environmental burden as well. So when we were trying to come up with branding for the product, I wanted a more positive note to it so that even though you may be feeling those things, you know you’re a woman and have the power to do anything you want to do, even during your period, so nothing should stop you. That’s the message of WUKA – ‘Wake Up, Kick Ass’ – feel that every day!*

*We did a lot of research. The first six months was all about fabric research – what was the best absorbent and leak-proof fabric on the market? We found this amazing fabric that’s only made in the UK and absorbs 200 times its own weight in water. The fabric is actually used for underground cabling – to prevent water getting into cables – and in some waterproof clothing, but had never been used for menstrual products before. It’s a man-made fibre but can be recycled.*





When we talked to the manufacturer about the properties of the fabric and found that the fabric itself has anti-microbial properties so we didn't have to add any other chemicals. So it was great to find a fabric that already has those properties and can be washed and cleaned in a very easy way.

When we found this fabric, I bought a second hand sewing machine, a regular pair of pants from a supermarket and experimented with absorbent, leak-proof materials and started using it myself, washing it and testing that it comes out clean.

The key to success is getting the private sector involved. People on the ground know how to approach things and what works. Working in collaboration with those initiatives is the way forward.

I think there is definitely scope for cross-subsidies and for international non-governmental organisations to subsidise the cost so that women can afford the underwear a reasonable price. They can reach out to women that we cannot. We will need to collaborate with other organisations working in WASH programmes to reach as many girls as possible, especially at this early stage.

*I had a meeting with somebody today who told me that in Far Western parts of Nepal, many people don't even have underwear. I was really shocked and sad to hear that because I assumed that everyone wore underwear. Apparently, if a family does have underwear, they often have to share it – a mother shares with a daughter or daughter-in-law for their periods. We need to start by providing them with regular underwear and telling people it is for hygiene and cleanliness, so that in future if they use cloth pads, at least they can put them inside their underwear.*

*The taboos are so deeply embedded in our brains from the day we are born. Many urban, high-profile women, not just poor, rural women still, practice some sort of restrictions – maybe not extreme Chhaupadi where you have to go to the cow shed, but sleeping separately in the home, not touching food etc.*

***Change has to come from within. People need to share their stories so it resonates with people and they start sharing their story too.***

*Whether it's the 'MeToo' movement, or domestic violence, the world needs to know so that we can come together and work together to end this.*

*The elders are like Gods in our society and because of that nobody asks why am I doing this? Culturally it is quite difficult. We need to educate the elderly that we are not unclean or impure during menstruation. Young people are definitely eager to change – even boys want to understand what's going on – because we all live together in society. We definitely need to change attitudes. Girls need to ask more questions."*

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<https://wuka.co.uk>





**JESSELINA RANA AND SHUBHANGI RANA** are the co-founders of Pad2Go, a social initiative which has brought commercially used sanitary napkin vending machines for the first time in Nepal. Jesselina describes their vision.

## Nepal's first sanitary napkin vending machines



*"I am a recent law graduate from the National Law University in Delhi and when I came back to Nepal, my colleague and I saw the potential of making sure sanitary napkins were easily available to women across Nepal through sanitary napkin vending machines.*

*Pad2Go's vending machines are not manufactured in Nepal – we had to import them from India, although ultimately we'd like to manufacture them here in Nepal.*

***It's very easy to use the machine: It is manually operated and does not require batteries or electricity. With one token, you twist the knob and a napkin comes out from the vending machine.***

*We looked at the idea of adapting the machines to take Nepalese rupees, but that would have cost a lot, so we decided to use tokens instead. Also, initially we wanted these vending machines to be mostly in schools and colleges, where children are not allowed to carry money with them, so the token system was more of a viable option. The tokens are given to a member of staff on duty, either someone who cleans the toilets or any teacher or receptionist who's nearby and easily accessible.*

*In our business model, the machines are rented out to schools or offices and the napkins have to be paid for, but at a much lower cost than the market rate. Our project started in Kathmandu, but we plan to go beyond the capital. We'd like to get as many machines as possible out there, but we still have a long way to go with regard to information about the vending machine, as well as the logistics. Social-media has played a very important role for us. We're marketing it through social-media.*

*We want to figure out a way of establishing a model – we like to call it the Robin Hood effect – redistributing income in order to decrease economic inequality. For every pad you buy from our vending machine, we give the proceeds to construct toilets in the schools of Badura which has one of the lowest female literacy rates."*

[www.facebook.com/pad2go.np/](http://www.facebook.com/pad2go.np/)

↓ Nepal's first sanitary pad vending machines.



