

MENSTRUAL HYGEINE MANAGEMENT  
IN KILIFI COUNTY

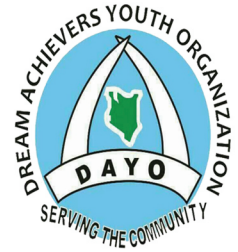
# POLICY BRIEF

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ACHIEVERS YOUTH ORGANIZATION







## BACKGROUND

Menstrual hygiene is fundamental to the dignity and wellbeing of women and girls. MHM has an impact on development as it has implications on the life of girls and women related to health, education, work, mobility and security. The inadequacy of proper sanitation facilities and affordable hygiene materials for use by girls and women of reproductive age at home, at school and at workplaces, affects their health, their potential to access education, employment, overall safety and quality of life. Globally SDGs 3, 4, 5, 6, 8 and 12 are important in supporting safe and dignifying Menstrual Hygiene Management. These goals support empowerment and education of women and girls through promoting healthy MHM. There also exist systemic factors that impact the quality of MHM: social norms, political will policies and quality health services. Kenya has launched its first Menstrual Hygiene Management Policy 2019-2030. Alongside the policy, there are other documents that include components of MHM: National reproductive health policy 2007, The Gender Policy in Education 2007, Kenya Health Policy 2012-2030, National Sexual and Reproductive Health policy, Environmental Sanitation and Hygiene Policy and Strategy 2016-2030 and National School Health Policy 2018-2023



**PROMOTING MENSTRUAL HYGIENE MANAGEMENT IS AN IMPORTANT STEP TOWARDS SAFEGUARDING THE DIGNITY, BODILY INTEGRITY AND OVERALL LIFE OPPORTUNITIES AND OUTCOMES FOR WOMEN AND GIRLS**

### MENSTRUAL HEALTH



#### **Menstrual health:**

A state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity, in all matters relating to the menstrual process.

#### **Menstrual hygiene management:**

Women and adolescent girls using a clean menstrual management material to absorb or collect blood that can be changed in privacy as often as necessary for the duration of the menstruation period, using soap and water for washing the body as required, and having access to facilities to dispose of used menstrual management material



## GLOBALLY

52% of the female population is of reproductive age at any given time.

Globally at least 500 million women and girls lack proper access to menstrual hygiene facilities.

Only 27% of the population in least developed countries has a hand washing facility with water and soap at home. Managing periods at home is a major challenge for women and adolescent girls who lack these basic facilities at home.

On estimate globally, on any given day, more than 800 million girls and women menstruate. That is presumably based on a global average of 2.5 births per woman.

## NATIONALLY

46% of the population in the rural areas use disposable sanitary pads compared to 65% in the urban areas, 6% in the rural areas use reusable sanitary pads compared to 3% in the urban areas. 20% in the rural areas use either toilet paper, pieces of blanket or cloth or other natural materials compared to 19% in the rural areas. 65% of women and girls in Kenya cannot afford sanitary pads.

Information about menstruation is received from mothers, 87.7% and from teachers 15.5%

Mimi natumia zile pads za kuosha. Nilipatiwa na shirika moja kule shuleni. Damu zangu huwa nzito sana na sijui kwa nini. Japo nazitumia zile vitambara, watu wengi hawajui changamoto ambazo twazipata. Yangu kubwa ni kufua na kuanika zile vitambaa, huwa nashikwa na aibu kubwa sana"- **Halima 12 years, Kilifi North**



Creating an enabling MHM policy environment in Kilifi County will result into improved women and girls' health and wellbeing, gender equality for men and women while improving girls' education, skills and development

- **Seif Jira, Executive Director: Dream Achievers Youth Organization.**



## KILIFI COUNTY SITUATION

21.8% of girls between the ages of 15 and 19 in Kilifi county had begun child bearing compared to the national average of 18.1%. There is scarcity of MHM county specific data

In a 2017 Randomized Controlled Study, Zana Africa established that: The primary sources of menstruation information were: teachers (39%), friends (38%), mothers (33%) and sisters (31%), and other relatives (15%). Almost all girls reported disposable sanitary pads as the main method they use to manage menstruation at home (94%) and at school (97%). Some other methods used were old pieces of cloth (20%), new pieces of cloth (4%), and cotton wool (3%). From the study it was clear that there is still a gap in access to materials to manage menstruation. Among menstruating girls, only one-fifth (21%) said “yes” when asked whether they feel they have enough pads to manage their periods comfortably. Only half (54%) reported receiving pads at school during the previous term, and this proportion was significantly higher in Ganze (60%) and Magarini (60%) as compared to Kaloleni (42%). The majority of these girls received pads once or twice during the three-month term followed by one holiday month, with most receiving one or two packets at a time.

In a 2020 Online survey Connect to Retain organization it was established that women and girls do not think there is a relationship between menstruation and pregnancy with women and girls reporting that they feel restricted to engage in certain activities while menstruating like visits to worship places.

Kilifi County has made great progress in improving sexual reproductive health among its communities through the Adolescent youth sexual reproductive health/HIV strategy among other county policies.

Significant barriers to safe menstrual hygiene management still remain in Kilifi County. The Kilifi AYP strategy recognizes knowledge gap on MHM in communities. Formative evidence indicates that poor MHM contributes to inequality, increasing exposure to transactional sex for sanitary pads. Further evidence shows the effect on school indicators and repercussions on Sexual reproductive and general health of women and girls.

Low prioritization of MHM and lack of guidelines in the county has further resulted to low implementation of policy frameworks which have components of MHM, low budget allocation for MHM activities, lack of a county stand-alone MHM technical working group, and lack of proper MHM partners' coordination

While menstrual hygiene is a paramount affair, the connection between menstrual health and sexuality cannot be underestimated. I encourage everyone to unpack menstrual health while championing for menstrual products availability, for no women should lack menstrual products, and no girl should become pregnant as a result of lack of knowledge on Menstrual health - **Kenneth B Miriti, Adolescent Health coordinator-Kilifi county**





## WE THEREFORE CALL UPON THE KILIFI COUNTY GOVERNMENT TO:

1. Conduct Contextual research to generate new county specific evidence for successful interventions.
2. Integrate Menstrual hygiene management into the Kilifi AYSRH/HIV strategy
3. Domesticated the Menstrual Hygiene Management Policy 2020-2030 {gender inclusive} that will align health, WASH, gender, education, Livelihoods to ensure the policy addresses MHM not only in schools but in spaces where women and girls live, work, play or seek services. The policy should have an implementation strategy.
4. Integrate MHM in Kilifi County Integrated Development Plan and County Health Strategic Plan.
5. Establish a Multi-stakeholder Menstrual hygiene Management thematic group with an inclusion of the private sector. The thematic group to deliberately outline clear engagement opportunities for vulnerable women and girls to ensure a community centered approach towards its operation.
6. Strengthen coordination of Partners and stakeholders working on MHM for reporting while aligning all partners in SRH.

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POWERED BY:

