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## A Sociological Perspective on Bleeding Poverty in Sri Lanka

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### ABSTRACT

This study extends sociological examination of bleeding poverty (period Poverty) in the context of Sri Lankan society, aiming to unravel the intricate web of social, cultural, and individual factors that shape and influence practices surrounding menstruation. The methodology is outlined, emphasizing a systematic literature analysis and the utilization of sociological frameworks to guide the study of secondary data. The diverse sources, including government papers, academic publications, surveys, and NGO reports, have been scrutinized for quality, relevance, and dependability. Comparative analysis has been used to understand the demographic groups, geographic locations, and historical periods, yielding a comprehensive understanding of the sociological elements of menstrual hygiene in Sri Lanka. Period poverty in Sri Lanka is a global issue affecting women due to a lack of

access to essential menstrual hygiene components. Factors include cultural taboos, inadequate education, and economic constraints. High taxes on sanitary products, insufficient toilet facilities, and poor menstrual hygiene management contribute to this issue. A study by The Advocate Institute shows that 50% of households experience period poverty. Addressing this requires policy changes, economic reforms, and targeted interventions for low-income women. A strategy to combat period poverty involves menstrual health education, infrastructure improvements, cultural taboos breaking, policy changes, global collaboration, targeted interventions, research, data collection, inclusive reproductive health education, community-driven initiatives, and media awareness campaigns. This comprehensive approach aims to improve hygiene management, reduce economic burden on women, and promote open conversations.

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## **Introduction**

Menstruation is a natural biological process that all women experience, but the social, cultural, and economic components of menstruation hygiene are largely understudied and sometimes ignored. There has been a rising realization in recent years of the relevance of understanding menstruation from a sociological viewpoint, giving light on how cultural norms, societal institutions, and economic inequities impact women's experiences. This three-page introduction tries to delve into the sociological elements of menstruation hygiene in the context of Sri Lanka, examining the many factors that influence women's attitudes, practices, and access to menstrual hygiene services. The meticulous observance of hygiene practices by women during menstruation assumes paramount significance, as such behaviors have the potential to augment susceptibility to Reproductive Tract Infections (RTIs). The prevalence of RTIs in the country is substantially influenced by suboptimal menstrual hygiene practices, thereby contributing significantly to the morbidity among females. A deficiency in comprehending menstruation and associated hygiene fosters adverse attitudes and practices. Effectively addressing multiple concerns concurrently is imperative for the promotion of menstrual hygiene. These concerns encompass but are

not limited to knowledge dissemination, accessibility and quality of menstrual napkins, consistent supply, maintenance of privacy, provision of water resources, appropriate disposal methods for napkins, comprehensive reproductive health education, and fostering familial support (Dayal,2019). The maintenance of menstrual hygiene necessitates the utilization of sanitary pads and meticulous cleansing of the vaginal area. Inadequate menstrual hygiene practices may precipitate perineal irritation, the occurrence of rashes, the emission of unpleasant odors, and, in certain instances, lead to serious complications such as pelvic inflammatory disease and toxic shock syndrome. Consequently, the primary objective of this study is to assess the knowledge and adherence to menstrual hygiene practices among women of reproductive age (Kumar et al. 2017)).

Menstrual stigma significantly influences various aspects of menstrual healthcare, potentially deterring women from seeking medical help or exacerbating their situations due to societal pressures to remain silent. In the scope of this study, it is imperative to delineate menstrual healthcare, extending beyond routine doctor visits. This encompasses a spectrum of 11 distinct challenges, including access to menstrual products, maintaining hygienic practices during menstruation, and fostering a sense of comfort when consulting with healthcare professionals such as doctors or gynecologists. Menstrual healthcare comprises a qualitative range of actions, each uniquely impacted by the pervasive influence of menstrual stigma (Mostafa,2019).

