

**It's time to invest in Menstrual Hygiene Management -
*Now!!!***



Keep our adolescent girls healthy; keep them in school

Menstrual Hygiene Day

28 May 2021

It's time to invest in Menstrual Hygiene Management (MHM) in Ghana

Key facts and figures on Menstruation

In Ghana:



Over 7 million women and girls in Ghana menstruate^{1,2}



1 out of 5 girls between the ages 15-19 feel excluded from school, social and home activities during their period⁵



Majority of girls do not have accurate information on menstruation before their first period³



1 out of 2 girls between the ages of 15 and 19 is anemic⁶, are at elevated risk due to loss of blood during menstruation



1 out of 4 public schools do not have access to sanitation facilities⁴ where girls may have space to change



Sanitary pad, a basic necessity is subject to a 20% import tax⁷ which drives the cost up and limits the access



9 out of 10 girls regularly miss school during their periods, which has negative impact on their learning and retention in



school²
Necessity to cover basic needs unmet by caregivers, including purchase of sanitary pads, is reported as a driver that pushes girls into exchange of money for sex and sexual exploitation^{3,8}

¹ Ghana Statistical Service (GSS), *Ghana's Population by Region, 2019*, [online: <http://www.statsghana.gov.gh/>, accessed on 08/05/2019 11:00am]

² House, Sarah; Mahon, Therese; & Cavill, Sue. 2012. *Menstrual Hygiene Matters; A resource for improving menstrual hygiene around the world*, WaterAid

³Nanbigne, Edward; Alhassan, Osman; Kwansa, Benjamin; & K. Awedoba, Albert. (2016). *Menstrual Hygiene Management Research in Zabzugu and North Dayi Districts*. Ghana Education Service (GES) and UNICEF

⁴ Ghana Education Management Information System (EMIS). 2019. *Basic National Profile – 2019/2020 School Year Data*. (Accra: Ministry of Education)

⁵ Ghana Statistical Service (GSS). 2018. *Multiple Indicator Cluster Survey (MICS 2017/18), Survey Findings Report*. Accra, Ghana: GSS.

⁶ Ghana Statistical Service (GSS), Ghana Health Service (GHS), and ICF International. 2015. *Demographic and Health Survey 2014*. Rockville, Maryland, USA: GSS, GHS, and ICF International.

⁷ The Parliament of the Republic of Ghana. 2015. *Act 905; Customs (Amendment) Act*.

⁸ Government of Ghana - MOH, UNICEF, DFID, UNFPA. 2014. *Adolescents and Young People in Ghana (10 to 24 years); A situation analysis*.

Policy Brief on Menstrual Hygiene Management (MHM)

Executive summary

In Ghana, 9 out of 10 girls miss school during their menses.

Lack of safe, clean spaces and affordable sanitary materials for changing often leave adolescent girls with no choice but to skip classes to skip school entirely during their periods^{2,5}. This results in a loss of classroom time and missed learning opportunity for girls, which leads to increased drop out and lower learning performance overall.

There is often not enough accurate information and education on Menstrual Hygiene Management for adolescent girls before menarche – their first period. They are thus often inadequately prepared for to manage menstrual hygiene as well as linked issues such as pain management or nutrition. These key issues are compounded by high costs of sanitary materials and harmful norms that exclude adolescent girls from education or social activity because of a natural biological process in their lives.

Simple actions by decision-makers, schools and communities can significantly change this reality for girls, providing confidence and support as they go through adolescence, a critical point in their mental, physical, and social development.

There is urgent need for investment by government and partners to address these issues to keep the girl child healthy and in school. There is need for action now!

Background

Menstruation is a normal and healthy part of life for girls and women. Roughly 26% percent of the world's population – 7 million girls and women in Ghana – menstruate^{1,2}.

For girls in Ghanaian schools, between the ages of 9 and 14, experiencing menstruation for the first time can be a terrifying experience. Research conducted in basic schools, led by the Ghana Education Service, found that one of the first challenges which adolescent girls face is the lack of essential information on managing menstruation before menarche – their first period⁶. Whilst the school curricula cover the biological aspects of menstruation, it imparts limited knowledge and skills on menstrual hygiene management.

