



Menstruation Matters: Exploring Hygiene, Social Impact, Mental Health, and Sustainable Development Goals

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PRELUDE

India is a developing country, and it is rich in heritage and culture. It has various languages, culture and religions. It is the second most populous country. Women constitute mostly a part of the population. Women are considered inferior under the patriarchal system, and they face various challenges and opportunities. It is worth mention that the women attain a pious place in our country and is worshiped as goddess. She is considered the basic and important part of the family. However, she faces so many challenges, questions, and threats in society. Various hurdles may occur in her ways which may occur due to health factors, biological and psychological factors.

With the passage of time women intervention started increasing and they started playing a pivotal role in the way to development of the country. Women must work out of the home due to the job conditions. They may face so many challenges pertaining to their health and biological factors. It is pertinent to mention that the mensuration cycle marks the beginning of Puberty and is considered a natural part of the life, which remains a topic not openly discussed. It is considered a social stigma which is not often discussed in an open manner. This results in stress for females. It is faced by the women probably starting from the age group of 11-13 and may be continued up-to 49-51 years. Menstruation involves blood, but it's a natural physiological process that has historically been stigmatized and interpreted in a variety of ways by different cultures, setting it apart from the intentional act of shedding blood as a symbol of bravery in many historical and cultural contexts.

Rather than being cherished, it is forced to be shrouded in stigma and secrecy. This phase is considered as much sensitive for every woman. Earlier, women were doing the household chores, confining



themselves into the four walls of the house. There was a prevalent restriction on the employment of women, availing the rights and interference into family affairs. This is a very vital part of a woman's health because it is linked to sexual and reproductive health.

Various factors may lead to deterioration of women's health, that is a lack of water and sanitation facilities, poverty, ignorance, non-awareness, lack of financial support to schools or colleges.

It is pertinent to mention that various segment of the women that is those working in the remote areas, residing in rural areas, working in the rural areas, handicapped women, sports woman.

IMPORTANCE OF MENSUTRAL HYGIENE

It is a very important and vital part of women's health and much relevant for the fertility amongst the women and cleanses their reproductive circle. It is considered as an important part of the women's health as it ensures the hormonal balance underlying the assertive ness of body to able to conceive.

Preparing for Pregnancy: Hormones cause the endometrium, the lining of the uterus, to thicken with blood and nutrients in preparation for the implantation of a fertilized egg, while also stimulating an egg to mature and be released (ovulation).

Shedding and Renewal: Progesterone and estrogens levels drastically decline if the egg is not fertilized or if implantation is unsuccessful.

The excess uterine lining breaks down and sheds as a result of this hormonal withdrawal, and a tiny amount of blood escapes via the vagina.

Day one of a new cycle is marked by this shedding, which enables the body to "reset" and start getting ready for the next month.

Health Indicator: Like blood pressure or heart rate, a regular menstrual cycle is regarded as an essential indicator of general health.

Stress, hormonal imbalances, PCOS, thyroid diseases, and other conditions can all be indicated by irregularities.

Cultural and Social Context: Menstruation is perceived in a variety of ways in different cultures, ranging from being a normal, healthy process to being connected to several taboos and stigmas.

"Period poverty" is the term used to describe how these cultural views can impact an individual's mental health as well as their access to basic hygiene supplies and education.

**Personal Wellbeing-**

People can manage associated symptoms like mood swings, bloating, or exhaustion by being aware of the hormonal changes that occur during the cycle. They can even take advantage of natural energy variations for self-care and productivity.

MENSURATION AS A SOCIAL ISSUE

Gender Inequality--Mensuration creates gender inequality as it leads to lack of health, hygiene, water or sanitation facilities. It may force the girls or females to miss their education or working organizations for specific days respectively. In most places, females may be denied their right to worship due to the religious beliefs, sentiments or family tradition.

Stigma and Silence Around Menstruation --It lacks the opportunity of an 'Open *Dialogue* & creates an environment of silence, anxiety, pressure or tension. There is various health issues related to the mensuration comprising of the headaches, pelvis strain, bloating and mood-swings which may not be always understood by others surrounding the concerned women.

Cultural and Religious Restriction- Females are considered as impure and unclean during the mensuration, Hence, they may not be allowed to do worship or visit religious places, touch pickles in the kitchen, do household chores or enter the kitchen in some rural areas. It may lead to the anxiety or stress especially among the very young age female who may not be able to cope up with the societal pressures due to their young age and sensitive minds.

Menstrual Taboos and Myths-- It creates taboos as demands silence and non-disclosure of health conditions for such time. It imposes restriction on the exercises, eating habits in an indirect manner sometimes which may be infused into the minds of young females by the elderly women of the family or society. The Myth pertaining to the mensuration embarks the silence on the topic and imbibes the thought of accepting period pain as a normal process, which in turn leads to various gynecological diseases and disorders among the women.

MENSTURATION AND MENTAL HEALTH

Mensuration is much deeply connected to the mental health of women. It lays a deep impact on the psychological and physical health of the women. It affects the personal, social and professional life of a women.



Menstruation creates a negative impact on the mind and may create anxiety, pressure, and mood swings. Fluctuations in estrogen and progesterone throughout the cycle can influence brain chemistry. In the present era where most of the women are working or may be living in the rural area or young girls, they do face a lot of the health problems and backlogs pertaining to the hygienic conditions.

Premenstrual disorder can cause huge disorders, mental health problem due to the irritability, anger, mood swings and anxiety. It also leads to a reduction in physical efficiency. It also creates a negative impact on the health due to bloating, stress, body-aches, and low work efficiency.

Menstruation leads to creating a negative impact of social stigma among the women and it may relate to the leaks, low work efficiency and stress.

There occurs a great need for improvement which can be made possible through the awareness campaign, proper diet plans, regular exercises knowledge, yoga therapy and mindfulness.

MENSTRUATION AND SUSTAINABLE DEVELOPMENT GOALS

In India, the scenario is a little different when it comes to considering menstruation as a taboo subject. The hesitation among women and other members of society regarding even pronouncing its name is being cemented further by religion and the practices followed at homes as to not let the girl touch or enter temples during those days. The menstruating girl is even prohibited from eating normally with the regular household. The stigmatized situation in India has attained such dangerous levels that girls or menstruating women are even hesitant to purchase and utter the name openly in medical stores about their requirements for sanitary pads. There is, however, a change witnessed in current times in the mindset of girls, and they are not scared or shameful while taking its name openly.

There is a relationship between the products used for menstruation by women and achieving sustainable development goals by United Nations. Each of the 17 Sustainable Development Goals (SDGs) that the United Nations approved in 2015 is designed and specified to address a significant issue from a sustainability and health standpoint. Although menstrual hygiene is not specifically addressed in any of the United Nations' (UN) Sustainable Development Goals, it is nonetheless intimately related to accomplishing a number of the suggested SDGs, such as SDG 3 (Assure healthy lives and promote well-being for all at all ages); SDG 4 (Assure inclusive and equitable SDG 5 (Achieve gender equality and empower all women and girls); SDG 6 (Ensure availability and sustainable management of water and sanitation for everyone); SDG 8 (Decent Work & Economic Growth); and SDG 5 (Promote lifelong learning and excellent education). Given that over two billion women worldwide between the ages of 12



and 50 are menstruating two to seven days a month, mental health (MH) is still crucial in all aspects that are unique to women and girls and directly involve them in the process of sustainable development (Tiwary, 2018). There is a list of all SDGs which support a healthy MHM (Menstrual Hygiene Management). They are:

SDG 3 which supports ensuring healthy lives and promotes well-being for all ages: The highest attainable standard of health is a fundamental right for every person. Every individual possesses a fundamental right. Women and young girls frequently manage menstruation in the most unsanitary and uncomfortable ways, especially in impoverished areas. They create their own personal hygiene approaches to handle menstruation, which vary significantly based on personal preferences, cultural beliefs (including myths and taboos), economic background, and education (Tiwary, 2018). The unhygienic practices they adopt include using materials such as rags, cotton, sponges, goat skins, old clothing, and newspapers for menstrual blood absorption instead of sanitary pads, as well as reusing the same cloth without adequately washing and drying it in sunlight, which contributes to their challenges during menstruation.

SDG 4: It advocates ensuring inclusive and equitable quality education and promoting lifelong opportunities for all. Improved education is the prerequisite for gender equality and women's right. It empowers them to raise their wellbeing and contribute to social and economic gains. For all girls and young women, education must be available across their lifetimes but unavailability of sanitary absorbents, social and cultural taboos, lack of water, sanitation, bathing and laundering facilities forces many girls to miss class or drop out school altogether. There is a direct connection between education levels and the way girls are handling their menstrual hygiene. In Kenya, girls are absent an average of 4.9 school days every month due to insufficient availability of suitable menstrual health. It is important to note that high girl dropouts from the school due to menstruation led to higher cost to the economy. With every 1% increase in the proportion of women with secondary education, a country's annual per capita income grows by 0.3% and would result in an up to 1.2% increase in GDP in a year.

SDG 5: Achieve gender equality and empower all women and Girls: This goal is the stand-alone gender goal which addresses key challenges such as poverty, violence and inequality against women. The myths and taboos concerning menstruation and insufficient mental health practice often depicts women as lesser than males and are left out of living to their fullest their social and cultural life. Teenage girls experience feelings of anxiety, humiliation, and awkwardness at school and in their neighbors. A qualitative research study revealed that two-thirds of girls from South India characterized their period as surprising and



alarming. Once girls and women possess the skills and tools to handle their menstrual wellness and sanitation, they are in a stronger position to invest in themselves, their families, and their communities. The start of menstruation causes girls to be more susceptible to early wedlock and unplanned pregnancy increases the risk of maternal death. Rise in the expense of commercial menstrual health resources for young girls and women are unable to purchase sanitary pads leading to alarming options such as unclean fabric, cinders and husk San.

