



MENSTRUAL  
HYGIENE  
INITIATIVE

দাকোপ উপজেলার নারীদের স্বাস্থ্যকর ঋতু/মাসিক ব্যবস্থাপনা উদ্যোগ  
Menstrual Hygiene Initiative (MHI) for Dacope, Khulna, Bangladesh

নারীদের স্বাস্থ্যকর ঋতু/মাসিক ব্যবস্থাপনা সংক্রান্ত প্রশিক্ষণ কর্মসূচী  
(MHI - knowledge Exchange and Awareness Raising Training)

তারিখ: ০৩-০৬ মার্চ ২০১৮ | স্থান: কুষ্টিয়া, দাকোপ, খুলনা  
Date: 03-06 March, 2018 | Venue: Kustia, Dacope, Khulna

সহায়তা প্রদান করে  
Implemented By:

সহায়তা প্রদান করে  
Funded By:

## Project Report

### Menstrual Hygiene Promotion Initiative (MHI) in Dacope Upazilla under Khulna District of Bangladesh

(MHI 1 - Pilot Initiative)

Project Duration: 03. – 06.2018

Association for Sustainable Community Enacted Development e.V.

- ASCEND -



## Project Report

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**Association for Sustainable Community  
Enacted Development e.V. (ASCEND)**

**Warstrasse 4**

**30167 Hannover**

 +49 151 42451824  
 info@ascend-global.org  
 www.ascend-global.org

Contents responsibility:

ASCEND e.V.

Board members & Project team

Note:

The present application describes the planned technical and financial implementation of the project "Menstrual Hygiene Promotion Initiative (MHI) in Dacope Upazilla under Khulna district of Bangladesh" as part of the ASCEND MHI Initiative. ASCEND is committed to the highest degree of transparency in its activities and finances. If you have questions or comments about this application, please contact the authors at the contact details above.

Picture Sources:

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Hannover, Aug. 24, 18



## Project Report



### PREFACE

This final report explains the measures taken in the project "Menstrual Hygiene Promotion Initiative (MHI)" in Dacope, Bangladesh as part of a pilot MHI initiative. The project was carried out in cooperation with the Bangladeshi non-governmental organization RUPSA based in Khulna. The final report was prepared by ASCEND e.V., based in Hannover who also funded and coordinated the project.

ASCEND e.V. expresses its gratitude to all employees, partners, supporters and sponsors for their tireless efforts, their unwavering dedication and outstanding collaboration, which made possible the successful implementation of this project.





## Project Report



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# 1 OVERVIEW

## 1.1 FACTS & FIGURES

### Project Scope

1. Conduction of awareness raising and capacity building training on menstruation and menstrual hygiene management in the West-Banishanta village in Dacope,
2. Intensive training on the proper uses, exchanges, handling and disposal of sanitary napkins
3. Provide market available disposable sanitary napkins (free of costs) for 3 months to 250 girls and women in the West-Banishanta village,
4. Establish a self-reliant centralized local supply and storage of hygiene products for the village, in particular sanitary napkins. Strengthen local supply system with micro-credit.

### Project Location

West-Banishanta Village, Dacope Upazilla, Khulna District, Bangladesh

Distribution of sanitary napkins (free of costs) for 3 months	250 girls and women (West-Banishanta)
Training on proper uses, exchanges & disposal of sanitary napkin	250 participants (West-Banishanta)
Awareness raising & capacity building trainings on menstrual hygiene management	in West-Banishanta village

### Direct Beneficiaries

Napkin supply & trainings	250 Women and Girls
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## **Project costs <sup>1</sup>**

### *Material costs*

Sanitary napkin purchase for 3 months	489.29 €
Napkin transportation	40.45 €

### *Awareness raising training and napkin distribution*

Event execution (training + 3 times distribution)	239.66 €
Banner	15.17 €
Snacks	32.36 €

### *Others*

Stationary, print, copy etc.	22.04 €
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**Total implementation costs** **838.99 €**

## **Project costs per beneficiary**

3.36 € / Person

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<sup>1</sup> Exchange rate based on EUR/BDT 1:98.32 on 06.07.2018