In South Asia, menstrual taboos and rituals serve as constraining factors, restricting women and girls from various social and cultural domains. Within Hinduism, the notions of purity and pollution play a pivotal role in shaping the caste system and influencing gender dynamics. The cultural significance placed on maintaining purity extends to the perception of human excretions and the bodies engaged in their production as inherently polluting. Both menstruation and childbirth, being biological processes, are considered sources of pollution for all women, regardless of their social caste. Attaining purity is perceived through two methods: avoiding contact with contaminants or engaging in purification practices to eliminate or absorb impurities (Mahon, & Fernandes. (2019). Period poverty continues to be a deeply ingrained and obscured problem in Sri Lanka. Oxfam Gender Coordinator Lakmini Jayathilake categorizes period poverty in the country into three levels, as identified in a study conducted under the Assisting Communities in Creating Environmental and Nutritional Development (ACCEND) Project. The initial layer involves a deficiency in fundamental sexual reproductive health education and awareness, encompassing menstruation. The subsequent two layers entail a lack of supportive infrastructure for the active involvement of women and girls in workplaces and schools, and an absence

of affordable access to menstrual products (Navodya, 2023). The high cost of feminine hygiene products is a key contributor to period poverty in Sri Lanka. Women make up around 52% of the general population in Sri Lanka, however inexpensive menstrual hygiene products are scarce. period pads, for example, are significantly taxed, and the charge on imported period items was more than 100% up until September of 2018(Staff Reports,2020).

## Objectives

### Main objective

To investigate and analyze the multifaceted sociological factors influencing menstrual hygiene practices in Sri Lanka, to gain a better understanding of the social dynamics, cultural norms, and structural determinants that shape and impact menstrual hygiene behaviors in individuals from various sociodemographic backgrounds.

### Specific Objectives

- Investigate the cultural and social norms surrounding menstruation in Sri Lanka to understand their influence on menstrual hygiene practices.
- Examine the role of education and awareness programs in shaping perceptions and behaviors related to menstrual hygiene among different societal groups in Sri Lanka.
- Analyze the impact of socio-economic factors on access to menstrual hygiene products and facilities, focusing on disparities among various demographic segments.
- Explore the influence of family and community structures on the menstrual hygiene practices of women and girls in Sri Lanka.
- Investigate the stigma and taboos associated with menstruation and their effect on the psychosocial well-being of individuals, particularly women and girls.

## Methodology

The study on A Sociological Perspective on bleeding poverty in Sri Lanka using secondary data involves a systematic and comprehensive approach. To begin, a thorough literature analysis has been done in order to comprehend existing sociological viewpoints on menstruation hygiene around the world and to find any past research particular to Sri Lanka. Secondary data from a variety of sources, such as

government papers, academic publications, surveys, and NGO reports. Cultural norms, societal attitudes, economic conditions, education, and healthcare availability have been taken into account. The data have been examined for quality, relevancy, and dependability. When the data is obtained, it is processed and categorized based on these sociological characteristics, allowing for a more in-depth examination of how these factors influence menstrual hygiene practices in Sri Lanka. Comparative analysis also has been used to identify patterns and variances among demographic groups, geographic locations, and historical periods, resulting in a thorough grasp of the social elements of menstrual hygiene in the country.

## **Result and Findings**

This analysis is based on the selected research studies research articles and other secondary resources published related to period poverty. This section unveil how is period poverty in Sri Lanka and the reasons behind this issue.

Period poverty, a pervasive issue affecting numerous women globally, is characterized by a deficit in access to essential components of menstrual hygiene, such as menstruation products, hygiene facilities, waste disposal, and education. This multifaceted definition underscores the diverse challenges encompassed within the term, emphasizing the need for a comprehensive understanding and approach. The implications of period poverty extend far beyond the lack of tangible resources; it permeates into the realms of physical, mental, and emotional well-being. The inadequacy in addressing menstrual needs not only results in physical discomfort but also inflicts mental and emotional distress, painting a comprehensive picture of the toll it takes on individuals.

Central to the discussion is the societal taboo surrounding menstruation, acting as a formidable barrier that inhibits open dialogue. The cultural stigma attached to periods contributes to the perpetuation of period poverty by preventing necessary conversations and awareness. The hushed tones and veiled discussions create an environment where the issue remains hidden and, consequently, unresolved. Tackling period poverty necessitates dismantling these cultural barriers, fostering an environment that encourages open conversations and education about menstruation. Breaking down the taboo is a crucial step towards addressing the root causes and consequences of period poverty.

Moreover, the comparison of period poverty to other forms of poverty emphasizes its severity and underscores the urgent need for intervention. Describing it as debilitating, embarrassing, and degrading places period poverty within the broader context of socio-economic challenges. This parallel suggests

that addressing period poverty requires systemic changes that go beyond immediate access to menstrual products. It implies a need for policies that address education, waste management, and overall socio-economic disparities to create sustainable solutions.

