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## **Addressing special needs of girls Challenges in school**



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## **1. Introduction**

Times are changing. Slowly, but certainly we are witnessing a wind of change blowing all over the world in all spheres of life. South East Asia and its women are part of this change. They refuse to remain submissive forever and remain as second class or third class citizens. They are raising their voices and asserting their rights including their rights to reproductive and preventive health. The denial of their rights and their struggle to claim these rights is at the forefront of discussions at most development fora. Yet in spite of these efforts there are still many issues regarding the practical needs and strategic interest of women and girls which are absent from these discussions. Menstrual hygiene and management is one of them.

Menstruation is a normal, natural process that occurs in all healthy adolescent and adult women who haven't reached menopause. Girls begin to menstruate normally between eight and twelve years.

In the life time of a woman, she has to manage 3,000 days of menstruation. For her basic schooling period ranging from grade IV to X the number of such days is 450.

### *An example of real life situation:*

Shahana, an eleven years old girl lived in a remote village of Sariatpur district in Bangladesh. She was a student of *grade IV*. She used rags for managing her menstrual blood. One day after school she came home, changed the soaked rag, washed and dried it under a bean tree for reuse. A harmful insect settled on the rag. Without noticing the insect's presence, she used this rag the next day. Unfortunately the insect entered her body through the vagina. She felt a serious stomach pain and was taken to hospital. After a week she died.

- Shahana's death gives rise to many questions such as:
- Who is responsible for her death?
- Whose responsibility is it to teach her about menstrual hygiene?
- What type of facility has been provided for her to manage her menstrual period properly and safely?

The knowledge and life skills required to maintain a healthy life are usually learnt from families, neighbors and school in childhood. The Dakar Recommendation recognized (WSSCC Global Wash Forum December 2004 held in Dakar) that "Primary school children of today will be the adults of 2015. Therefore, national and sectoral policies and budgets must prioritize School Sanitation Hygiene Education in terms of the need of hardware and software. If all schools are to have safe water, sanitation, and hygiene education by 2015, current best practices must scale up rapidly, applying principles of sustainability, decentralization, participation, partnership and policies." However, most of the hygiene education packages exclude menstrual hygiene. Even most of the school sanitation programs do not address menstrual management in latrine design and construction. Across the developing world, the lack of appropriate and adequate sanitation facilities prevent girls from attending school, particularly when they are menstruating. There is evidence to show that girls' attendance increases once hygiene, water-sanitation facilities are available.

Women and girls need to change their sanitary napkins three or four times a day during the period of menstruation especially in the first three days. The vast majority of women and girls in Bangladesh use rags- usually torn from old *saries*, known as '*nekra*' instead of sanitary towels/napkin. Rags are washed and used several times. There is no private place to change and clean the rags and often no safe water and soap to wash them properly. A culture of shame and embarrassment forces them to seek for well hidden places even in their homes to dry the rags. These places are often damp, dark and unhealthy.

This practice is responsible for a significant proportion of illness and infection associated with female reproductive health. Rags that are unclean, cause urinary and vaginal infection. Very often serious infections are left untreated. This is the common picture in urban slum and rural Bangladesh.

Recognizing the unfriendly environment the girl has to face during her menstrual period, development agencies in Bangladesh have been gradually addressing the situation in diverse ways.

## **2. General picture of schools in Bangladesh**

### **2.1 Primary schools**

There are approximately 78,000 primary schools in the country (almost every village has at least one primary school) and about 20 million students are enrolled. There is at the moment, no national information on the state of sanitation facilities in these schools. This may be an indication of the lack of attention on this crucial issue in the past.

With just one latrine in a school, the experience is that this sole latrine tends to be locked and reserved for the exclusive use of the teachers only. Where there are two latrines, one is locked and reserved for use by the teachers and the other is used by both boys and girls. In such cases girls, especially, during their menstrual period are often unwilling to use the latrines and make their own (often unhygienic) arrangements or simply skip school.

The average number of students in each primary school in Bangladesh is 226, it varies from below 100 to 1000 or more in some cases. In general, the number of boys & girls is the same in primary schools. Most of the schools run two shifts which implies that the average number of students per shift is 113 and the ratio of boys to girls is one to one.

At present there are no readily available figures on the state of water supply and sanitation facilities in all primary schools in the country. A recent study done by UNICEF (An Assessment of School Sanitation and Hygiene Education (SSHE) strategy with particular focus on Technology design, the needs of adolescent girls and adequate water and sanitation facilities in schools, DPHE & UNICEF, BCO, 31<sup>st</sup>July 2004) with data collected from 4,388 primary schools, showed the following key statistics:-

- Average of 246 students and 4 teacher per school

- 19% school have no water source, 28% have non-functional water source, 53% have functional water source
- 6% have no latrine, 13% have a non-functional latrine, 25% have one latrine, 44% have two latrines, 12% have three or more latrines
- 46% have separate latrines for girls
- On average there is one latrine for 152 pupils.