## 1.2 PARTNER ORGANIZATIONS

### Project Coordination

Association for Sustainable Community  
Enacted Development e.V. (ASCEND)  
Warstrasse 4  
30167 Hannover, Germany



### Project Partners in Bangladesh

Rural & Urban Poor's Partner for Social  
Advancement (RUPSA)  
Basupara, Northkhal Bank Road 52  
Solayman Nagar  
Khulna 9100, Bangladesh



## 2 STATUS QUO

### 2.1 PROBLEMS

The problems of girls and women in connection with menstruation and menstrual hygiene management in the project area are summarized as follows:

- Extreme taboos and superstitions on menstruation and menstrual hygiene management
- Social exclusion of menstruating girls and women
- Lack of awareness and knowledge about biological and medical backgrounds of menstruation
- Lack of education and knowledge of young girls before the first menstruation
- Harmful use of unsanitary cloths and rags as menstrual napkins
- Lack of access to sanitary products such as sanitary towels, tissue paper
- Lack of availability of affordable sanitary napkins for the poor
- Lack of access to medical care for menstrual disorders

### 2.2 DESCRIPTION OF PROJECT AREA

The project focused on **Banishanta Union**, one of the remotest and poorest unions under Dacope Upazilla in Khulna, Bangladesh (see the map below). **Banishanta Union** encompasses 12 villages and 9 wards which provides home to 16124 people, with 51% male and 49% female, consisting of 3583 families. The starting phase of the project was implemented in **West Banishanta village** of the union. This village provides home to a total population of 1001, with 511 males and 490 females. Among the total female population, approximately 250 girls and women were participated in this pilot project, which are in active menstrual age (age group 12 – 45 years).

The area is intersected by a river network and the rivers are tidal with semidiurnal, fortnightly, and seasonal variation in water levels. Main sources of income of the area comprises 77.07% agriculture, 4.85% non-agricultural laborer, commerce 2.86%, transport and communication 1.72%, service 3.10%, construction 0.93%, religious service 0.24%, rent and remittance 0.05% and others 9.18% (Banglapedia, 2015<sup>2</sup>). The agricultural practices are limited to rainy reason only and in dry season more than 90% of the agricultural lands are

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<sup>2</sup> Banglapedia, 2015. The national Encyclopedia of Bangladesh. About Dacope Upazilla, updated on 11.01.2015

left uncultivated due to lack of fresh water. Besides, agricultural productivity is reducing due to increasing salinity intrusion.