Period poverty's ability to manifest in various forms, such as inadequate access to hygiene facilities and education, highlights its complex nature. This recognition prompts a call for holistic strategies that encompass all aspects of menstrual health. To truly alleviate period poverty, interventions must extend beyond providing menstrual products and incorporate initiatives that enhance education, improve waste management infrastructure, and challenge cultural norms that perpetuate stigma.

The staggering statistic that an estimated one-fourth of the world's population of women and adolescent girls lack the necessary resources to manage menstruation, amounting to approximately 500 million individuals, underscores the global scope and urgency of the issue. Coined as "period poverty," the American Medical Women's Association defines it as not just the absence of sanitary products but also inadequate access to crucial elements like washing facilities and waste management, reflecting the multifaceted nature of the problem. This expansive definition recognizes that addressing period poverty requires more than merely providing menstrual products; it demands a comprehensive approach that includes education and infrastructure improvements. The sheer magnitude of those affected suggests a critical need for concerted global efforts to alleviate the challenges faced by women and adolescent girls in managing menstruation.

The challenges associated with period poverty extend beyond geographical boundaries and impact diverse demographics, including schoolgirls, displaced adolescent girls and women, and women in the workplace. Across low-, middle-, and high-resource countries, a growing body of evidence highlights the significant hurdles faced by these groups, such as menstrual stigma, inadequate education, and limited access to essential materials and facilities. These challenges are particularly pronounced in the context of the ongoing global pandemic, further exacerbating existing disparities. The pandemic has strained already fragile systems, making it even more difficult for individuals to access the resources they need for proper menstrual hygiene. As a result, addressing period poverty becomes not only a matter of women's rights but also a critical public health imperative that demands immediate attention and global collaboration to ensure that every woman and adolescent girl has the means to manage their menstruation with dignity and without hindrance.

Despite being a universally experienced biological phenomenon among women, open discourse on menstruation remains a societal challenge in Sri Lanka. Within the country's demographic composition, 52% constitutes the female population. Regrettably, a significant proportion of women lacks sufficient knowledge about menstrual hygiene, particularly those residing in rural areas, where financial constraints hinder the procurement of disposable sanitary napkins. The elevated cost of these products relegates them to a status akin to luxury items, exacerbating the challenges faced by women during menstruation.

Menstruation, consequently, poses considerable difficulties for girls, compounded by prevalent misconceptions surrounding this natural process. These fallacies contribute to a culture of reluctance among girls to openly address their menstrual cycles. Various myths perpetuate this hesitance, including the beliefs that "menstrual blood is evil," that women should refrain from attending places of religious worship during menstruation due to perceived uncleanness, that sexual relationships with men should be avoided, and that refraining from head baths during menstruation is necessary to prevent harm to the head by disrupting the flow of blood.

The issue of period poverty in Sri Lanka has gained significant attention, particularly in the context of advocating for the reduction of high taxes on disposable sanitary napkins. While this focus is crucial, it is essential to recognize that the broader factors contributing to period poverty extend beyond tax policies. Insufficient toilet facilities with necessary amenities, coupled with limited awareness about menstruation and poor menstrual hygiene management, emerge as larger contributing factors. A study conducted by the Ministry of Education and UNICEF revealed that a substantial percentage (51-62%) of adolescent girl students faced restrictions from attending school during menstruation, and a significant number (37-44%) reported missing school due to various challenges, including pain and physical discomfort, fear of staining clothes, and a lack of proper facilities to change or dispose of cloth/sanitary napkins.

Despite a high level of knowledge about menstrual hygiene among adolescent girl students, the study highlighted that information primarily comes from sources outside formal educational channels, with over 90% learning from family members or friends. Water scarcity in toilets, lack of privacy, and inadequate facilities for changing and cleaning during menstruation were identified as significant barriers, impacting the hygiene and sanitation of adolescent girls. While a majority of students claimed

the availability of separate toilet facilities for girls in their schools, the actual usage during menstruation was reported by a lower percentage (24-34%).