One out of four Ghanaian public basic schools do not have toilets or clean water supply³, both of which are essential for girls to manage their menstruation hygienically and confidently. This means over 1.4 million school children do not have access to toilets or potable water. Those

¹ House, Sarah; Mahon, Therese; & Cavill, Sue. 2012. *Menstrual Hygiene Matters; A resource for improving menstrual hygiene around the world*, WaterAid

² Ghana Statistical Service (GSS), *Ghana's Population by Region, 2019*, [online: <http://www.statsghana.gov.gh/>, accessed on 08/05/2019 11:00am]

³ Ghana Education Management Information System (EMIS). 2019. *Basic National Profile – 2017/2018 School Year Data*. (Accra: Ministry of Education)

schools which do have the required infrastructure are often challenged by either insufficient financing or limited capacity to keep toilets and water supply functioning year-round.

The latest household survey conducted by the Ghana Statistical Service found that as many as one out of five adolescent girls feel excluded from education, social activities and work whilst they are menstruating¹.

Restrictions often imposed on young girls due to socio-cultural stigma of menstruation and the resultant psychosocial trauma they face is a rights issue.

The consequences from the constrained environment can significantly impact on:

Girls' Education: local evidence suggests that menstruation can contribute to a girls' school drop-out as much as poverty, social and cultural norms, child marriage, adolescent pregnancy or other factors^{4,5}. Lacking safe, clean spaces and sanitary materials for changing, adolescent girls often have no choice but to skip classes to change at home or skip school entirely during their periods^{2,5}.

Girls' Health: with the monthly loss of blood⁹ and neglected nutritional needs, girls are at risk of iron deficiency anemia. While anemia is associated with poor growth, reduced concentration and learning ability, physical fitness and work productivity; it is estimated that half of the girls age 15 and 19 in Ghana are anemic^{6,7}. Global evidence also suggests that menstrual hygiene practices, such as infrequent changing of pads, increase the incidence of reproductive tract infections^{8,9}

Girls' Protection: whereas most girls use and consider disposable sanitary pads a necessity⁶ to preserve hygiene, self-confidence, and dignity, they are costly and subject to a 20% import tax in Ghana¹⁰. The lack of viable local or other alternatives puts girls at risk of sexual exploitation as research reveals girls may be in relationships with men and boys who give them money for needs such as sanitary pads⁴. These relationships sometimes with 10 years older partners¹, come with unequal power and can be equivalent to commercial sexual exploitation, result in violence, unwanted adolescent pregnancy, as well Sexually Transmitted Infections (STIs) – including HIV/AIDS.

⁴ Nanbigne, Edward; Alhassan, Osman; Kwansa, Benjamin; & K. Awedoba, Albert. (2016). *Menstrual Hygiene Management Research in Zabzugu and North Dayi Districts*. Ghana Education Service (GES) and UNICEF

⁵ Wellington, N. Lantei. 2016, *Menstrual Hygiene Management Study Final Report: Understanding the Socio Cultural, Economic, Political Factors, Challenges and Opportunities*, WaterAid Ghana

⁶ Ghana Statistical Service (GSS), Ghana Health Service (GHS), and ICF International. 2015. *Demographic and Health Survey 2014*. (Rockville, Maryland, USA: GSS, GHS, and ICF International.)

⁷ World Health Organization. 2001. *Iron Deficiency Anaemia Assessment, Prevention and Control; A guide for programme managers*.

⁸ Torondel, B., Sinha, S., Mohanty, J.R. *et al.* 2018. Association between unhygienic menstrual management practices and prevalence of lower reproductive tract infections: a hospital-based cross-sectional study in Odisha, India. *BMC Infect Dis* **18**, 473

⁹ Ademas A, Adane M, Sisay T, Kloos H, Eneyew B, et al. 2020. Does menstrual hygiene management and water, sanitation, and hygiene predict reproductive tract infections among reproductive women in urban areas in Ethiopia? *PLOS ONE* 15(8)

¹⁰ The Parliament of the Republic of Ghana. 2015. *Act 905; Customs (Amendment) Act*

Investments to build on

Adolescent Reproductive Health Education in school curriculum – the GES with support from development partners, has developed and rolled out menstrual hygiene management and adolescent reproductive health education packages. Education topics such as those need to be mainstreamed in the education curriculum to make the access to information systematic and coherent and enable all girls and boys in schools to be empowered to reach their full potential¹¹.

GES minimum Guidelines for Water, Sanitation and Hygiene in Schools - require that all toilets are gender separated and private with water supply and that a safe space is available to girls to change their sanitary pads and clean themselves up¹². Advocacy for appropriate resourcing and continued implementation can play critical part in girls' experience in school and education.