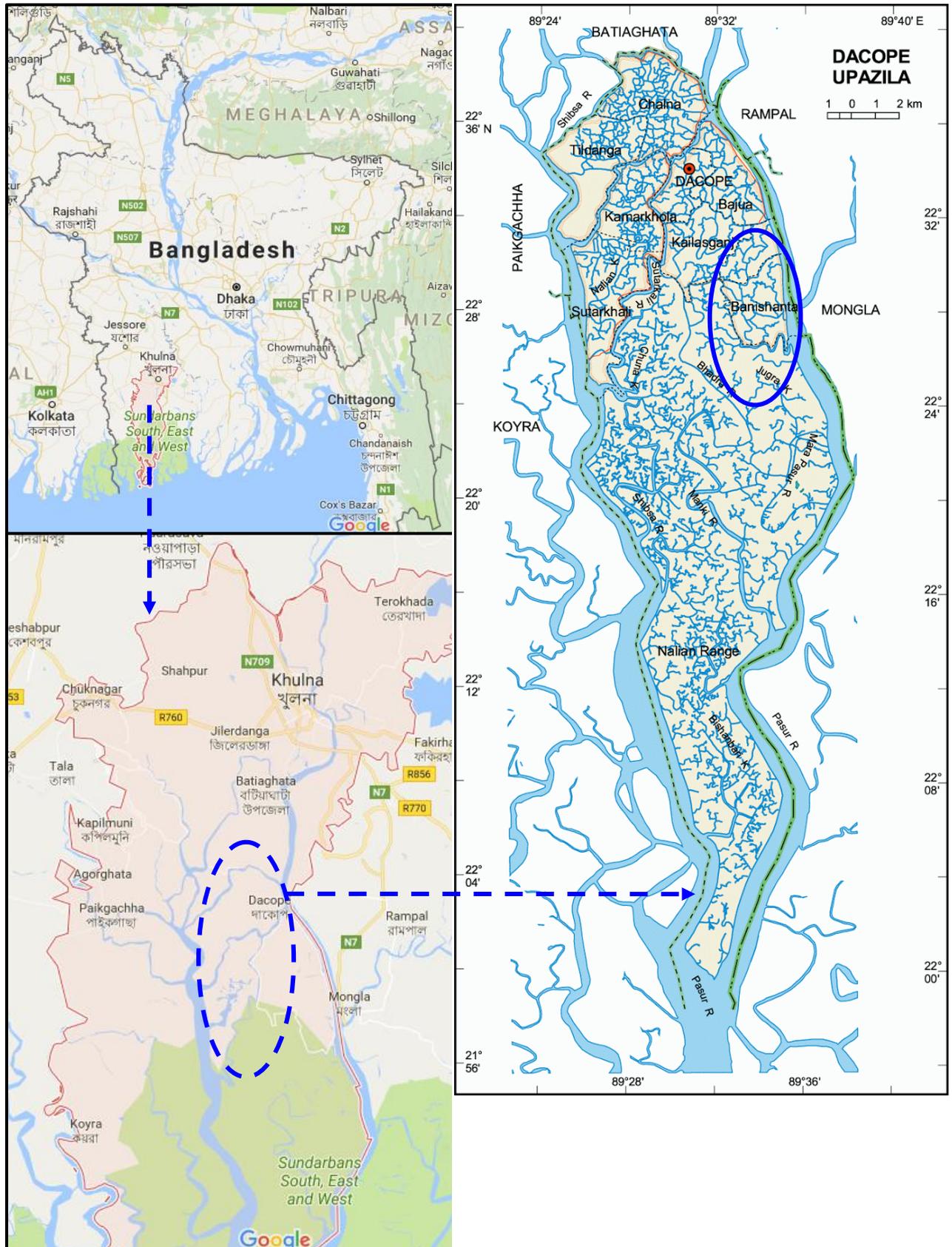


Figure 1 Location of the project area

Banishanta union is one of the remotest and under developed union in the upazilla and located near the Mangrove forest, Sundarban. The union is nearly 15 km away from the upazilla head quarter. There is a small bazar / market in 5 km away from the village but not everything is available there. People have to go for nearby city to buy special household items which is far away (40 km) from this remote village. Moreover female has little scope to go to the city to buy their cloths, sanitary and hygiene materials due to social, cultural and religious barrier.

### **2.3 STATUS OF MENSTRUAL HYGIENE IN THE PROJECT AREA**

Menstruation and menstrual hygiene is subject to strong taboos in Bangladeshi society. As a result, girls and women are considered "unclean" during their menstrual period and are excluded from much of the social activity during this period. Cultural beliefs and social norms severely limit the awareness and communication of female menstruation, both within society and among families. Young girls are usually uninformed about menstruation as a natural and healthy process, and therefore often hide their first menstruations due to shame and fear. Used menstrual bandages may be buried in the ground for fear that evil spirits will be attracted by blood. Societal norms reinforce the belief that things will be ruined if women touch them during their periods. Women and girls are not allowed to touch food, cooking utensils or garden tools. During menstruation, women are denied access to temples and mosques. To avoid conflict some women remain in their homes for up to seven days a month. Other women suffer from food restrictions or lack of participation in religious activity. While some of these practices are not an immediate health risk for girls and women, rejecting any communication on menstruation in the long term jeopardizes women's health and makes their lives and integration into society much more difficult.

Due to the taboo, accesses to hygienic menstruation products such as napkins are severely limited. Sanitary products are rarely available in local markets, and/or too expensive for most of the residents of the project area. The connection to larger, regional markets is hampered by the insufficient expansion of the road network. For women, a trip to regional markets without male accompaniment is not common. In addition, the purchase of menstrual products by male family members is avoided due to the taboo.