↓ Pad2Go machines are rented out to schools and offices.

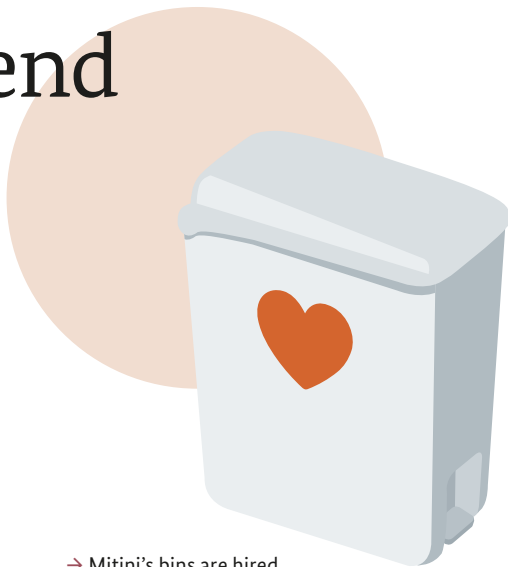




### VIVEK SINGH THAKURI

is Executive Director of MITRA Samaj, a Kathmandu-based NGO founded in 2006, now largely operating as a consultancy firm doing research and capacity building work and communication campaigns for the public and private sectors.

## Mitini — a girl's best friend



→ Mitini's bins are hired by restaurant and offices.

*“Menstrual health is just one component of our work. The initiative for which we've received a lot of recognition is Mitini, a social entrepreneurship initiative that started in 2015. Mitini means a girl's best friend in Nepali.*

*The idea came about after I came across data on the internet which said that 41% of girls in Nepal miss school for several days once a month during their period. That equates to around 15 to 20% of their academic year and it means they graduate with inferior grades and find it difficult to get good jobs. Our subsequent research into MHM with a larger sample size found fewer girls (around 21%) weren't going to school during their period, so this was lower than previous estimates. It shows we need better research and data on these issues, but still I thought this was something we really needed to do something about.*

*We started thinking about a sanitary pad disposal collection service and approached a local restaurant. By coincidence, someone had just flushed a used sanitary pad into the restaurant's system causing a lot of damage and costing a lot to unblock — for the third time — so they were already thinking about this.*



*There are no bins available on the market in Nepal, so we had to import them and design nice stickers etc. We wanted it to appeal to the private sector because charity doesn't last for long, and we are trying to sell these services to the private sector, so we want everything to look perfect.*

*The bins are our property and we place these bins in offices and restaurants who sign a contract with us. We charge 2,000 rupees (around 15 Euros) per bin for a month. Any additional bins are 500 rupees, because the main cost is collection. Our cleaning staff go every alternative day to collect the used sanitary pads disposed in the bins and they bring the contents back here and dispose of them properly in an autoclave. It is quite expensive to do this, but for environmental reasons incinerators are not recommended by WHO, so we felt this was the only option open to us. Once the waste has been sterilised, the waste goes to the authorities' landfill system. We are looking for other options. The whole world is facing this problem of waste disposal and so are we.*

***Profits from the Mitini waste disposal initiative go to buying pads for free distribution in schools to reduce school absenteeism.***

*We also organise fun-filled days for girls in schools. We ran a campaign called 'Four days of fun' on social media with celebrities talking about the issues.*

*The aim of the campaign is to break the silence and talk about menstruation. We have established a sanitary pad bank in more than 100 schools in and around Kathmandu so far, and are also working with an orphanage after they approached us. We are also thinking about getting sanitary pad making machines in the future.*

