Managing menstrual hygiene in emergency situations: How far from reality?

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Menstrual hygiene is a vital as well as a very sensitive issue for women in reproductive ages. In general, women spend around six to seven years of their lives menstruating. Having a safe, personal and cultural environment to manage menstruation hygienically and with dignity is the right of every woman. However, the ability to enjoy this right is often far from reality. One reason for this is that menstrual hygiene management is often neglected in general health agendas. This can be seen in emergency situations. Most temporary relief centres are not women friendly and therefore women’s security, privacy and health needs are largely ignored. Especially in developing countries, menstruation is often handled in secrecy. In emergency situations, the normal life style of victims has changed and they are under immense psychological pressure which aggravates problems. Providing basic needs such as food and medicine gets priority while the pressing need of securing menstrual hygiene is often neglected.

This paper explores the issue of menstrual hygiene management in emergency situations. It also discusses common obstacles that are encountered in promoting effective menstrual hygienic practices in disaster relief programmes. Learning from the Tsunami relief activities in year 2004, this article describes strategic actions to build capacity and develop processes to respond to the needs of menstruation women. These actions are categorized as focusing on:

a. Biological aspects - biological needs of individuals to keep their bodies in hygienic and healthy condition by providing necessary items that include sanitary pads, clean undergarments even suitable clothes

b. Physical aspects- a clean place to change and wash cloths, adequate water and soap, facilities to dispose of used sanitary pads

c. Social aspects – safety and privacy in changing and washing places

d. Psychological aspects – discomfort and shame in talking about menstrual hygiene and even reluctance to request help

Introduction

In the aftermath of natural disasters, inadequate supplies of essential goods such as food and water and above all poor sanitation put lives at risk. Improper sanitation can become one of the foremost causes of discomfort and disease. Consequently, access to safe water and sanitation is critical for victims immediately after and during initial recovery from a disaster. People affected by disasters are generally much more susceptible to discomfort and illness.
diseases related to inadequate sanitation, insufficient water supplies and poor hygiene. In addition, the lack of water and water facilities often adversely affects the dignity of those caught up in emergencies.

One important but under-addressed right for every woman is having a safe, personal and cultural environment to manage menstruation hygienically and with dignity. However, the ability to enjoy this right is often far from reality. One reason for this is that menstrual hygiene management is often neglected in general health agendas. This is often seen in emergency situations.

In emergency situations, the normal life styles of victims have changed and they are under immense psychological pressure which aggravates problems. Providing basic needs such as food and medicine receives priority while the pressing need of securing menstrual hygiene is often neglected.

**Experience from Tsunami hit 2004**

One example is the management of a Tsunami disaster. In December 2004, a major earthquake followed by a tsunami hit Sri Lanka, devastating many coastal areas. The national and international response to the needs in Sri Lanka have been considerable, including provision of food, medicine, emergency water supply and water purification kits and sanitation facilities. A variety of sources supplied clothes. The author too was involved in relief work in the southern coast and found that women’s special needs in menstruation hygiene were either not given a priority or were addressed inadequately. The author visited 10 temporary relief camps to distribute emergency needs which included food, clothes and medicine. Altogether there were nearly 3,000 victims and more than half were females. In the initial stages, that is, in the first week after disaster hit, all clothes that were distributed were seemingly inappropriate. But gradually, the victims were receiving manageable garments. Nevertheless, the distribution of female specific garments that include underwear were insufficient. Above all, the author came across only one instance with a relief package that included sanitary pads. This personal experience exhibits the degree of insensitivity to gender issues related to emergency relief management.

**Where are the roots of the problem?**

In relation to management of menstrual hygiene in emergency situations, especially in relief camps and temporary shelters, there are several basic aspects, which are interrelated yet complex, to look into:

- Biological aspects - biological needs of individuals to keep their bodies in hygienic and healthy condition by providing necessary items that includes sanitary pads, clean undergarments even suitable cloths
- Physical aspects - a clean place to change and wash cloths, adequate water and soap, facilities to dispose used sanitary pads
- Social aspects – safety and privacy in changing, washing places
- Psychological aspects – discomfort and shame on talking about menstrual hygiene and even reluctance to request help

**Problems associated with proper management of menstrual hygiene**

**Biological aspects** – Emergency relief packs do not usually contain sanitary pads; and it is expensive, or not possible, to buy pads from private vendors. Reusable rugs, as often used by the poor, are not available. Relief
provided by the government or NGOs often include normal garments but not undergarments. Even if they contain undergarments, these are not suitable or not enough to be changed several times during the menstruation period.

**Physical aspects** – In most cases toilets available in relief camps and mobile toilets are not adequate and not women friendly. Provision of sufficient water and soap is one obstacle. Menstruating women need to use more water than other people. Insufficient water supply can lead to physical discomfort, pain, stress and even infectious disease. Furthermore, many camps do not have places for hygienic garbage disposal or removal which makes it difficult to dispose of used sanitary pads.

**Social aspects** – One major issue in emergency situations is the lack of proper toilet facilities. Even if toilets are available, no separate ones are provided for women. In most cases toilets are not women friendly meaning, among other things that there are no places to remove cloths or wash them once removed. Another important issue in relief camps is the lack of opportunities for the victims to express themselves to the officials, mostly males, partly because they are unknown to the community and the females are embarrassed to request services related to menstruation.

**Psychological aspects** – Menstrual hygiene is a taboo subject- a topic that many women in South Asia are reluctant to discuss in public. This is compounded by gender inequality, which means that there are relatively few women professionals involved in planning emergency management. Psychological stress of women who are menstruating during their exposure to emergency situations are not properly addressed by the authorities. It is not uncommon to find relief camps and shelters managed by males who are not gender sensitive.

**Don’t let them suffer silently**

Menstrual hygiene seems to be an insufficiently acknowledged problem in relation to emergency situations. Readiness is of paramount importance when disaster strikes and emergency preparedness planning is an important part of disaster risk reduction. Thus, it is of critical importance to adopt and implement a strategy to address the issue of menstrual hygiene in emergencies. Thus, it is high time to develop a strategy and plan of action with the help of stakeholders on the basis of a participatory and transparent process.

**How can we improve ?**

A well planned relief action plan should include special consideration for women’s needs. To achieve better results not only the managers but also the community of victims should participate to make sure the goals are achieved. The following aspects should be taken into consideration in managing and ensuring menstrual hygiene in relief camps.

**At community level (victims):**

a) Organize a group of experienced/active women to identify the special needs of women and to report to the authorities

b) Communication among the group to ensure safety, dignity of female members and provide moral support

**At relief provider level (government/ NGO/ community organization):**

a) Ensure physical access to water facilities / services that provide sufficient, safe and regular water supply that address sanitation issues
b) Ensure access to the minimum essential amount of water that is sufficient and safe for personal uses of women together with other needs such as soap, undergarments, sanitary pads

b) Provide ready-made hygienic kits that include essential medicine, first aid and sanitary pads

c) Ensure women’s safety and dignity in using toilets and wash areas

d) Take measures to prevent, treat and control discomfort and diseases in women

e) A team of female health care workers and relief managers to look into gender specific problems

At any moment, a disaster can hit and turn life upside down. The most effective way to reduce the impact of a crisis on vulnerable populations is to be prepared to respond to challenges in advance. It is now the time to break the taboo and take necessary steps to address menstrual hygiene issues effectively in emergencies since silence suffering of women should be stopped.

References


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