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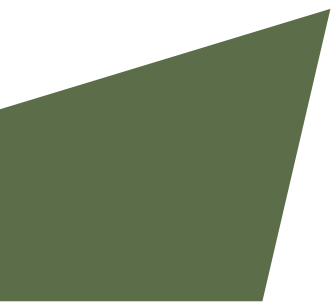
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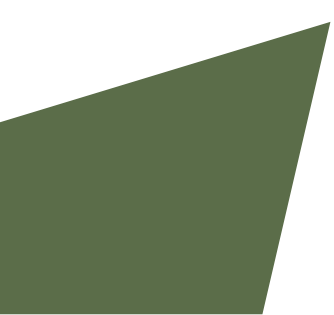
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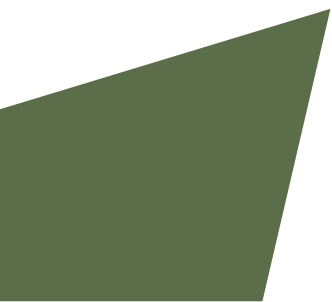
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Menstrual Hygiene Management

Naveen Saju¹ & Greeshma B Raj²

¹Student, Seventh Semester, BBA LLB, Co-operative School of Law, Thodupuzha, Kerala, Phone no:9496983777, E-mail ID: 3777naveen@gmail.com

²Student, Seventh Semester, BBA LLB, Co-operative School of Law, Thodupuzha, Kerala, Phone no:7025956539, E-mail ID: greeshmabraj98@gmail.com

ABSTRACT

Menstruation is a natural process. Menstruation and menstrual practices face numerous challenges which include social, economic, cultural and religious challenges. Those challenges act as a barrier for the menstrual hygiene. When a girl or women is denied from getting access to menstrual products then it can be considered as a human right violation. Such human right violations may emerge from the challenges or barriers of menstrual hygiene. When a girl or women is unable to get the menstrual products then it is affecting the dignity of a girl or women. The involvement of judiciary and the decisions of the court on various matters which uphold the status of women must be given eminence. One of the major reasons for the denial of women friendly toilets and lack of access to menstrual products for women and girls is the male dominated society. Charging costs for the menstrual products can also arise as a human right violation as many of the girls and women across the world are still not able to afford such costs. Many of the girls are lacking a proper education about menstrual hygiene and the need for the same, lack of knowledge about menstrual hygiene act as a great hindrance. There must be proper education about menstrual hygiene in order to overcome the difficulties and barriers they face at home, school and at work places.

Keywords: Menstrual hygiene, Challenges, Judicial act, Human Rights, Economic barriers

INTRODUCTION

The World Health Organization (WHO) considers those persons between the age group of 10 and 19 as adolescent³. It is the period of transformation from a child to an adult and during this period there occurs numerous physical, biological and psychological development of a child.⁴ Menstruation is an eminent phase in the life cycle of women that requires special care and attention. It is the process by which the lining of uterus gradually thickens and sheds off and causes bleeding which may last from 3 – 5 days, along with blood menstrual fluid contains mucus and vaginal secretions⁵ and two-thirds of the endometrial lining is shed during menstruation. The Indian society view menstruation as a taboo and considers it as impure and unclean,⁶ due to several social, cultural and religious beliefs. Lack of knowledge about proper management of hygiene during menstruation and due to shyness, the situation becomes worse for girls.⁷ Lack of education and high costs for the menstrual products are adding to the situation. If practices related to menstrual hygiene are neglected it may lead to toxic shock syndrome, reproductive tract infections (RTI) and other vaginal diseases.⁸

MENSTRUAL EQUITY

Menstrual equity can only be assured if all women and girls are provided access to menstrual products free of cost and also by educating those girls about menstrual hygiene.⁹ It is possible only by developing and uplifting the status and dignity of women and the women and girls should have their voice in the society for the same the governments and judiciary can play a vital role.

The World Health Organization (WHO) and UNICEF along with the help of the medical departments of the government and other various non-governmental organizations (NGO's) try

³ World Health Organization, "Programming for adolescent health and development," WHO Technical Report Series No. 886 vol.2, World Health Organization, 1996.

⁴ S.B. Thakre, S.S. Thakre, M. Reddy, N. Rathi, K. Pathak, and S. Ughade, "Menstrual hygiene: knowledge and practice among adolescent school girls of Saoner, Nagpur District," Journal of Clinical Diagnostic Research, vol.5, no.5 pp.1027-1033, 2011.

⁵ D. Sapkota, D. Sharma, H.P. Pokharel, S. Budhathoki, and V.K. Khanal, "Knowledge and practices regarding menstruation among school going adolescents of rural Nepal," Journal of Kathmandu Medical College, vol.2, pp.117-121, 2014.