The guideline figure on appropriate level of service in schools comes from the latest advice presented in a joint UNICEF-WSP document ‘Toolkit on Hygiene Sanitation and Water in Schools’ (which can be accessed at [www.schoolsanitation.org](http://www.schoolsanitation.org)). A hard and fast ratio of number of latrines to number of students is not given; rather an simple algorithm for calculating the appropriate number based on certain factors such as the types of breaks in the school timetable and whether urinals as well as latrines are to be used. However it is suggested that a ratio of 20 or 30 student per toilet should be the basis calculation.

These figures illustrate the inadequacy of sanitary facilities in schools for children at school.

## 2.2 Secondary schools

There are around 17,000 secondary and junior secondary schools in the country. In most of these schools, there is a serious lack of adequate functioning water and sanitation facilities. Under such circumstances menstrual management by girls during their period becomes extremely difficult.

Although the Government is promoting higher education for girls by providing special incentives and stipends, there is enough anecdotal evidence to suggest, that these attempts will yield little results by way of regular attendance at schools, if not accompanied by improvements in the water & sanitation situation. Irregular attendance to school will negatively impact on achievement.

Menstrual hygiene is incorporated in home economics subject in grade eight but this subject is optional, therefore, all students do not get the opportunity to learn about it.

## 3. During Flood

Bangladesh is plagued with perennial floods yearly. This affects girls adversely when it comes to the management of menstruation. In the 1998 Bangladesh floods for example, adolescent girls reported rashes and urinary tract infections because they were not able to properly wash menstrual rags in private, often had no place for the rags to dry, or had adequate access to clean water. The girls reported wearing the still damp clothes.

#### **4. Findings of study**

Study (Effectiveness/Impact Assessment Study of Social Mobilisation for Awareness Building – SOCMOB-AB, UNICEF & DPHE-GOB, Dhaka November 2005) show that since there is no separate room or space to change rags in school, the girls resort to using double rags or pads during menstruation. This is very uncomfortable to them. Girls from the Environmental Sanitation, Hygiene and Water Supply project schools mentioned that “our mothers or aunts never discussed menstruation and its management with us, and when they have it they keep it hide from us”.

Adolescents learn little or nothing regarding management of menstrual hygiene from home. The schools can provides and alternative for children to learn about menstrual management.

#### **5. Historical Account on School Sanitation and Hygiene Interventions**

In recognition of the special problems faced by girls in schools, the Bangladesh Government in collaboration with UNICEF initiated a pilot project in 1992 called the School Sanitation project. Under this project, the Department of Public Health Engineering (DPHE) and the Directorate for Primary Education (DPE) and with support from UNICEF, School Sanitation Project was developed as a school based hygiene behavior change project for both children and the community.

In the piloting phase of the project, software activities were restricted to schools only where hardware were provided. From 1992 to 2000 approximately 4500 primary schools in 44 districts were reached by this pilot project in which case the number of project supported schools were very much scattered in different districts and upazilas (sub-districts)

At the beginning of school sanitation project, schools were selected at the central level for provision of hardware facilities even without consulting with schools. Accordingly, DPHE contractors constructed the water sanitation facilities in those schools without any involvement of the schools itself. Therefore, operation and maintenance and ownership suffered a lot.

In 1995 and 2000, the School Sanitation strategy went through major revisions based on the lessons learned during the pilot project. From 1996 onwards School Management Committee (SMC) was given the responsibility of construction works and outcome was very enthusiastic. As an outcome of the last school sanitation revision in 2000, School Sanitation project was renamed as School Sanitation and Hygiene Education (SSHE). It was also decided that software activities should not be restricted to only primary schools provided with hardware. In other words all the primary schools in an upazila (sub-district) and district should be brought under SSHE program.

The project also recognized the need for separate latrines for both boys and girls and hygiene education from the beginning of the project. But the special needs of girls regarding menstrual hygiene were not considered either in the facilities or in hygiene education.

UNICEF and other stakeholders have been addressing some the issues raised so far.

## **6. Present contribution by stakeholders**

### **6.1 Environmental Sanitation, Hygiene and Water Supply in Rural Areas Project (ESHWRA)**

The ESHWRA project of GOB and UNICEF supported by DFID covered 37 project upazilas in 10 districts of Bangladesh beginning from 2002 to 2005. In terms of SSHE, it is supported in about 4800 primary schools.

In designing the SSHE component of the ESHWRA project, special attention was given to addressing the special needs of girls especially in menstrual hygiene management. Menstrual hygiene is incorporated in social mobilization activities at community level too.