The study underscored the critical need for improved disposal facilities in schools, as only 10% had proper provisions for cloth/sanitary napkin disposal. This inadequacy was identified as a key factor contributing to absenteeism during menstruation. The suggested improvements, as indicated by the study, included providing toilets with more privacy, designated spaces for disposing of used materials, and installing disposal bins. Principals and teachers expressed dissatisfaction with the current facilities for girls during menstruation, emphasizing the urgency for comprehensive improvements to address these concerns and potentially reduce absenteeism among adolescent girls.

The study conducted by The Advocate Institute, titled 'Assisting Communities in Creating Environment and Nutrition Development (ACCEND),' provides a critical analysis of period poverty in Sri Lanka, particularly in rural and plantation sectors in Matale, Nuwara Eliya, and Moneragala districts. The key finding of the study is that Sri Lanka's absolute household period poverty rate stands at an alarming 50%. This sheds light on a significant issue affecting a substantial portion of the population.

One major contributing factor highlighted in the study is the high tax imposed on imported menstrual products, which is revealed to be 52% when considering border tariffs and local VAT. The border tariffs in Sri Lanka include a combination of standard tariffs and additional levies known as para tariffs. This tax burden significantly raises the prices of menstrual products, leading to their unaffordability for a substantial portion of the population. The study argues that repealing the 52% tax or, at the very least, reducing it could enhance accessibility for low-income consumers, thereby alleviating period poverty.

The study provides a demographic context, stating that there are 5,355,092 women and girls of reproductive age (15-49 years) in Sri Lanka. The age cohort chosen for the study is 15-47 years, considering global literature that indicates the common age for menarche is 12-13 and the age range for menopause is typically between 42-51, with a mean age of 47. This demographic breakdown underscores the wide-reaching implications of period poverty in Sri Lanka.

This study depicts the severity of period poverty in Sri Lanka, emphasizing the correlation between high taxes on menstrual products and the resulting unaffordability for a significant portion of the population. The suggested solution of reducing or repealing the 52% tax on these products could potentially alleviate the burden on low-income consumers and contribute to addressing the broader issue of period



poverty in the country. The recent report from the Advocate Institute, published in March of this year, provides a stark revelation about the pervasive issue of period poverty in Sri Lanka. The report indicates that more than 50% of women in the country grapple with period poverty, a distressing circumstance that becomes evident through the statistic revealing that half of households with women of menstruating age do not allocate any budget for sanitary napkins. This alarming revelation sheds light on the financial barriers that many women face in accessing essential menstrual hygiene products, painting a concerning picture of the economic disparities that impact women's reproductive health.

A critical aspect contributing to period poverty in Sri Lanka is the exorbitant taxation imposed on sanitary products, currently set at a staggering 52%. This taxation renders pads and other menstrual hygiene products financially out of reach for women in low-income segments of society. The high tax rate exacerbates the already challenging situation, creating a barrier to access for those who are economically disadvantaged. Consequently, this financial burden places a substantial strain on women's ability to manage their menstrual health effectively.

Moreover, the report underscores the compounding effect of the rising cost of living in Sri Lanka, where consumer inflation reached over 70% in August. This economic challenge further tightens the financial constraints faced by women, making it increasingly difficult for them to afford essential menstrual hygiene products. The intersection of high taxes, economic inflation, and pre-existing financial constraints creates a complex web of challenges that disproportionately affects women in low-income groups, hindering their access to crucial resources for menstrual health.

In light of this comprehensive analysis, it is evident that addressing period poverty in Sri Lanka requires a multifaceted approach. Advocacy for policy changes, such as a reduction in taxation on sanitary products, coupled with broader economic reforms to alleviate inflationary pressures, is imperative. Additionally, targeted interventions and support mechanisms for women in low-income groups are essential to ensure that menstrual hygiene products are not considered unaffordable necessities.

The research conducted by Weerasinghe, S.P.S.P. sheds light on the critical issue of period poverty among adolescents in Sri Lanka, particularly through a nuanced comparison between urban and rural schools. The timeliness of this study is underscored by the economic crisis prevalent in the country, which has significantly impacted individuals' ability to meet daily needs, including essential sanitary products. By selecting schools from diverse settings, the researcher aimed to capture the differential experiences of adolescents facing period poverty in urban and rural environments.

The study reveals a complex web of challenges faced by adolescents, with data gathered through questionnaires indicating mixed responses on the subject. However, a noteworthy trend emerges, indicating that the situation is somewhat more adverse in rural schools compared to their urban counterparts. The heightened concern among students in rural schools about societal perceptions of menstruation, exceeding worries about the affordability of period products, points to the deeply ingrained social stigma surrounding this natural biological process.