SDG 6: Ensure availability and sustainable management of water and sanitation for all:

Guaranteeing access to water and sanitation for everyone is the objective; fulfilling it requires total effort aspects unique to women and girls regarding board and engage them actively in the method. Women revealed that menstruation is often being managed by women and young girls with the most unhygienic and inconvenient ways particularly due to non- availability of clean water and sanitation facilities. Girls need clean water and clean menstrual cloth or sanitary pad during their school duration also. The availability of these facilities at school may increase the attendance of girls during those days, which is reduced due to the non-availability of facilities.

SDG 8: Decent Work & Economic growth: Promote sustained inclusive and sustainable economic growth

Menstruation of hygiene amenities in the workplace influences non-attendance, impacting livelihoods, levels of productivity, and, in the end, the economy. Adequate menstrual cleanliness methods would assist women in assuming paid work instead of remaining at work while menstruation to enable them to earn more and reinvest this into an improved life for themselves and their loved ones. It functions as an obstacle to job participation and involvement of mature females. The exclusion from society, diversion, and detachment of teenage girls because of MH methods ultimately results in the loss of essential knowledge time along with possible output and earnings that they might have reached if they are knowledgeable or working. Therefore, menstrual hygiene encompasses wider effects on the lives of women and girls and regarding the achievement of multiple sustainable Development Goals (SDGs).

MENSTRUAL HYGIENE- PRESENT SCENARIO

1. Rural people do not have much or adequate means to ensure proper hygienic conditions. There is a lack of proper sanitation facilities, water and affordability to ensure the basic needs of monthly requirements



2. There may be serious pregnancy problems. Low age mensuration accompanied with the period poverty, isolation, neglected family behaviors, social stigma etc makes the women yet rural women more prone to low morale and self-esteem.
3. Women working in the remote areas or far away areas or those working in the non-organized sectors, rotation jobs that is cab drivers, saleswomen may face a lot of health issues pertaining to the menstruation process.
4. Handicapped women may face lot of the health issues which may make them prone to low reproductive efficiency,
5. The situation and conditions in the trains which are the most common and prevalent method of transport are not feasible, appropriate for the women. The women having menstruation situation may face so many problems pertaining to the lack of water, cleanliness, sanitation and hygienic conditions.
6. Women who may not be able to very high quality and high services hospitals and post pregnancy they may not be able to have the required facilities.
7. In the old, aged homes, all the women may not be belonging to the old age and those separated or abandoned from their homes at moderate or young age may face some problems pertaining to the mensuration process.
8. Old aged women may have more access to the reproductive organs problem, female issues due to the lack of facilities at young age.

CHALLENGES IN ACHIEVING MENSUTRAL HYGIENE

In our country menstrual hygiene has become an important topic keeping in consideration the factor, health and safety of women. There occur various obstacles in the way of hygiene. Women are the basic segment of the society, and all women face this circle which remain sensitive and attached to their reproductive health. The following reasons create obstacles:

- 1 **Illiteracy**- The women especially living in the rural areas are not educated and may not be able to learn or understand the relevance of hygienic conditions.
- 2 **Ignorance** - This part of health system is attached to the biological conditions of women and its most undisclosed and ignored part of the health system.
3. **Awareness**- Most people are not aware of the products, factors and material for attaining the hygiene conditions.



4 Lack of education-It is much prevalent that the educated sector can keep themselves updated and maintained whereas the uneducated may not be able to cope with the changing dimension pertaining to health and society.

5 Disposal of the Waste Material –It remains a serious problem and occurs due to the lack of infrastructure in various educational institutions, workplaces or offices.

WHY THERE IS A NEED TO TALK ABOUT MENSURATION

Teenage girls are a particularly vulnerable group, especially in India, where female children are often neglected. In Indian culture, menstruation is still seen as filthy or disgusting. Awareness and understanding of the topic are necessary for the response to menstruation. A girl's reaction to menarche may be influenced by how she is taught about menstruation and the changes that accompany it. Despite being a normal occurrence, menstruation is associated with several myths and behaviors that can occasionally have a negative impact on one's health.

1. Rural people do not have much or adequate means to ensure proper hygienic conditions. There is a lack of proper sanitation facilities, water, and affordability to ensure the basic needs of monthly requirements.

2. There may occur serious pregnancy problems. Low age mensuration accompanied with the period poverty, isolation, neglected family behavior, social stigma etc. makes the women yet rural women more prone to low morale and self-esteem.