#### **(i) Community level intervention**

Under the project, Community Hygiene Promoters visit each house in their community and Para for conducting courtyard sessions to motivate household's members particularly women and non-school going adolescent girls and to promote good hygiene including menstrual hygiene by using Flash cards.

In the project area seventeen Sani Marts were established to bring small hygiene, sanitation and water related items to the reach of people living in remote villages on a pilot basis. Sani Marts sell items like; sanitary pad, soap, sandal, potty, plastic toilet pan, bleaching powder, and tube well spare parts etc. Customers of these Sani Marts were mainly the adult girls and women of the locality.

The presence of the Sani Marts helped to raise awareness of women and adolescent girls about sanitary and menstrual hygiene products. Adolescent girls felt comfortable to buy sanitary pad from the female shop keepers. The close proximity of these Sari Mats meant that girls had easy access to them. Adolescent girls claimed that they felt comfortable going to school when they used sanitary pads rather than rags. Unlike the normal shops, which are normally run by men, these Sani mats are run by women and offer women customers a safe environment to purchase and even discuss issues associated with menstruation.

#### **(ii) School level intervention**

Watsan options and designs were prepared for the primary schools in the early nineties. Based on experiences the designs were improved in the year 2000. The revision of water and sanitation (Watsan) facilities in 2000 was mainly aimed to make them child friendly. At the same time demand driven approach had been introduced. Schools had to apply for the facilities and were selected based on their needs at local level.

Still then these modifications did not take into consideration the special needs of adolescents during menstruation. However the provision of running water helped ease some of the problems they encountered in the management of menstrual hygiene. Based on the ESHWRA project

experiences and feedback from teachers and students, the school Watsan designs are under revision now to improve upon them and make them more convenient for both girls and boys.

SSHE Piloting in some selected Secondary Schools has menstrual hygiene as one of its important components. Incinerators have been included in the design of facilities. Watsan designs are being piloted in selected schools. The new designs include washing and drying facilities of rags and the provision of cupboards to keep rags or sanitary napkins. These facilities will enable the girls continue with their normal practice of washing, drying and keeping the rags they use without the fear of been seen by their male counterparts. As an alternative to the incinerators, the use of composting pits with cow dung slurry for disposing used sanitary napkins is being piloted.

It is important to note that the decision to undertake SSHE piloting in schools came after numerous discussions with policymakers. It is restricted to only a few secondary schools. There is still on-going discussion between DPHE/UNICEF and the Ministry of Education (MOE) on the inclusion of menstrual hygiene education in the curriculum of schools. The decision so far is to include it in the teachers' guideline for both secondary and primary schools.

DPHE and UNICEF have taken initiative of forming the SSHE Forum, which includes all major actors including GOB. Through this Forum advocacy and negotiation is going on, so that the major partners, particularly the GOB, recognize the special needs of girls and incorporate them in designing water and sanitation facilities in schools.

In 2006, the project will expand to cover 123 upazilas of 24 new districts in rural and urban areas and around 18,000 primary school and 615 secondary schools under a new name: Sanitation, Hygiene Education and Water Supply in Bangladesh Project (SHEWA-B).

## **6.2 DPHE DANIDA**

The DPHE-Danida project, The Rural Water Supply Sanitation Component covers 8 districts in the coastal belt of Bangladesh. The DPHE-Danida WSS Components developed two types of sanitary latrines (2 units and 4 units) along with hand tube wells for using the latrines. Issues on gender were considered in the design and location of school latrines. Separate latrine facilities are provided for boys and girls at opposite corners of the school's playground to give some privacy to girls. Considering the number of students, two single units or double unit twin pit latrines are constructed. Each of the latrine units has one shallow tube well for sanitary purposes.

So far, a total of 658 school latrines have been constructed under the Rural Water Supply Sanitation Component project serving about 200,000 students.

The software component of the project which promotes hygiene behavior does not address issues on menstrual hygiene management. Separate latrine facilities; however have been allocated to girls that provide them with privacy to manage themselves during their menstruation. This is not adequate since the facilities are not equipped with washing and drying facilities for the special needs of menstrual management.

### **6.3 WaterAid Bangladesh (WAB)**

From 1997 to 2002, the WaterAid supported rural NGOs in Bangladesh, operating with financial and technical support from WaterAid Bangladesh introduced the community led total sanitation approach. So far 200 villages have been declared free from open defecation. At this stage WaterAid Bangladesh supported program mainly concentrated sanitation only at house hold level. Given the success of the new approach WaterAid has taken on different strategies to scale up its program. Development of a larger program Advancing Sustainable Environmental Health (ASEH) with the financial support of DFID to expand its rural and urban programs is one the main outcome. Under ASEH, WaterAid has been supporting 17 local NGOs to work in 5000 villages and 500 slums.