A particularly alarming revelation pertains to the inadequacy of sanitary facilities in both urban and rural schools, a fundamental necessity for students. The shared dissatisfaction expressed by students in both settings underscores the need for urgent attention from schools and authorities. The study advocates for a thorough examination of these concerns, emphasizing the importance of ensuring suitable and hygienic sanitary facilities for students, irrespective of their geographical location.

In conclusion, the research posits that period poverty is a prevalent and shared experience among adolescents in both urban and rural schools in Sri Lanka. While students in urban schools may find it relatively more comfortable to purchase period products due to their socio-economic backgrounds, the underlying issues of lack of awareness regarding sexual and reproductive health, misinformation, social stigma, and deficient sanitary facilities are common concerns for both groups. Despite the study's limitation in its focus on only two schools, the findings provide valuable insights that can be extrapolated to draw broader conclusions. The research convincingly demonstrates the universality of period poverty, urging comprehensive efforts to address the multifaceted challenges faced by adolescents across different geographical localities in Sri Lanka.

Nilanka Jayasooriya's article on "Menstrual Hygiene Should Be Women's Rights in Sri Lanka, Rethinking Period Poverty" underscores the pressing need for a paradigm shift in societal perspectives and policies regarding menstruation. The author highlights that menstruation has evolved into a challenging time for girls in Sri Lanka due to pervasive misconceptions surrounding this natural biological process. The reluctance of girls to openly discuss their menstrual cycles is attributed to the prevalence of myths and misinformation that have fueled societal stigma.

The article delves into specific misconceptions that contribute to the hesitance of girls in addressing their menstrual health openly. Cultural and social beliefs such as considering "menstrual blood as evil," associating menstrual periods with uncleanness that bars women from places of religious worship, discouraging sexual relationships during menstruation, and even suggesting refraining from head baths

due to perceived harm to the head during menses are identified as prevalent myths. The inclusion of the belief that menstruating girls or women are engaged in preparing "Satan's wine" further emphasizes the depth of the cultural taboos surrounding menstruation in Sri Lanka.

Through these examples, Jayasooriya brings attention to the urgent need for awareness and education to dispel these myths, which not only contribute to the concealment of menstrual health issues but also perpetuate harmful stereotypes. The article contends that menstrual hygiene is a fundamental aspect of women's rights, and challenging these misconceptions is crucial for fostering an environment where women can openly and confidently manage their menstrual health without fear of judgment or discrimination.

In conclusion, Nilanka Jayasooriya's article advocates for rethinking period poverty in Sri Lanka by addressing the deeply rooted misconceptions surrounding menstruation. By highlighting specific myths and cultural beliefs, the author emphasizes the need for comprehensive awareness programs and education to empower girls and women to discuss and manage their menstrual health openly. The article serves as a call to action to redefine menstrual hygiene as a women's right, fostering a more inclusive and informed societal approach to menstruation in Sri Lanka.

Hettiarachchi, A., Agampodi, T., & Agampodi, S. (2021), *Period Poverty in Rural Sri Lanka: Understanding Menstruation Hygiene and Related Health Issues to Empower Women* which highlights the significant impact of social, cultural, economic, and educational factors on the management of menstrual periods in Sri Lanka. Despite high literacy rates and a well-regarded public health system, menstrual problems are under-explored and considered taboo in many affluent settings. The concept of "period poverty," where individuals lack financial resources to manage menstruation, is prevalent and often accompanied by cultural shame.

The study includes 539 participants with a mean age of 26.8 years, revealing that 88.3% reported regular menstruation. However, issues such as passing clots (29.1%), flooding (5.8%), and perceived severe menstrual problems (25.4%) are prevalent among the participants. Only a fraction (12.6%) sought medical care for menstrual issues, indicating a reluctance to address these concerns.

Notably, 25.7% of women experienced estimated menstrual blood loss of more than 80 mL, with a significant portion not perceiving it as a problem. The use of "old clothes" as sanitary products by 18.2%

of women reflects a high level of period poverty. The analysis identifies associations between age, ethnicity, education, employment, income, and the lack of access to proper sanitary methods.