Most of the women in the project area do not use hygienic products during their menstruation. As a rule, unhygienic cloths or rags made of old saris and other clothing are used instead. During their period, women and girls sneak to the wells or ponds before dawn to wash themselves. During the day they hide their cloths in front of the male members of

the family in remote places (for example behind bars in the house, in wall cracks, in floor openings or in thatch). A UNICEF survey found that at least one third of Bangladeshi women hide their menses material from their male family members in unhygienic locations (UNICEF Bangladesh, 2008<sup>3</sup>). One in three girls fails to change their towels regularly or to wash them with soap or detergent after use. Only half of the women dried their rags under the open sky in the sun - a prerequisite for the killing of dangerous bacteria and pathogens. Failing this, used, damp material will begin to form mold quickly. Due to the lack of alternatives, however, the rags are reused, which often causes severe skin irritation and dangerous infections.

Insufficient menstrual hygiene leads to widespread vaginal and urinary tract infections. In addition, women and girls in poor families, despite severe infections, tend to avoid seeking medical help. A 2014 Population Survey in Bangladesh on health (WaterAid, 2014<sup>4</sup>) found that more than half of women seek medical treatment only if their husband allows them. Even if the husband decides that his wife or daughter needs medical care, one in three women cannot travel alone to a hospital or health center.

### 3 OBJECTIVES

The project concept was based on an integrated approach in promotion of menstrual hygiene education, women health & sanitation, and gender issues. Prime beneficiaries of the project were targeted to the women with age group 12 – 45 years old. Special focus were given to girls at school (age 12-13), as they have particular need of proper preparation but limited access to information and services. The project was planned with a multi-pronged behavioural and awareness raising communication approach for managing menstrual hygiene leading to knowledge exchange and women capacity building. Specific and long-term targets of the project are elaborated below.

#### *a. Breaking the chain of silence*

As menstruation is a neglected topic, women and girls in the project area do not speak out about the topic and are not involved in decision-making – for example, household decisions to build a toilet or spend money on sanitary pads. The result is a lack of

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<sup>3</sup> UNICEF Bangladesh (2008) Bangladesh; Tackling menstrual hygiene taboos; Sanitation and hygiene case study no. 10.

<sup>4</sup> WaterAid (2014) Menstrual hygiene in South Asia; A neglected issue for WASH (water, sanitation and hygiene) programmes.

facilities and services, e.g. a lack of separate toilets for girls at schools. It also results in a lack of social support and the culture of fear, shame, embarrassment and silence, completing the circle of neglect. This pilot initiative was targeted to break the ultimate circle of the silence through awareness raising, capacity building and knowledge exchange on menstrual hygiene management.

*b. Enabling a supportive environment*

In West Banishanta Village, menstruation taboos lead to serious restrictions on the daily activities of menstruating women and girls; in many, the stigma means that they cannot discuss menstrual hygiene freely. To improve the lives of women and girls, ASCEND (and RUPSA) tried to break the silence and dispel the stigma and shame by engaging with communities through participatory channels such as community theatre, schools, religious interactions, and interactive trainings.

*c. Increasing knowledge and skills*

Due to the stigma and silence surrounding this issue, women and girls, and men and boys, often know very little about menstruation and menstrual hygiene. To address this critical gap, ASCEND (and RUPSA) promoted menstrual hygiene education through training and knowledge exchange session in community platforms such as schools, communities, healthcare centers etc. Apart from the girls and women in the village, the targeted audiences ranged from local government officials, traditional leaders, and community health workers who can help to reinforce important messages on menstrual hygiene throughout the community.

*d. Improving access to sanitary products*

In West Banishanta, women and girls do not have access to quality and hygienic menstrual hygiene products. With this project, ASCEND ensured the availability, affordability and range of menstrual hygiene products by partnering with NGO RUPSA, social enterprises and the local stakeholders. After the pilot phase, ASCEND intends to provide seed funding through partner organization in Bangladesh to help establish menstrual sanitary marts, including purchasing the materials needed to produce sanitary pads, and stocking the marts with basic menstrual hygienic supplies.