*Mitini receives no donor funding and is designed to be a self-sustaining programme. We do not want to be donor-dependent. Our dream is to set up something 'by Nepalis, for Nepalis'. But we do now have couple of other menstrual health initiatives that are funded by WaterAid and a new programme with GIZ in the Far Western Region, where we will be running interesting and fun training sessions for public health officers and school health focal persons, teachers, school management teams and kids*

*We think a multi-sectoral approach, which includes the private sector, is very necessary. But at some point the state needs to pick this up – we are just a pilot model and don't have the resources to work in the most remote parts of the country.”*

<https://mitrasamaj.org/mitini/>

↓ Mitini's cleaners sterilise used sanitary pads in an autoclave.





# The role of the private sector in promoting MHM





#### JIBLAL POKHAREL

Managing Director of Nepal's CRS Company, says the private sector has a big role to play in distributing affordable menstrual products such as pads and cups. CRS was started in 1978 as Contraceptive Retail Sales, with funding from USAID and later became a not-for-profit company which mainly supports the governments family planning efforts. It does social marketing of contraceptives and over 50% of contraceptives and 45% of all condoms used in Nepal are distributed through CRS.

## Social marketing of menstrual products

*“Because the donors’ focus is shifting to other areas such as adolescent health and menstrual hygiene we are thinking of expanding into menstrual hygiene products. Initially we intend to carry out social marketing and promotion of 100% biodegradable sanitary pads. Other menstrual pads are primarily made of plastic and don’t decompose so cause of a lot of environmental problems. We will not manufacture the biodegradable pads ourselves, but will buy products made from bamboo or banana cellulose which is 100% biodegradable. We will do a global tender for that.*

*Much of this work will focus on poorer regions in Far West Nepal, which has received a lot of attention because of the taboos and practices related to Chhaupadi. We are not trying to target Chhaupadi – we will talk about it, but our aim is not necessarily to change practices. The use of sanitary napkins is lower in the Far West than in other parts of Nepal, so that’s the main reason for going there.*

We received funding from KfW, the German Development Bank, and right now German Development Cooperation is constructing referral hospitals in the West and Far West to improve maternal and infant care in remote areas. As part of that programme they have a social marketing component – initially for contraceptives, but now expanding into menstrual hygiene products. Initially the KfW project will focus on four districts in the Far West/Province 7 but later these biodegradable products will be available all over Nepal and we will launch the project nationwide.

**CRS is a non-profit organisation, so we have done surveys about pricing menstrual products according to what people in rural areas can afford to pay.**

We estimate that it should be about 40 to 45 rupees for a pack of eight. Commercially marketed products which are not biodegradable can cost in the region of 200 rupees for premium imported brands. Even if it has to be subsidised we will make sure the biodegradable pads are priced below 50 rupees. Most Nepali households are supported by remittances so it should not be too difficult for most households to set aside 40 to 50 rupees once a month. But in addition to providing cheaper products, we want to address the environmental aspect as well.

In the Far West we are targeting schools in four districts. We plan to work with local NGOs as well and the programme consist of training teachers about menstrual hygiene and giving them knowledge, skills and resources so that these teachers will then go back to their schools and teach menstrual hygiene there. We are trying to make it interactive by introducing simple games like snakes and ladders about menstrual hygiene. These games can be modified to address myths, taboos and misconceptions about menstruation and make it much more fun to learn. At the same time, we are also trying to engage the boys – not just the girls.

I think the private sector can play a big role in addressing the availability and affordability of products, which are big concerns. The government of Nepal requires the private sector to spend around 1% of their annual income on corporate social responsibility. Maybe companies can spend this money on promoting menstrual hygiene. What I would really like to see is the private sector championing one area or school because I think the private sector has an important role to play.

CRS has a very strong distribution network all over Nepal – we work with around 90% of the pharmacies as well as non-traditional outlets such as corner grocery shops. So I think CRS can play a big role in improving the availability of menstrual products as we already have a distribution network set up. We are also an established and trusted brand, and that helps.

