

GUIDANCE NOTE:

MENSTRUAL HEALTH & HYGIENE FOR GIRLS AND WOMEN WITH DISABILITIES

Background

Menstruation is a natural fact of life and a monthly occurrence for 1.8 billion girls and women of reproductive age. Yet millions of menstruators¹ across the world are denied the right to manage their monthly menstrual cycle in a dignified, healthy way. Girls and women with disabilities face even greater challenges

in managing their menstruation hygienically and with dignity. Girls and women with disabilities face a double stigma due to both social norms around gender and menstruation and having a disability. A 2019 systematic review of menstrual hygiene management requirements, its barriers, and strategies for persons with disabilities found that menstruation challenges were a source of shame for girls and women with

¹ Throughout this guidance, the term 'girls and women' is often used as a stand-in for all menstruators regardless of gender identity. This shorthand is used to increase readability. As part of UNICEF's commitment to equality and human rights mandates, programmes should be inclusive of transgender and non-binary persons who have menstrual health and hygiene needs.

disabilities, with consequences including social isolation and even forced sterilization.²

This tip sheet offers a framework for supporting menstrual health and hygiene (MHH) and practical entry points for meeting the needs of menstruators with disabilities.

More than 1 billion people worldwide are estimated to have a disability. This includes up to 10 per cent of children.³ Children in low- and middle- income countries (LMICs) are more likely to have disabilities than children in higher-income countries.⁴ A review of 15 LMICs found that only slightly more than 50 per cent of children with disabilities were attending school.⁵

- 2 Wilbur, Torondel, Hameed, Mahon and Kuper (2019) Systematic review of menstrual hygiene management requirements, its barriers and strategies for disabled people. Available online at <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0210974>.
- 3 UNICEF (2007) Promoting the rights of children with disabilities. Florence, Italy: Innocenti Research Centre.
- 4 World Health Organization and World Bank (2011) World Report on Disability. Geneva: WHO.
- 5 Mizunoya, Mitra and Yamasaki (2016). Towards Inclusive Education: The impact of disability on school attendance in developing countries. UNICEF. Available online at <https://www.unicef-irc.org/publications/pdf/IWP3%20-%20Towards%20Inclusive%20Education.pdf>.

Girls and women with disabilities face a double stigma due to both social norms around gender and menstruation and having a disability.

Women and girls are more likely to have a disability, facing a 19 per cent likelihood rate versus 12 per cent for men and boys. According to a 2017 report by the United Nations Secretary General on the situation of women and girls with disabilities and the status of the Convention on the Rights of Persons With Disabilities (CRPD), women and girls with disabilities were expected to reach 700 million globally by 2015.⁶

Inaccessible water, sanitation and hygiene (WASH) facilities in communities, schools, health-care facilities and public places add to the long list of barriers that prevent girls and women with disabilities from participating fully in social and economic life. Lack of disability-accessible WASH facilities is also a barrier for girls with disabilities to attend school. MHH education and support is critical in both in- and out-of-school programming to reach girls with disabilities. It is often assumed that girls with disabilities do not menstruate, so education is needed to dispel menstruation and disability myths.

Menstruating girls and women with different types of disabilities may have different needs. Those with physical impairments in their upper body and arms may have difficulties placing their sanitary protection materials in the correct position and washing themselves, their clothes, and the menstrual materials. Those with vision impairments (blind or low vision) may face challenges knowing if they have fully cleaned themselves, and those with intellectual and developmental impairments may need accessible and easy-to-read materials tailored to support them to communicate about pain and their needs and to learn about MHH.

Partnering with women and girls with disabilities and organizations of persons with disabilities (OPDs) throughout the cycle of MHH programming will help to identify the needs of women and girls with disabilities and design or adapt MHH programmes to be inclusive.

- 6 UN Secretary-General report on the "Situation of women and girls with disabilities and the Status of the Convention on the Rights of Persons with Disabilities and the Optional Protocol thereto," September 2017 <<https://www.un.org/development/desa/disabilities/news/dspd/women-and-girls-with-disabilities-crpd.html>>



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Framework and Practical Entry Points for Reaching Girls With Disabilities

The framework for MHH outlines four pillars of programming, underpinned by principles to achieve access to safe and dignified menstruation for all girls and women.⁷ As cornerstones of MHH interventions, the four pillars – social support, knowledge and skills, facilities and services, and materials that support results in four key areas – together can help to ensure that girls with disabilities are able to manage their menstruation safely and with dignity.

Enabling environment, or a set of conditions that support the effectiveness, scaling up, sustainability and replication of disability-inclusive MHH interventions and outcomes:

- ✓ Ensure evidence generation and learning around MHH includes girls and women with disabilities.
- ✓ Include OPDs and agencies working with girls and women with disabilities in MHH working groups.
- ✓ Build capacity of health, education and WASH professionals to communicate with girls and women with disabilities on MHH by including disability modules in WASH in schools and MHH trainings.
- ✓ Address stigma and discrimination and empower family members to support girls with disabilities to manage menstruation safely and with dignity.
- ✓ WASH in schools sector standards and guidelines contain provisions for gender and disabilities, and also include the concerns of girls and women with disabilities and are accessible and easy to read.
- ✓ Agencies allocate resources specifically for disability-inclusive MHH.

