

Adolescent Health-Tackling Menstrual Hygiene Issue through Social Marketing of Sanitary Napkins Scheme: An Evaluation Study from Haryana

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ABSTRACT

Background and objectives: Menstrual hygiene is far from satisfactory among a large proportion of Indian women. To overcome the barriers for using sanitary napkins among rural women in Haryana, a social marketing scheme was launched. As the program is in nascent stage of implementation the factors influencing it need to be evaluated. Therefore, this study aimed to analyze the stakeholder's perspectives and factors influencing this scheme.

Materials and methods: We carried out a qualitative study during April' 2011 in Lalpur, Naraingarh, Ambala, Northern India. The experience and opinion of rural girls, women, ANM, ASHA and Sakshar Mahila Samooh (SMS) members were elicited during 10 in-depth interviews and four FGDs.

Results: Majority of women were motivated to use sanitary napkins. They perceived that use of sanitary napkin was beneficial for them. The grass root workers involved in production work of sanitary napkins were disappointed with irregular flow of funds. The other stakeholders in the community were not actively involved in the implementation of this scheme.

Conclusion: To conclude, there is a huge marketing potential of low cost sanitary napkins in this rural area of Haryana. The program needs to actively involve various stakeholders and to ensure regular flow of fund.

Keywords: Adolescent, Health, Menstrual, Hygiene, Napkins, Rural, India.

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INTRODUCTION

Menstrual hygiene is unsatisfactory among a large proportion of Indian women. The current use of sanitary napkins among Indian female is very low (10-11%) compared to developed countries like USA (73-92%).¹

Readymade sanitary napkins are abundantly available in urban markets. However, even today, majority of rural women use cloth as menstrual absorbent.²⁻⁵ Practicing hygiene during menstruation is of utmost importance to prevent serious health effects ranging from reproductive tract infection, urinary tract infection, bad odor and many more.^{6,7} However, lack of knowledge about sanitary napkins, its high cost and lack of the disposal facility has

been reported as few of the barriers for use of sanitary napkins among Indian women.⁸

To overcome the financial barrier to use sanitary napkins and to promote use of sanitary pads among rural women the Government of India had launched social marketing of sanitary napkins. In Haryana also this is being implemented in collaboration with the Haryana Women Development Corporation Limited (HWDCL) since June 2009.⁹

Under this scheme, sanitary napkins production unit are run by Sakshar Mahila Samooh (SMS) or other self-help groups (SHGs). HWDCL financed these SHGs at INR 60,000 to 80,000 per unit. There was also a provision of 50% subsidy under NRHM to the SHGs of sanitary napkins. There is an additional provision of INR. 0.25/- per piece as incentive for the person who markets the sanitary napkins directly to the community. These sanitary napkins were sold with brand name of 'Mukti'. Each waterproof packet carried the 'NRHM' logo with name, address of manufacturing unit and date of manufacturing of napkins. The maximum retail price was INR 5/- and INR 10/- for 5 and 10 pieces respectively. The packaging also contained direction for disposal of used pads. The main outlet proposed for sanitary napkins distribution was 'Anganwadi' center and subcenters. This scheme was pilot tested during 2008 to 2009. Till December 2010, there were 120 such units in the state of Haryana. At Lalpur village, Naraingarh block, Ambala, Haryana also the sanitary napkin production unit was installed. However, production stopped after 9 months. This study aimed to analyze the stakeholder's perspectives and factors influencing this scheme in Lalpur, Ambala.

MATERIALS AND METHODS

We conducted a qualitative study in village Lalpur as it is the rural field practice area of Department of Community Medicine, PGIMER, Chandigarh where it provides preventive, promotive and curative services through a team of resident doctors, public health nurse, health workers and other support staff.

We carried out four focus group discussions (FGD) among the reproductive age women residing in study area. Each focus group consisted of seven to nine women of 18 to 45 years of age group. All participants were recruited from the same village. The domains related to sanitary

napkin use like, knowledge about menstrual hygiene, perception about sanitary napkin scheme were explored.