## 4 EXECUTION OF THE PROJECT

The project was implemented over **4 months**, from March to June 2018. The target beneficiaries of the village were the women & girls who are in the reproductive cycle with age group between 12 to 45 years. The total number of this age group girls and women in the village were 250, who were participated in this pilot project.

### 4.1 TRAININGS AND NAPKIN DISTRIBUTION

In this pilot project, ASCEND conducted and coordinated menstrual hygiene education and training campaign in the project area through its partner organization in Bangladesh, RUPSA. In the very beginning, an Intensive training was carried out in the village for the target group to increase awareness in managing menstrual hygiene, capacity building for women and families and knowledge exchange on hygiene education. Main contents of the awareness raising training focused on the following aspects:

- The need for using hygienic sanitary items during menstruation, its proper uses and exchanges as well as disposal methods were disseminated through the training.
- Special sessions were arranged for the school girls in the age group 11-13 years to equip them with proper information and services for tackling their first stages of menstrual challenges and difficulties.

The intensive awareness raising and knowledge exchange training was conducted through five batches and during three days (05-07.03.2018). Main information regarding the training is mentioned below:

- Trainings conducted : 05.03 – 07.03.2018
  - Trainings provided : 248 women & girls
  - Married/unmarried : 186/62
  - Number of student : 47
  - Total batch : 5 batches
- |                       |                 |
|-----------------------|-----------------|
| 1 <sup>st</sup> batch | 50 participants |
| 2 <sup>nd</sup> batch | 54 participants |
| 3 <sup>rd</sup> batch | 53 participants |
| 4 <sup>th</sup> batch | 46 participants |
| 5 <sup>th</sup> batch | 45 participants |



Figure Training sessions, conducted by the trainers (Ms. Susmita & Mrs. Dipali)

Through this awareness raising event in the village of West-Banishanta, an active exchange of information and existing knowledge about menstruation & menstrual hygiene management are expanded and deepened. Existing problems were addressed, and solutions & possibilities were discussed to realize the ideas of women.

As more than 95% of the participants never used market available disposable sanitary napkins, a separate session was conducted to show the participants how to use and exchange properly sanitary napkins. This session was especially important for the school going girls who are experiencing the first phase of menstruation in their life.



**Figure Demonstration session of sanitary napkin use and exchange**

After the training and demonstration sessions, sanitary napkins for the first months were distributed to the participants. Sanitary napkins for the second month were distributed after 27 days from the first distribution and for the third round were distributed with the similar interval after the previous distribution. Sanitary napkins distribution dates are mentioned below:

- First month                      05.03.2018
- Second month                    30.03.2018
- Third month                        27.04.2018



**Figure Sanitary napkin distribution (photos of during and after distribution)**

Within this pilot initiative, disposable sanitary napkins for 3 months were distributed to the participants. Participants included 250 women, 47 of whom were students. As mentioned before, all the napkins were provided free of costs to make them understand the comfortability and hygienic aspects of sanitary napkins.