Girls' Iron Folate Tablet Supplementation (GIFTS) programme - the Government of Ghana GIFTS Programme is the first holistic intervention to respond to the nutritional needs of girls' in puberty with the provision of iron-folate supplements, health and nutrition education. Its demonstrated evidence in anemia reduction and improved health and nutrition knowledge among girls present a strong case for scale up to all regions and make it an important investment in healthy menstrual hygiene management.

Data and Evidence on Menstrual Hygiene: In 2019 - The Education management information system (EMIS) integrated an indicator on menstrual hygiene. The Ghana Statistical Service's Multiple Indicator Cluster Survey (MICS) also collects data on menstrual hygiene. However, there is still a need for further evidence building to strengthen policy recommendations. Future research is needed on affordability, quality and safety of available sanitary materials, and management and maintenance of school toilet facilities.

Girls' Empowerment and Community Engagement for adolescent protection: It is critical to support the scale up of community-based programmes engaging with adolescent girls and boys – particularly those out of school, caregivers and community leaders, on issues of life skills, adolescent development and protection, adolescent sexual and reproductive health and rights (ASRHR), MHM taboos to address high risks associated with household discrimination, commercial sexual exploitation and sexual and gender-based violence (SGBV), often experienced by adolescent girls in Ghana.

Further, Government should consider reducing the cost of sanitary materials by supporting local innovation, eliminating the import tariffs on sanitary materials to enable wider affordability and contribute to a reduction of current safety and protection concerns.

Call to action: Increase investments in MHM

Based on available data and findings, we call on government to:

¹¹ Essuman, Ruth; Cronberg, Alex, 2018, *Assessment on the effectiveness of Menstrual Hygiene Management Campaign under WinS4Girls Project, Ghana*, (Accra: Kantar Public, UNICEF)

¹² Ghana Education Service (GES). 2014. *Technical Guide for WASH in Schools Facilities*.

1. ***Invest in girls' education and protection*** – GES should mainstream Education topics on Menstrual Hygiene Management and appropriate adolescent reproductive health education packages in the education curriculum to make the access to information systematic and coherent and enable all girls and boys in schools to be empowered to reach their full potential. Support the roll-out/implementation and coverage expansion of tools and guidelines, such as the newly developed Menstrual Hygiene Management Guidelines, the Safe School Resource pack, the Guidelines on Pregnancy Prevention and Re-entry of mothers back to school etc.
2. ***Urgently and significantly increase capital investment in MHM*** – government must increase investments in school infrastructure in line with the Ghana Education Service (GES) minimum Guidelines for Water, Sanitation and Hygiene in schools. Government must scale up provision of sustainable gender-friendly toilets with water supply and sanitation in schools for good MHM practices
3. ***Invest in nutritional needs of adolescent girls*** – government should continue to support the scale up of the Girls' Iron Folate Tablet Supplementation (GIFTS) programme in all regions to tackle anaemia prevalence and promote iron-rich nutrition for improved health and increased nutrition knowledge among adolescent girls
4. ***Urgently repeal the 20% import tax on sanitary products*** – the elected leadership must honour its promise and repeal the 20% import tax on sanitary products. This will help particularly the private sector make MHM products including both disposable and reusable sanitary pads accessible and affordable for all girls and women
5. ***Increase investment in data and evidence, stronger monitoring and accountability on Menstrual Hygiene*** – Increase investment for regular evidence building to strengthen policy recommendations and for research on affordability, quality and safety of available sanitary materials and management and maintenance of school toilet facilities
6. ***Increase investment in girls' empowerment and community engagement for adolescent protection*** - government should scale up community-based programmes that engage adolescent girls and boys – particularly those out of school as well as caregivers and community leaders, on issues of life skills, adolescent development and protection, adolescent sexual and reproductive health and rights (ASRHR), and MHM taboos to address high risks associated with household discrimination, commercial sexual exploitation and sexual and gender-based violence (SGBV), often experienced by adolescent girls in Ghana

Conclusion

At least 7 million girls and women in Ghana need access to quality MHM. Evidence from programmes and studies on MHM show that it supports adolescent girls stay in school and continue their education to the highest level. Provision of timely education and sustainable services support outcomes for girls and women across multiple dimensions, including education, health, and economic empowerment. Funding support for MHM will contribute greatly to meeting the Sustainable Development Goal 5: - ***Achieve gender equality and empower all women and girls.***



From the field



“I did not know about menstruation before I came to school. When they started teaching us, I felt that it was good. I did not feel shy. They teach boys and girls. It is important for boys to know about it because if they have sisters and they don’t know about it, they can’t advise their sisters.”