Ten-in-depth interviews were carried out with Accredited Social Health Activist, SMS and health workers of the area about the scheme. Before data collection consent of the respondents was duly obtained. Manual thematic analysis of the data was done.

RESULTS

All together 34 women were interviewed. Majority (88%) were lower/lower middle class women. Around (22%) women were unmarried. In general, women were aware about the sanitary napkins and were sufficiently motivated to use these. One participant said, 'First time, I felt a bit uneasy and restless. But later on it felt good.' Other participant said, 'Once we start using the napkin, it feels bad to use the cloth again. But we do not have any other alternative as we do not get the napkins now.'

Many women felt cloth to be more dependable. 'Napkins are as such good. But when we have heavy menses, the dependable thing is cloth only. Whenever, we go outside we use the napkins. Cloth is used when we are at home.'

One participant felt that sanitary napkin will cure the disease. 'Behan ji told me that if you use this napkin your disease of watery discharge will go away. That's why I started using it. But, neither the disease was cured nor we get any napkins nowadays.'

Women felt that disposal of used napkin was difficult. 'We have been told to bury the napkin in the ground. What if someone sees us or ask awkward questions regarding it? Given this scenario, I think cloth is the only alternative. At least, we can hide it and dry it' another woman said 'I throw it along with garbage.'

SMS Pradhan and ASHA reported that now village women ask about the availability of sanitary napkins; 'Girls and village women always enquire regarding when they will again get the napkins?'

The financial constraint emerged as the main reason of stoppage of production. One member of SMS said that 'All the government schemes are like this only; these starts off well, but later only God can only save these.'

Women involved in sanitary napkins production were not satisfied with the subsidy given to them. They told that they get Rs. 10 per pack, whereas the actual cost borne by them was Rs. 18. One member said 'We do not get the returns for the time we spend.'

Other member said 'I like making napkins but I have to leave all my work and spend time making them and get only 20 paisa per pad in return. You only tell me if it is justified? I leave all my household chores for this!'

'In the beginning we liked working in this scheme. But due to shortage of money it has stopped. We do not feel like working this way with frequent disruptions.'

We have even talked to officers to increase the price from 10 to 18 rupees but they said that one can get it for 20 rupees in market so we cannot raise its price, this will affect the scheme. 'We have even stopped paying the premium of our loans..... from where will we pay?' 'We as well the village women feel harassed because of the shortage of funds.'(SMS Pradhan).

'Government has whiled away so much of time just giving repeated assurances that we would get funds. But nothing materializes. Finally, when we got money, the raw materials from Ambala were not available. Even the women who make napkins are angry. I am also thinking of stop doing this work. But, if I stop this work, no one is there in this village that will be willing to take up this work. Madam, no one wants to get involved in governments scheme. (SMS Pradhan).

Ignorance about the sanitation among villagers emerged as major hindrance for proper disposal of sanitary napkins. 'No work is being done in Village Health and Sanitation Committee. They do not agree regarding the dustbin. Once or twice I have raised this issue in the meeting but they said that in villages you do not require it. Now it has been months since I have discussed regarding it since napkins are not being made anymore.'(SMS pradhan).

Health workers who were supposed to distribute the sanitary napkins felt that it is useless to add one more task in their schedule. 'We already have a very hectic schedule. Why should we be involved in distribution of napkins?' (Health Worker).

The implementation of program focused mainly on the production work, proper distribution outlet was not established. Till the time of study the main distribution mode was through SMS members. 'We carry it with us in community meetings and distribute it.' (SMS member).

The other major focus area of the success of any program is intensive Information Education Communication activities. However, the grass root workers that are the providers were not aware of this. 'Are we supposed to organize IEC for this scheme..... Nobody has asked us.' (ASHA).

DISCUSSION

Social marketing scheme of sanitary napkins as compared to other government programs like family planning has emerged as a felt need among every group of women. Majority of women were aware of sanitary napkins and were sufficiently motivated to use these.

Apparently, media exposure and interpersonal communication had adequately enhanced their awareness about sanitary napkins. Still, majority of them were using rags during menses. This seems to be culturally acceptable behavior. Many women felt cloths to be more dependable. (Napkins are OK otherwise, but, when menses are heavy we depend on rags only). This may be because of two reasons. First, the pads come in predetermined sizes and by appearance; these might not look adequate to absorb heavy flow. Women may find cloth more reliable as they could vary its size as per need.