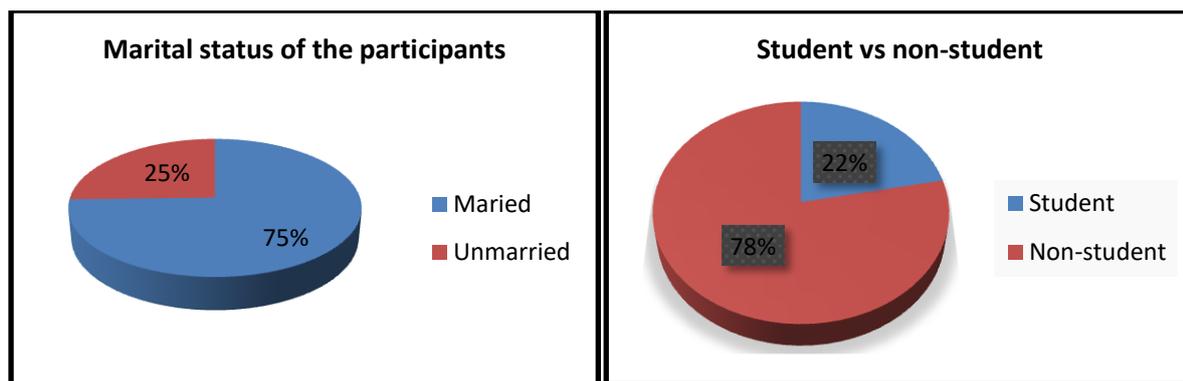
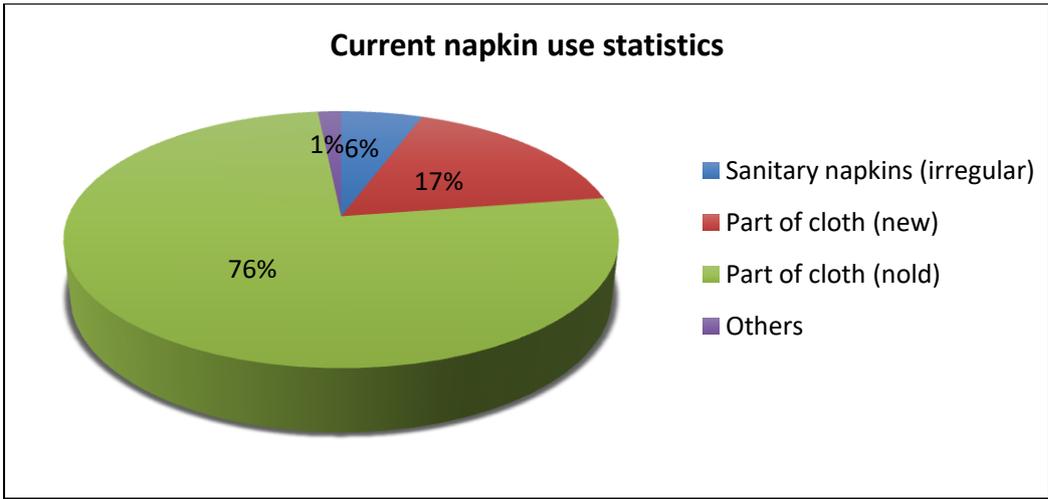


Figure participants statistics (marital status and students/non-students)

## 4.2 CURRENT STATUS AND PROJECT IMPACT ASSESSMENT

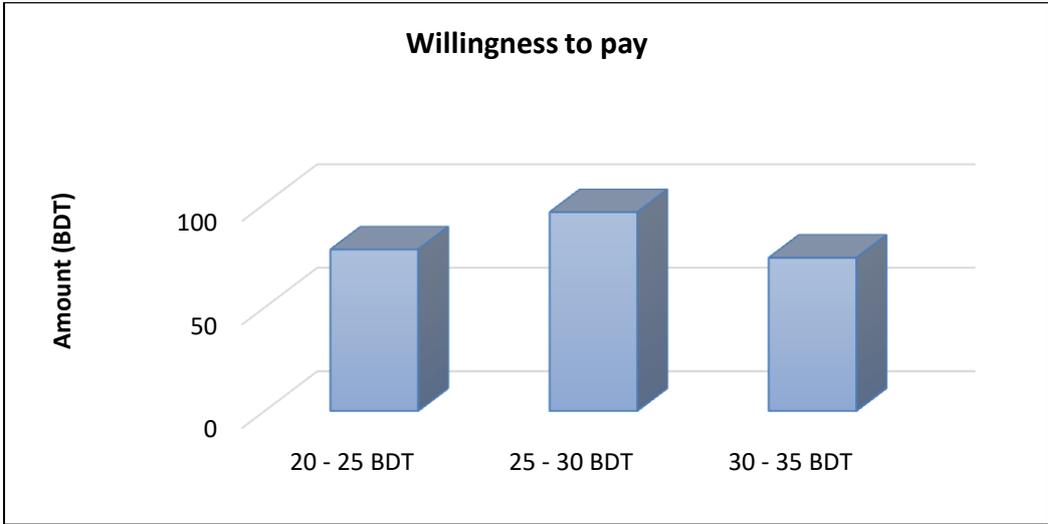
As part of the project, ASCEND conducted a survey on menstrual hygiene management to understand the current situation and assess the impacts of the interventions of the project. The survey showed that during the menstrual period, 76% of women currently use old cloths, 17% new cloths, 6% irregular sanitary napkins and only 1% regular hygienic pads. Key results of the survey are summarized below:

- Total participants : 248
- Number of student : 47
- Menstruation intensity : strong – 128,  
medium – 85,  
slow – 35
- Current sanitary napkin user : 0% (regular)
- Current sanitary napkin user : 5.6% (14 female) (irregular)
- Willingness to pay for sanitary napkins : 20-35 BDT/p/month
- (Market available sanitary napkin price : Min. 70 BDT/month)
- Napkins preferences after the pilot project : 76% Reusable (textile),  
24% one-time use
- Desired washing facility (for reusable napkins): 96% within household,  
4% central washing point



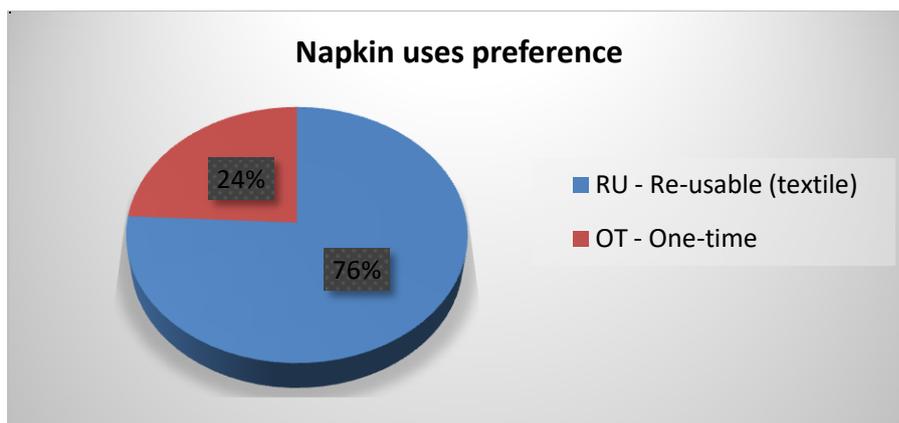
**Figure** current disposable sanitary napkin use statistics in the project area

An additional market analysis showed that the price for the cheapest sanitary napkins currently stands at a market price of 70 BDT / 8 pcs (for one month). However, based on the survey results, women in the region can only afford 20-35 BDT / month for napkins.



**Figure** monthly willingness to pay for the sanitary napkins in the project area

Among the participants, 76% of women prefer reusable napkins made of textiles and the rest prefer disposable napkins (24%). In the case of reusable sanitary napkins, household washing is preferred (96%), as opposed to at a central washing point within the village (4%).



**Figure** napkins use preferences of the participants

### 4.3 ESTABLISH FUTURE SUPPLY AND STORAGE FACILITY

After the project period, partner organization RUPSA and the local volunteer are working to set up a local store to make available sanitary products in the village/locality for girls and women, especially sanitary napkins. This is expected to help girls and women in the village to collect their menstrual sanitary napkins whenever needed, as they have very little scope to go market / city to buy sanitary napkins regularly. Apart from financial constraints, lack of availability of sanitary napkins in the locality is considered as one of the main obstacle to manage menstrual hygiene. The volunteer is being financially supported by RUPSA to maintain the supply and demand of the sanitary items through its micro-credit services.

## 5 NEXT STEPS

As the next steps, following project scopes are in consideration to implement in the 10 villages of Dacope:

- Establish a local manufacturing system for textile made sanitary napkins in Dacope Upazilla of Bangladesh,
- Build up proper know-how and skills within the local community to continue sanitary napkin production,
- Establish a mobile distribution unit to ensure the supply of sanitary napkins and hygiene products to remote villages from the production center,
- Conduct of intensive training and awareness raising events in every village for capacity building of women and girls,
- Implementation of three health camps for the treatment of menstrual disorders.



**ASCEND**