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SUGGESTIONS

Neutralize the Behavior--The matters pertaining to menstrual education, sanitation, cleanliness should be discussed with the young female since the inception of their youth.

There is a need to eradicate the sense of regret, shame, and anxiety which may be acquired with a change in behavioral pattern, starting very primarily within the families itself.

There is a need for initiative from the NGO'S to make people aware and literate people. Also, there occurs a great need to cease the evil of '*Period Poverty*' by making and ensuring the availability of sanitary pads, teaching the method of disposal of waste material, especially in the rural areas.

It became the duty of schools and colleges to make people aware by organizing seminars, Nukkad -Natak etc. It may ensure bringing knowledge, awareness, and literacy at the doorsteps.

Public toilets should be equipped in a better way and at various accessible places. It may ensure better hygiene and health for the women, when roaming in the marketplaces. Also, it would enhance the health and working conditions of the women working in the remote areas, who do not acquire the access to have an institutionalized workplace.

References:

- ¹ Jaising, I. (2000). Gender justice and the Supreme Court. In B. N. Kirpal, A. H. Desai, G. Subramaniam, R. Dhavan, & R. Ramachandran (Eds.), *Supreme but not infallible: Essays in honour of the Supreme Court of India* (pp. [insert page range]). Oxford University Press.
- ¹ Anand, A. S. (2003). *Justice for women*. Universal Law Publishing Co. Pvt. Ltd.
- ¹ Chawla, M. (2013). *Gender justice*. Deep and Deep Publications Pvt. Ltd.
- ¹ Chawla, M. (2013). *Gender justice*. Deep and Deep Publications Pvt. Ltd.



- ¹ Chawla, M. (2013). *Gender justice*. Deep and Deep Publications Pvt. Ltd.
- ¹ 6. Abrams, D. B., Monti, P. M., Pinto, R. P., Elder, J. P., Brown, R. A., & Jacobus, S. I. (1987). *Psychosocial stress and coping in smokers who relapse or quit*. **Health Psychology**, 6(4), 289–303.
- ¹ World Health Organization. (2022, June 22). *WHO statement on menstrual health and rights*. <https://www.who.int/news/item/22-06-2022-who-statement-on-menstrual-health-and-rights>
- ¹ Fiore, M. C., Novotny, T. E., Pierce, J. P., Giovino, G. A., Hatzianreou, E. J., Newcomb, P. A., Surawicz, T. S., & Davis, R. M. (1990). *Methods used to quit smoking in the United States: Do cessation programs help?* **Journal of the American Medical Association**, 263(20), 2760–2765. <https://doi.org/10.1001/jama.1990.03440200064024>
- ¹ Bott, S., Jejeebhoy, S., Shah, I., & Puri, C. (2003). *Towards adulthood: Exploring the sexual and reproductive health of adolescents in South Asia*. World Health Organization, Department of Reproductive Health and Research.
- ¹ Sushama Pednekar, S., Some, K. Rivankar, and R. Thakore, “Enabling Factors for Sustainable Menstrual Hygiene Management Practices: A Rapid Review,” *Discover Sustainability*, vol. 3, no. 1, 2022, p. 28.
- ¹ Steiner, Meir. “Premenstrual Syndrome and Premenstrual Dysphoric Disorder: Guidelines for Management.” *Journal of Psychiatry & Neuroscience*, vol. 25, 2000, pp. 459–468.
- ¹ 6. Abrams, D. B., Monti, P. M., Pinto, R. P., Elder, J. P., Brown, R. A., & Jacobus, S. I. (1987). *Psychosocial stress and coping in smokers who relapse or quit*. **Health Psychology**, 6(4), 289–303.
- ¹ Khan, M. M. (2023, October 2). *Menstrual health and hygiene: What role can schools play?* World Bank Blogs
- ¹ Jogdand, K., & Yerpude, P. A. (2011). Community-based study on menstrual hygiene among adolescent girls. *Indian Journal of Maternal and Child Health*, 13(3), 1–6.



- ¹ Abrams, D. B., Monti, P. M., Pinto, R. P., Elder, J. P., Brown, R. A., & Jacobus, S. I. (1987). *Psychosocial stress and coping in smokers who relapse or quit*. **Health Psychology**, 6(4), 289–303.
- ¹ Jogdand, K., & Yerpude, P. A. (2011). Community-based study on menstrual hygiene among adolescent girls. *Indian Journal of Maternal and Child Health*, 13(3), 1–6.
- ¹ Bott, S., Jejeebhoy, S., Shah, I., & Puri, C. (2003). *Towards adulthood: Exploring the sexual and reproductive health of adolescents in South Asia*. World Health Organization, Department of Reproductive Health and Research.
- ¹ Masih, N. (2023, February 17). *Need time off work for period pain? These countries offer 'menstrual leave.'* *The Washington Post*