They may also have more faith in clothes... as they have been using it earlier. There is no problem of shortage of cloth pieces in home setting. On the other hand, they witness shortage of supply of government napkins scheme.

Nonetheless, rural women are willing to use sanitary napkins. They considered it convenient to use when they went other towns, possibly because of disposal was not the problem. Rags were preferred in routine daily life at homes. Use of pads only during their outings would also minimize the expenditure. Use of sanitary napkins fits into the aspired lifestyle of younger lot of women. This reflects an element of sanskritization where women yearn to copy urban females who use pads. Sanitary napkins are new sophisticated products.

However, women expressed some degree of 'perceived difficulty' in disposal of used pads. They felt it quite embarrassing for them to bury sanitary napkins in earth. (Madam told us to bury the used napkin underground. But, how can we do that. Someone may see us doing this..... and may ask awkward questions.) Moreover, there is no place for a dustbin in Indian rural scenario which could have served as disposal place for used sanitary napkins. This is because of various myth and beliefs linked with rags/pads smeared/soiled by menstrual blood. This is considered to be a potent object for casting 'magic spell' or 'evil eye' on others. People have a belief that if you step across a menstrual rag 'thrown by others' you may face bad luck (or that evil spirits will possess you).

Of late, there have been many successful examples of schemes of providing low cost sanitary napkins at the doorsteps of rural women in Tamil Nadu, Uttarakhand, Karnataka, Madhya Pradesh, West Bengal and Odisha.¹⁰

Now, the government intends to popularize its use in rural areas. An idea of mass production of napkins has been adopted by the government. This has been integrated with women empowerment (income generating effort) by involving them as producer of napkins.

In our study, it was pointed out by the women involved in production of sanitary napkins that the money given to

them was inadequate to compensate for the loss resulting from their absence from home, when they went to toil at the napkin manufacturing machine. They felt that they did not get returns for the time they spent for this work. This has led to dissatisfaction among them, which is bound to affect the program adversely. Therefore, like many other government ventures, this scheme appears to ignore the fact that people are aware of their rights. For the success of any program, persons involved in every step of its implementation must be motivated enough to contribute their maximum effort. In any such scheme of community involvement, incentive given for any work is the most important motivating factor besides other things like recognition, self improvement, responsibility and the nature of the work itself. However, in this scheme, the incentive paid to women for production of napkin has ignored the opportunity cost involved.

Further, the flow of funds is a critical determinant for implementation, sustainability and success of any such program. Due to delay in flow of funds, production of pads in Lalpur village production unit was suspended for 9 months. This aggravated the dissatisfaction among women of SMS involved in napkin manufacture as well as among the user community. The enthusiasm among women has started waning off. Image of government scheme among community is also getting adversely affected. It has not been able to meet the definite demand for pads among women and girls.

Moreover, sustainability of any community health program depends primarily upon active participation of community. National Rural Health Mission has emphasized on the importance of community participation in a big way. It was expected that community leaders (VHSC) would participate in the governance and improvement of the health facilities of the area. But in our study, community felt that this committee had not proved to be beneficial for village. They felt that they did nothing other than organizing meetings and that too not for welfare of general public. There was even a lack of consensus among the members for installing dustbins in village for disposing off used pads. Failure to reach at a consensus for a dustbin installation at village reflects that, not enough ground work was done as far as cultural sensitivity of villagers was concerned. It is all the more important in issues related to women's health.

Besides the problem of irregular flow of funds, there are many issues which need to be addressed. Despite the fact that the program has completed 2 years, there is still a lack of proper outlet for distribution of napkins. The main mode of distribution of napkins among village women was

by the SMS members or Pradhan who sold these napkins during routine village level meetings.

CONCLUSION

There is a huge demand of low cost sanitary napkins in rural Haryana. But, lack of regular flow of funds appears to be a major reason for stoppage of production work of sanitary napkins.

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