⁶ A. Dasgupta and M. Sarkar, "Menstrual hygiene: how hygienic is the adolescent girl?" Indian Journal of Community Medicine, vol. 33, no.2, pp.77-80, 2008.

⁷ S.Nagar and K.R. Aimol, "Knowledge of Adolescent Girls Regarding Menstruation in Tribal Areas of Meghalaya," Studies of tribes and tribals, vol.8, no.1, pp. 27-30, 2017.

⁸ T.Rajaretnam and J.S. Hallad, "Menarche, menstrual problems and reproductive problems and reproductive tract infections among adolescents in rural and urban areas of northern Karnataka in India," in proceedings of the European population Conference, vol.4, pp. 1-4, Vienna Austria, 2010.

⁹ T.Rajaretnam and J.S. Hallad, "Menarche, menstrual problems and reproductive problems and reproductive tract infections among adolescents in rural and urban areas of northern Karnataka in India," in proceedings of the European population Conference, vol.4, pp. 1-4, Vienna Austria, 2010.

to bring a better menstrual hygiene management (MHM) among the women of various age groups in the under developed and developing countries.

Women are categorized in four life stages viz; unmarried woman, recently married women, married woman and older women. One of the major challenges faced is the lack of awareness and education among women and another one is the lack of paper water supply and the sanitation facilities. Besides conditions such as lack of social awareness, privacy, availability of clean materials, superstitions beliefs and customs among the certain religious cults and groups, lack of facility in providing both rooms etc also face difficulties in addressing MHM.

Among the poor and the downtrodden people, clean and good materials, clothes etc are not available. Besides necessary facilities for cleaning clothes, washing, drying, changing etc are less and they may not be in a position to use disposable materials due to the lack of financial condition. Thus, the MHM requires not only the provision of giving adequate physical conditions and suitable materials, but also social and individual awareness and to give a clear idea on the physical condition overcoming superstitions and age-old customs and practices.

WHAT IS MENTRUAL EQUITY

The women of younger age groups are especially facing a multitude of barriers in maintaining Menstrual Hygiene Management. There are several social challenges as well as structural challenges. Young girls should be given proper hygiene classes and understanding on how to manage this physical condition. These should be provided at the school level and by other elder's and women's organizations. They may also be aware of the various materials available now and its proper dispensation and disposals.

Structural Challenges include inadequate provision of clean water, sanitation infrastructure, privacy, material resources management etc. Many NGO's working among women can provide several steps to improve MHM among the women of middle- and lower-income groups who are more vulnerable and is not getting adequate education and structural facilities.

Challenges associated with the disposal of menstrual management materials were severally affecting a large number of women according to their existing social culture and economic status.¹⁰ Several Women of all life stages are suffering from menstrual pain and discomfort. Providing adequate sanitation facilities, washrooms, clean water and waste disposal facilities will bring a sea change in the MHM.

¹⁰ El-Gilany, AH,K. Badawe, El-Fedawy, S."Menstrual Hygiene Among Adolescent Schoolgirls in Mansoura,Egypt." Reproductive Health Matters 13 no.26(november2005)147-52.

Some society is marinating superstitious behaviors such as menstruating women are a taboo and should not enter religious places, kitchen etc. Such practices are posing a challenge to the self-esteem and individual rights of the women. Removing such superstitions may require adequate education in this front and to create an awareness of the biological needs of the living beings.

GOVERNMENT ACTIONS

Proper acts and rules and their strict enforcement shall facilitate a better environment to uphold the self esteem and equality gender based justice among women in such societies. A legal intervention may act as a catalyst in bringing social changes and removal of superstitious beliefs and customs that were followed in immature societies.

One of the major concerns in MHM is the availability of various materials for managing the menstruation. Rural women are still sticking on rags of clothes and its proper washing and drying will only ensure good hygiene practices. Among working women, students, travelling people etc, self absorbing pads are popular that needs proper disposal management.

Nowadays, some initiatives are taken by certain non-governmental organizations with the help of the local bodies and health department to provide menstrual cups among women. This prevents the tasks on the disposal management while ensuring hygiene practices. Also by providing neat and clean public toilets at various places may be a help to women of all age groups.

Due to the lack of the social support, women who are suffering from pain and discomfort during menstruation does not reveal the matter to their relatives. This bodily pain includes stomach aches, headaches, vomiting, pain in the hands, legs, back pain etc. And this will affect badly the ability of the women in carrying out their daily life and doing physical work. Often, this will result in mental tension and agony.¹¹ Only by getting proper social support from relatives, friends, co-workers etc. this problem can be addressed.