The findings suggest a need for comprehensive reproductive health education for adolescent girls and reproductive-age women. Additionally, efforts should be directed toward reducing the economic burden of sanitary products to address period poverty. The study underscores the importance of breaking cultural taboos surrounding menstruation and promoting better health-seeking behavior for menstrual issues. Overall, the analysis provides valuable insights for policymakers and healthcare professionals to develop targeted interventions to improve.

## **Conclusion and Recommendations**

### **Conclusion**

Period poverty underscores its multifaceted nature, extending beyond the lack of tangible resources to impact physical, mental, and emotional well-being. The societal taboo surrounding menstruation acts as a significant barrier, hindering open dialogue and perpetuating the issue. To address period poverty effectively, cultural barriers must be dismantled, fostering an environment that encourages education and open conversations about menstruation. Recognizing period poverty as debilitating, embarrassing, and degrading highlights the urgency for systemic changes that go beyond immediate access to menstrual products, necessitating comprehensive policies addressing education, waste management, and socio-economic disparities.

The global perspective on period poverty reveals its extensive reach, affecting over 500 million women and adolescent girls worldwide. This issue is not confined by geographical boundaries and impacts diverse demographics, exacerbating existing challenges faced by schoolgirls, displaced individuals, and women in the workplace. The ongoing global pandemic further intensifies these challenges, making it a critical public health imperative that demands immediate attention and collaboration to ensure access to menstrual resources for every woman and adolescent girl.

In the context of educational settings, the discussion emphasizes the importance of addressing water scarcity, privacy concerns, and the lack of proper facilities for changing and disposal during menstruation. Efforts to enhance awareness through educational guidelines and toolkits are recognized

as essential steps, highlighting the need for comprehensive improvements to hygiene and sanitation in schools.

Sri Lanka's specific challenges with period poverty are outlined, noting the cultural reluctance to openly discuss menstruation and the financial barriers hindering access to disposable sanitary napkins. The perpetuation of myths and misconceptions about menstruation contributes to the challenges faced by girls, indicating the necessity for awareness programs to dispel these beliefs.

The comprehensive analysis also delves into the economic aspects, emphasizing the impact of high taxes on sanitary products, economic inflation, and overall financial constraints on women's ability to manage menstrual health effectively. The need for policy changes, economic reforms, and targeted interventions for women in low-income groups is underscored to address these challenges.

The research by Weerasinghe provides nuanced insights into period poverty among adolescents in Sri Lanka, comparing experiences between urban and rural schools. The study highlights the adverse situation in rural schools, where concerns about societal perceptions of menstruation outweigh worries about the affordability of period products. Inadequate sanitary facilities in both settings call for urgent attention, emphasizing the necessity of suitable and hygienic facilities for all students.

Nilanka Jayasooriya's article emphasizes the need for a paradigm shift in societal perspectives on menstruation in Sri Lanka. The prevalence of myths and cultural beliefs perpetuates the reluctance of girls to openly discuss their menstrual health. The article advocates for comprehensive awareness programs and education to challenge these misconceptions, framing menstrual hygiene as a fundamental aspect of women's rights.

Lastly, the research by Hettiarachchi, A., Agampodi, T., & Agampodi, S. sheds light on the significant impact of social, cultural, economic, and educational factors on managing menstrual periods in Sri Lanka. The high prevalence of period poverty, reluctance to seek medical care, and associations with age, ethnicity, education, employment, and income highlight the need for targeted interventions, comprehensive reproductive health education, and destigmatization efforts.

Analyzing the background of period poverty in Sri Lanka can be identified the following factors associated with it and which can be linked to a number of interconnected causes, all of which contribute to the difficulties women and girls encounter in obtaining affordable menstrual hygiene supplies. Among the most important reasons are:

**High Taxation on menstruation goods:** According to the report, imported menstruation goods in Sri Lanka are subject to a 52% tax rate, which includes border tariffs and local VAT. This taxes dramatically raises the price of these necessary products, rendering them unaffordable for a large segment of the population, particularly those with lower incomes.

**Economic Inequality:** Economic differences exist in Sri Lanka, and persons with lower socioeconomic level frequently struggle to achieve their fundamental necessities. The high cost of menstruation products exacerbates these economic issues, resulting in financial limits that limit access to sanitary towels and other hygiene goods.

