

WATER, WOMEN AND DISABILITY STUDY

MENSTRUAL HYGIENE MANAGEMENT

SUMMARY

The Water, Women and Disability study* found that in Vanuatu's SANMA and TORBA Provinces harmful menstrual beliefs were still prevalent in communities, leading to women internalising these beliefs and often isolating themselves during menstruation. Women reported feeling responsible for collecting their own water for bathing and washing their products and using separate latrines and bathing facilities during menstruation. These beliefs had negative implications for women with disabilities, given the attitudinal and physical barriers to WASH they frequently experience.

KEY FINDINGS

The study found that the most widespread harmful menstrual beliefs internalised by women and girls were that:

Menstruating women and girls will kill crops if they touch them, they must not work in the gardens, cook food, or lift heavy objects.

Cultural beliefs about menstruation are deeply held and practiced by women living in **both** rural and urban areas.

Women and girls adhere to cultural beliefs out of respect for men, not wanting to make male relatives ill because they are 'unclean'.

Some participants were told menstruation is normal, but it was always framed negatively as a 'PROBLEM' or 'WOMENS SICKNESS'

The negative language used to describe menstruation shows how menstrual taboos are passed down through the generations. The study found that key influencers for menstrual hygiene are mothers, older sisters and grandmothers.

The study found women and girls with disabilities were statistically nearly **twice** as likely to miss out on social activities.

37% of women and girls with disabilities cited a fear of leakage and 20% cited pain and discomfort as the main reasons for lack of involvement in social activities.

Sanitary pads were available to the majority of participants surveyed.

50% of women and girls in the study sample used single-use sanitary pads, with 39% using cloth.

Women and girls in urban areas were twice as likely to use single-use pads compared to women and girls in rural areas, who were conversely twice as likely to use cloth. The cost of commercial menstrual pads was a major barrier for most women and girls accessing them.

WOMEN AND GIRLS WITH DISABILITIES WERE STATISTICALLY

ALMOST THREE TIMES MORE LIKELY TO USE EITHER A MULTI-USE

SANITARY PAD OR CLOTH THAN A SINGLE-USE PAD, COMPARED

WITH WOMEN AND GIRLS WITHOUT DISABILITIES.



There were very few accounts of formal education in school about puberty and menstruation, accurate information on the menstrual cycle and how to manage it hygienically. Information that was provided in schools was often unclear and fuelled confusion and misconceptions related to sexual and reproductive health, including menstrual health.

All participants with and without a disability had limited understanding of the biology of menstruation, with many of them asking the researchers questions about how to hygienically use menstrual products.

*The Water, Women and Disability study findings on disability prevalence are based on data collected from 56,402 individuals across SANMA and TORBA provinces in Vanuatu, from 11,446 households. In addition, a case-control study of 1516 participants was also carried out. This means a sub-sample of survey participants identified as having a disability age 5+ and an equal number of people without disabilities were examined more closely to assess differences in WASH access and experiences about a range of topics such as education, menstrual hygiene and incontinence explored by the study.

