The restriction imposed on women during their menstrual period to enter into the kitchen, preparing food, touching utensils, offering prayers, daily rituals, etc. is a painstaking affair to meet of the women with self integrity. These can be addressed only by changing the socio-cultural environment and proper legislations and other legal remedies can go a long way in bringing such social and cultural changes in the society.

The women need tangible support to manage menstruation such as psycho-social support, gender equality, changes in the social customs and behavior, better awareness and education, providing

¹¹ Tegegne, Teketo Kassaw, and Mitike Molla Sisay. "Menstrual Hygiene Management and School Absenteeism among Female Adolescent Students in North East Ethiopia." *BMC Public Health* 14, no. 1118 (October 29, 2014). doi:10.1186/1471-2458-14-1118.

adequate toilet facilities, safe water supply, availability of clean clothes and disposable materials, social and family support etc.

Every generation thinks that the stigma and myths surrounding menstruation have at last been relegated to the musty past, that now sweet reason reigns. Huppert takes a dim view of such notions of progress; and if you think of the way Prozac, renamed Sarafem, is being marketed as the cure for Premenstrual Dysphoric Disorder (PMDD), an extreme form of PMS which supposedly affects between 3 and 10 per cent of American women, it does indeed seem that we have come round to a medicalised version of the old meat-spoiling stereotype.

Many studies, reviews, and meta-analyses have reported elevated mental health problems for sexual minority (SM) individuals. This systematic review provides an update by including numerous recent studies, and explores whether SM individuals are at increased risk across selected mental health problems as per dimensions of sexual orientation (SO), genders, life-stages, geographic regions, and in higher quality studies.¹² A systematic search in PubMed produced 199 studies appropriate for review. A clear majority of studies reported elevated risks for depression, anxiety, suicide attempts or suicides, and substance-related problems for SM men and women, as adolescents or adults from many geographic regions, and with varied SO dimensions (behavior, attraction, identity), especially in more recent and higher quality studies. One notable exception is alcohol-related problems, where many studies reported zero or reversed effects, especially for SM men. All SM subgroups were at increased risk, but bisexual individuals were at highest risk in the majority of studies. Other subgroup and gender differences are more complex and are discussed. The review supports the long-standing mental health risk proposition for SM individuals, overall and as subgroups.

Linguistic anthropology studies the nature of human languages in the context of those cultures that developed them. Scholars in the field seek to understand the social and cultural foundations of language itself, while exploring how social and cultural formations are grounded in linguistic practices.

Linguistic anthropologist's study the ways in which people negotiate, contest, and reproduce cultural forms and social relations through language. They examine the ways in which language provides insights into the nature and evolution of culture and human society.

¹² Good Policy and Practice in Health Education Booklet 9: Puberty Education & Menstrual Hygiene Management. Paris: United Nations Educational, Scientific and Cultural Organization, 2014.

Through synthesis of extant qualitative studies of menstrual experience, we highlight consistent challenges and developed an integrated model of menstrual experience. This model hypothesizes directional pathways that could be tested by future studies and may serve as a framework for program and policy development by highlighting critical antecedents and pathways through which interventions could improve women's and girls' health and well-being.

CONCLUSION

Menstrual equity could be obtained only by changing the mindset of people towards menstruation. The eyes of the society that view menstruation as a taboo and impure¹³ must be changed. Courts, Judiciary and the governments should play their role actively to improve the life of women and girls. The high costs for the menstrual product is the violation of the basic human right of women/girl. There must be distribution of menstrual products in schools and educational institutions free of cost.¹⁴ Our education system should be enhanced to play a vital role in the growth and development of a child by allowing them to respond to the changes and challenges they are facing.¹⁵ Women friendly toilets must be designed and built.¹⁶ There are institutions with sanitary napkin vending machines which are semiautomatic and can be operated by inserting coin on it, such technologies and practices must be spread. In order to reach the concept of menstrual equity the men, society and those barbarian customs should change and development of the society is possible only through changes towards betterment.

¹³ A. Dasgupta and M. Sarkar, "Menstrual hygiene: how hygienic is the adolescent girl?" *Indian Journal of Community Medicine*, vol. 33, no.2, pp.77-80, 2008.

¹⁴ R. Garg, S. Goyal, and S. Gupta, "India moves towards menstrual hygiene: Subsidized sanitary napkins for rural adolescent girls – issues and challenges," *Maternal and Child Health Journal*, vol.16, no.4, pp. 767-774, 2012.

¹⁵ A.O. Fatusi and M.J. Hindin, "Adolescents and youth in developing countries : Health and development issues in context ," *Journal of Adolescence*, vol.33, no.4 pp.499-508, 2010.

¹⁶ M. Kjellen, C. Pensulo, P. Nordqvist, and M. Fogde, "Global review of Sanitation System Trends and Interactions with Menstrual Management and Sanitation System Project, Stockholm, Sweden, 2011