⁷ UNICEF (2019) Guidance on Menstrual Health and Hygiene <https://www.unicef.org/wash/files/UNICEF-Guidance-menstrual-health-hygiene-2019.pdf>

PILLAR	SOCIAL SUPPORT	KNOWLEDGE & SKILLS	FACILITIES & SERVICES	MATERIALS
Objective	Combating stigma and discrimination by applying approaches of social and behavior change communication.	Access to accurate, timely information. Inclusion of images of girls/boys with disabilities in MHH materials.	Access to safe, private, reliable infrastructure and supplies, including accessible transportation.	Access to affordable, appropriate sanitary protection materials.
Key considerations for reaching girls with disabilities	<ul style="list-style-type: none"> • Inclusive and special schools are included in MHH interventions. • Outreach activities accompany school-based interventions to reach out of school girls. • Reach out to OPDs and informal groups of parents of children with disabilities. • Engage and empower families of girls with disabilities to provide support to manage menstruation safely and with dignity • Reach out to boys, men and other persons not involved in the menstruation process to counter stereotypes associated with menstruation. 	<ul style="list-style-type: none"> • Knowledge materials are available in at least two different formats (e.g., audio, Braille, sign language, easy-to-read versions). See case study below. • Data is disaggregated by sex and gender, age, and disability. • Girls and women with disabilities are included in monitoring and feedback processes, and feedback mechanisms are adapted/ designed to be suited to their varied communication needs. 	<ul style="list-style-type: none"> • Girls and women with disabilities participate in the design of gender-responsive and disability-accessible WASH facilities and services. • Design or adapt WASH facilities to be both gender responsive and disability accessible and meet national or international accessibility standards. • Girls and women with different types of disabilities are involved in facility audits for safety and suitability. 	<ul style="list-style-type: none"> • Girls and women with disabilities participate in choosing appropriate materials. The choice will differ based on the type of disability, comfort and ease of use. • Materials and supplies, such as soap, are placed at a height that can be reached by girls and women using wheelchairs (suggested height is 600mm to 700mm above the floor). • Girls and women with disabilities are involved in monitoring and evaluating the use of materials and supplies.

EXCERPT FROM A CASE STUDY:

Addressing MHH for children with disabilities in Kyrgyzstan

(UNICEF MHH Guidance, 2019, page 67)

“In 2018, UNICEF and Plus Public Foundation partnered to produce education materials on menstrual hygiene, school safety and child rights in alternative formats for children with visual and hearing disabilities. The project aimed to provide children with visual and hearing disabilities with access to critical information on child rights, girls’ hygiene and safety. Three MHH publications in Kyrgyz and Russian languages (‘Growing up and Developing’ and ‘Akylai Is Growing Up,’ which are puberty books for girls, and ‘Talking to Daughter,’ a guide for parents) were reproduced in Braille and audio formats. The Kyrgyz WASH in Schools Guidebook and a publication on safe behaviour for schoolchildren were reproduced in video format with subtitles and sign language interpretation. While children and parents can access the materials through two specialized schools, the materials will be made available for a broad audience through the wins4girls.org website.”

Access to safe and dignified menstruation is fundamental for all menstruators. Women and girls globally face stigma, ignorance and exclusion due to experiencing menstruation. Girls with disabilities often experience double discrimination, due to both their gender and having a disability. The additional stigma of menstruation makes girls with

disabilities far less likely to receive the information, supplies and support they need for MHH. Stigma, misunderstandings and exclusion can lead to harmful practices – a systematic review of disability and MHH found evidence of forced sterilization for girls with intellectual disabilities in order to manage menstruation – in many places, from Australia to the United States to India.

Girls with disabilities have capacities as well as vulnerabilities, enabling them to face considerable challenges on a daily basis.⁸ With more inclusive MHH programming and support, girls with disabilities can be empowered to manage their menstruation in a dignified and healthy way.

⁸ SHARE & WaterAid (2012) Menstrual Hygiene Matters: A resource for improving menstrual hygiene around the world. Available online at <http://www.wateraid.org/what-we-do/our-approach/research-and-publications/view-publication?id=02309d73-8e41-4d04-b2ef-6641f6616a4f>.



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KEY RESOURCES

- UNICEF (2019) Guidance on Menstrual Health and Hygiene. New York, USA: UNICEF.
- UNICEF (2020) Guidance on Monitoring Menstrual Health and Hygiene. New York, USA: UNICEF.
- Columbia University (2020) Webinar - Period Posse Presents: Ensuring Accessibility, Addressing the menstrual needs of people with disabilities.