We have also been thinking about menstrual cups as an alternative to biodegradable pads, but the imported ones – the only ones available so far – have been too expensive: They cost around 23 Euros and we felt that that's going to be prohibitive in the rural areas we are targeting. However, at the MenstruAction Summit I met a man from India who sells them for 200 Indian rupees (around 2.5 Euros), and that got my interest – so the first thing I did after the Summit was talk to my directors here about what they think about this. We could still launch the sanitary pads and also the menstrual cups – we need to give women choice. Whatever they feel comfortable with, they should be able to use that. Our motivation is to improve menstrual hygiene management rather than just to prescribe a certain product.

I think the Alliance has a big role to play in coordinating, documenting and sharing resources and research from all the various organisations and initiatives working on MHM. People have been working in isolation and sometimes there is duplication of efforts... I think if we pool our energies, we can achieve much more than what we'd achieve individually. I am very hopeful about the Alliance. We also need to work at government and policy level, and that's something that the Alliance can do."

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[www.crs.org.np](http://www.crs.org.np)





### MERINA RANJIT

is Assistant General Manager of the Chaudhary Foundation, a social initiative of the Chaudhary Group, which is one of the biggest private sector companies in Nepal. The Foundation works on different thematic areas, such as social enterprise development, livelihood and skill development, health and sanitation, education, cultural and heritage and so on. It tries to ensure that its work will be sustainable, rather than just philanthropy.

## Building bridges between the private and public sectors

*“As a Foundation, we started talking about menstrual health and hygiene issues a few years ago.*

***But at the time, we ourselves could not really talk about menstrual issues very openly – it was a commercial office boardroom and we were embarrassed to be talking about menstrual hygiene issues!***

*I still remember the board’s faces when we first started talking about this!*

*We started working with GIZ after we found out they were promoting the production of local sanitary napkins through their health sector programme in two areas. The cooperatives had been given technical training about operating the machinery, but they hadn’t been trained in how to manage a sustainable social enterprise. So that’s where we came in – to train them in the basic requirements of running a social business – how to keep accounts, manage their people etc. We designed a custom-made programme for the GIZ team. In addition, our work in menstrual hygiene involved a small pilot project in one of the earthquake-affected areas, where we were helping with the rebuilding efforts. As part of this work we trained a women’s group to make reusable hand stitched cloth napkins (as opposed to GIZ’s technical initiative to help produce disposable pads that were similar to those available on the market.) This involved providing 15 days’ of training.*

***We have also been thinking about alternatives such as menstrual cups for a while...***

*That is something that we as an institution are interested in promoting under our social enterprise development arm because there is a growing awareness of the environmental aspects of disposing of menstrual products. These cups should be accessible to everyone and we would like to explore how we can produce them locally, at an affordable price in Nepal. Personally and from an institutional-point of view this is something that we would really like to explore because that will help our environment more.*

***We also need to lobby the government for tax exemptions on menstrual products – they are not a luxury item but a necessity.***

*We feel we are the bridge between the private sector and the public sector – and that’s where the collaboration should come in. There’s a lot of advocacy and research in the public sector – but it needs to be a blend with business. That link is nearly always missing in most of the development sector. Information should be accessible and shared, and we can do this through the Alliance.”*

# Conclusion

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From this brief account of just a few of the MHM initiatives that have been tried in Nepal in the last few years, it is clear that this is a dynamic and fast-moving sector.



The formation of the MHM Practitioner Alliance enables both public and private organisations and individuals working in MHM to be proactive rather than reactive when it comes to menstrual rights, and to develop clarity of vision, especially when it comes to developing and distributing new products and services, or campaigning against the taxation of menstrual products as luxury goods. Private companies are also beginning to take up or fund MHM initiatives as part of their corporate social responsibility commitments required by Nepali law. Bringing together diverse public and private organisations under the umbrella of the Alliance has led to an important Community of Practice on MHM and greater coordination and has been found to be a helpful channel to strengthen the culture of knowledge transfer within and across projects and programmes, allowing comparisons, critical reflections, transversal analysis and knowledge uptake.

Effective change can only come about through more political and public attention, multi-sectoral approaches and discrimination against menstruating women and girls will only be reduced by breaking the silence and ultimately changing mind sets towards the important role and the rights of girls and women in the society. This can be done through combined approaches, awareness, information and advocacy in schools and outside of schools, providing relevant information in local languages and (dialogue) platforms for the active participation of decision makers and challenging the association of menstruation with religion and tradition. There also needs to be greater recognition of the fact that menstrual health and hygiene are also part of much broader health issues. Health, hygiene and rights are all related and health is often compromised because many menstruating women have limited rights.

With its focus from the outset on biodegradable or reusable/homemade menstrual products, and eagerness to try newer technologies like menstrual cups, with the right leadership and vision, Nepal could become an example for other countries to emulate.

The next step will be to try to harness this energy and turn it into a meaningful Plan of Action to keep this momentum going. There has been much progress, but there's undoubtedly still a long way to go.

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# Recommendations from technical working groups at the MenstruAction Summit December 2018 in Nepal

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Summaries of these key recommendations were presented by the working groups to the Summit Plenary meeting and the recommendations as a whole will be developed into a MHM Plan of Action for 2019/20 for further discussion with the Government of Nepal.



## WORKING GROUP 1

## EDUCATION, AWARENESS AND LEARNING

**MODERATOR:** Ganga Gautam, Associate Professor, Tribhuvan University  
**INTERNATIONAL SPEAKER:** Marianne Tellier, Executive Director, WoMena  
**NATIONAL SPEAKERS:** Sandhya Chaulagain, WaterAid Nepal;  
 Shreelata Rana, Nepal Red Cross Society Community Eye and Health Promotion Programme;  
 Nabin Shahi, Karnali Integrated Rural Development and Research Centre

**KEY RECOMMENDATIONS:**

Consolidation of MHM education and awareness resources produced by Alliance members.

Production of age-appropriate MHM materials and resources in the form of infotainment.

Integration of MHM content in school curriculum and textbooks with built-in monitoring mechanism.

The Alliance should publish a calendar of events and information about initiatives, so that all members are kept informed about what everyone is doing.

Non-formal education in MHM with defined target groups.

National, federal and local level awareness campaign to fight menstruation taboos and social stigma.

## WORKING GROUP 2

## WASH AND HEALTH

**MODERATOR:** Bibek Balla, Hygiene Promotion Officer, Dan Church Aid  
**INTERNATIONAL SPEAKER:** Jan-Christoph Schlenk, WASH Policy Adviser, GIZ  
**NATIONAL SPEAKERS:** Subeksha Poudel, Senior Manager, Possible Health  
 Phurba Moktan, Sanitation and Hygiene Specialist, CARE Nepal

**KEY RECOMMENDATIONS:**

There should be an allocation for MHM services within governments' annual budget.

All sanitation facilities in public institutions – especially schools – should be made female-friendly.

Promote sustainable, affordable and environmentally-friendly MHM products.

Restrictions should be treated as a serious threat to girls' and women's health and wellbeing.

There needs to be more focus on monitoring of MHM services and data should be used for evidence-based planning.

Community-based health workers are key to holistic planning and delivery of MHM at local levels.

## WORKING GROUP 3

# INNOVATION AND SUSTAINABILITY

MODERATOR: Susma Thapa, Freelancer

INTERNATIONAL SPEAKER: Janie Hampton, Author and Activist, World Menstrual Network

NATIONAL SPEAKERS: Rajesh Bhagat, CRS Social Marketing Company in Nepal

### KEY RECOMMENDATIONS:

Menstrual pads need to be made more affordable and environmental friendly.

Menstrual pads should also be biodegradable and menstrual cups encouraged, to address the growing environmental waste issues.

Menstrual products need to be exempt from import duty and sales tax.

Toilet facilities need to be MHM-friendly, clean, private and appropriate.