**Limited information and Education:** Period poverty can be exacerbated by a lack of information and education about menstrual hygiene and available supplies. Some people may not completely comprehend the significance of using sanitary goods or may be unaware of affordable alternatives, resulting in insufficient menstrual hygiene practices.

**Lack of Government Initiatives:** The absence of comprehensive government initiatives or subsidies to address menstrual health needs can contribute to period poverty. A lack of targeted policies and programs may leave many women and girls without the necessary support to access affordable menstrual hygiene products.

**Social and Gender Inequities:** Existing gender inequalities can exacerbate period poverty. Women and girls, especially in rural or marginalized communities, may face discrimination, limiting their access to education and economic opportunities. This, in turn, affects their ability to afford menstrual hygiene products.

Period poverty can be exacerbated by cultural norms and stigmas associated with menstruation. Menstruation is considered a taboo subject in some societies, resulting in limited talks and education on menstrual health. This cultural silence may contribute to menstrual hygiene neglect and the perpetuation of period poverty.

**Inadequate Infrastructure Support:** A lack of access to proper sanitation facilities and menstrual product disposal procedures might be a barrier to maintaining excellent menstrual hygiene. Inadequate infrastructure in some locations may make it difficult for women and girls to manage their menstrual cycles with dignity and ease.

Limited Access to Health Care: A lack of information regarding menstrual health and hygiene may stem from a lack of access to healthcare, particularly in rural regions. Furthermore, the lack of inexpensive healthcare options may discourage people from getting help for menstrual-related illnesses.

Addressing period poverty in Sri Lanka necessitates a multifaceted approach that includes lowering financial barriers through policy changes, increasing awareness and education, challenging cultural stigmas, improving infrastructure, and implementing targeted government initiatives to ensure menstrual health is prioritized and accessible to all women and girls.

## **Recommendations**

**Comprehensive Education Programs:** Implementing comprehensive menstrual health education programs in schools and communities is crucial. These programs should cover menstrual hygiene management, dispel myths and misconceptions, and promote open conversations about menstruation. Educational initiatives, such as toolkits and guidelines, should be widely promoted and accessible to all.

**Infrastructure Improvements:** Addressing inadequate facilities in schools, including water scarcity, lack of privacy, and insufficient disposal facilities, is essential. Investing in infrastructure enhancements, such as improved restroom facilities with proper waste management provisions, can significantly contribute to better menstrual hygiene management in educational settings.

**Cultural Sensitization and Destigmatization:** Launch campaigns and initiatives aimed at breaking cultural taboos surrounding menstruation. This includes challenging myths, fostering a more inclusive understanding of menstruation, and encouraging open discussions within communities. Engaging local leaders, influencers, and educators in these efforts can amplify their impact.

**Policy Changes:** Advocate for policy changes that reduce the economic burden on women, particularly by addressing high taxes on sanitary products. Collaborate with policymakers to implement reforms that make menstrual hygiene products more affordable, ensuring that they are considered basic necessities rather than luxury items.

**Global Collaboration:** Given the global scale of period poverty, encourage international collaboration to address the issue comprehensively. Engage with global health organizations, governments, and NGOs to share best practices, allocate resources effectively, and implement interventions that consider diverse cultural contexts.

**Targeted Interventions for Vulnerable Groups:** Design targeted interventions and support mechanisms specifically for vulnerable groups, including women in low-income segments. These initiatives should address economic constraints, provide affordable access to menstrual products, and offer support for improved menstrual hygiene management.

**Research and Data Collection:** Continue research efforts to gather more data on period poverty, its impact, and the effectiveness of interventions. Regularly update statistics and information to inform evidence-based policies and interventions.

**Inclusive Reproductive Health Education:** Incorporate comprehensive reproductive health education into school curricula, focusing on adolescent girls and young women. This education should cover not only menstrual hygiene but also reproductive health, destigmatizing menstruation, and promoting informed health-seeking behaviors.

**Community Engagement:** Facilitate community-driven initiatives that empower women and communities to take ownership of menstrual health. Involve community leaders, local NGOs, and grassroots organizations to ensure that interventions are culturally sensitive and tailored to the specific needs of each community.

**Media Campaigns:** Leverage media platforms for widespread awareness campaigns. Use various media channels to disseminate accurate information, challenge stereotypes, and promote positive narratives surrounding menstruation. Engage influencers and celebrities to amplify the impact of these campaigns.

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