Appropriate environment friendly waste management.

## WORKING GROUP 4

# POLICY AND ADVOCACY

MODERATOR: Guna Raj Shrestha, National Co-ordinator for Nepal, Water Supply and Sanitation Collaborative Council

INTERNATIONAL SPEAKER: Gloria Lihemo, UNICEF Pakistan

NATIONAL SPEAKERS: Uddhav Khakurel, Nepal Fertility Care Centre

### KEY RECOMMENDATIONS:

A co-ordinated MHM policy needs to be formulated with a Plan of Action drawn up to translate intentions into reality.

There is a need for multi-stakeholder discussions, including all the government ministries concerned (women and children education, health and water and sanitation).

Government policy should be cascaded down to provincial and local levels.

Tax exemptions for menstrual products.

In order to address the environmental challenge of safe disposal of menstrual products, there is a need to map products being used and then decide what is best, especially in rural areas.



## WORKING GROUP 5

# RESEARCH AND ANALYSIS

**MODERATOR:** Bisheshta Shrestha, Co-lead Researcher, Roosterlogic

**INTERNATIONAL SPEAKER:** Marni Sommer, Associate Professor,  
Mailman School of Public Health, Columbia University

**NATIONAL SPEAKERS:** Sanila Gurung, Programme Co-ordinator, Beyond Beijing Committee;  
Hari Shova Gurung, SNV Nepal

### KEY RECOMMENDATIONS:

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Menstruation should not just be considered a women's issue – it is everyone's issue.

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The major gaps in research and knowledge about target groups need to be addressed. The focus so far has largely been on adolescents, but this needs to be broadened to look at working women, people with disabilities and other groups, all of which will have their different needs.

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It is important to address both the start and end of menstruation (menarche and menopause).

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Research projects need to be broader and consider the impact and duplication of centralised projects, which often focus on the same gender, age or ethnicity.

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# References and resources

WEBSITE: MHM PA Nepal and  
MHM Summit 2018  
[www.myhealthrightsfuture.com](http://www.myhealthrightsfuture.com)



VIDEO: TED-Talk by A. Muruganantham:  
How I started a sanitary napkin revolution!  
[www.youtube.com/watch?v=zKQL7UJYDIY](http://www.youtube.com/watch?v=zKQL7UJYDIY)

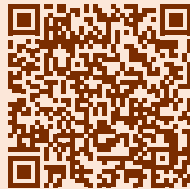
HIGHLIGHT VIDEO: MenstruAction 2018  
[www.youtube.com/watch?v=pnsWuUfszVU](http://www.youtube.com/watch?v=pnsWuUfszVU)



ARTICLE: The monthly exile: Making life  
better for menstruating girls and women  
[health.bmz.de/events/In\\_focus/  
The\\_monthly\\_exile](http://health.bmz.de/events/In_focus/The_monthly_exile)



ARTICLE: Fighting discriminatory practices  
and 'period poverty' / Making life better for  
girls and women in Nepal – month after month  
[health.bmz.de/events/In\\_focus/fighting\\_  
discriminatory\\_practices\\_period\\_poverty](http://health.bmz.de/events/In_focus/fighting_discriminatory_practices_period_poverty)



SuSanA LINK COLLECTION:  
MHM – An overview of a neglected issue  
[www.susana.org/en/knowledge-hub/  
resources-and-publications/library/details/2657](http://www.susana.org/en/knowledge-hub/resources-and-publications/library/details/2657)



VIDEO: Rebuilding life from rubble – A short  
video show how Nepal's women helped their  
communities recover after the earthquake in 2015.  
[health.bmz.de/events/News/Rebuilding\\_life\\_  
from\\_rubble](http://health.bmz.de/events/News/Rebuilding_life_from_rubble)



SuSanA THEMATIC DISCUSSION:  
MHM in Schools – A neglected issue  
[www.susana.org/en/knowledge-hub/  
resources-and-publications/susana-  
publications/details/2876](http://www.susana.org/en/knowledge-hub/resources-and-publications/susana-publications/details/2876)

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