In the design phase of ASEH, WAB & partners initiated several discussion sessions & workshops on conceptual aspects and operational challenges including gender issues. Questions about the limitations and boundaries of partners' approaches, particularly with reference to strategic gender interests and women & girls specific needs in the context of Bangladesh, have been expressed.

WaterAid & partners redefined the definition of 100% sanitation, which includes all schools and public places of partners working area for total coverage. WaterAid & partners developed a separate strategy for school sanitation program following a participatory process. Consultation with teachers & students indicate that even where there are toilets in schools, the absence of a hygiene promotion component, engagement both students and teachers and with special focus on girls' practical needs does not bring the desired outcomes. The main activities include:

- Motivational work with School Management Committee
- Capacity building of teachers for regular facilitation hygiene education sessions
- Formation of student brigade & capacity building support
- Development & provide visual aids for hygiene education including menstrual hygiene
- Improvement of existing water & sanitation facilities to address the girls' specific needs including menstrual management
- Installation of child & girls friendly water & sanitation facilities (where it is needed).

## **7. Lessons learned**

Apart from some of the lessons which have been mentioned already in this report, there are other things emanating from the experience which are worth mentioning. These include;

- Group meetings and discussions with adolescent girls on menstrual hygiene have enhanced their self esteem. Adolescent girls are becoming more vocal and assertive. They easily talk about menstrual hygiene once they overcome their initial shyness. Anecdotal evidence shows that this has had a lot of positive impact on the lives of girls and women in the project areas.
- Where women are running shops selling sanitary pads, adolescent girls find it easy to buy from them.



- Introduction of menstrual hygiene in primary school has not been easy. There is resistance from policy makers as it is regarded that talking about it is against norms and values.
- Reducing the ratio of students to toilets helps ease the pressure on students.
- Since government is the key player when it comes to facilities, getting them to accept the whole concept of SSHE can play a significant role in ensuring that the special needs of adolescent girls become an integral part of any design.
- During emergencies like floods, menstrual hygiene is not considered to be a priority.

## **8. Conclusion**

For most people, fulfilling children's right to education ends in the provision of school buildings, teachers and learning materials that equip the child to read and write. The fact that a conducive learning environment goes beyond the mere provision of these, is often overlooked. We therefore have a lot of schools with deplorable sanitary conditions and most times with absolute no considerations for the special needs of girls.

The experience from the different projects, limited though it is, in terms of its geographical coverage shows that provision of adequate and proper school sanitation facilities does make a difference. Going to scale depends on a lot of factors, prominent amongst them being the attitude of our policy makers. These are attitudes rooted in a culture of silence, taboos and religion, which define issues on sanitation as "no-go areas for discussion".

As long as these attitudes persist, then our children will have to wait even longer to realize their rights to safe water, basic sanitation and a healthy school environment. The time to act is now for we know that the child cannot wait.

Going to school, learning new things, being in a clean school environment and being healthy is every child's right. In reality the sanitary situation in many schools in developing countries is deplorable, especially for girls, who don't attend school because appropriate and private sanitation facilities are lacking. The experience is limited with in three/four projects; a few drops of water in an ocean. How long will it take to incorporate physical facilities and hygiene education in school program?

With regards to action at the community level to address the special needs of adolescents, UNICEF studies show that the approach adopted in the DPHE-UNICEF-DFID project has been found to be positive among adolescent girls and young mothers. We hope to continue with that approach in the next phase of the programme.

All women and girls have the right to privacy, health and dignity. A culture of silence and taboo surrounds most of the problems caused by poor sanitation: the lack of menstrual hygiene education, availability of low cost materials and infrastructure both at schools and community. Wider aspects of the issue- such as privacy, water availability and awareness rising amongst boys and men remain largely unexplored by development initiatives.

## **Issues for consideration**

It is quite remarkable that we do now have opportunities such as this forum to discuss issues such as the special needs of girls in schools. Something we could not even have dreamt of a few years ago. But before we start patting our backs we have to realize that the picture we have just painted is a grim reminder of the magnitude of what needs to be done.

The bulk of that effort resides squarely with our governments with of course support from the development partners. We call upon them in ensuring that a uniform standard of school construction with the minimum level of sanitary facilities taking due cognizance of the needs of girls is applied to all school construction. The least they can do is to incorporate menstrual management infrastructure in technical designs.

Hygiene promotion must be included in all levels of the educational curriculum. Specifically it should be in that of Teacher training institutions and should be in the syllabi of both primary and secondary schools.

In order for these things to happen, governments must take a second look at the place of water and sanitation in their educational policy of creating a sound learning environment in schools. It is worth while to note that in Bangladesh, the Primary Education Development Program (PEDP II) which aims at creating a joyful learning environment puts very little emphasis on hardware and sanitation issues for students. A conducive policy environment will ensure the much needed funds which are required to meet the challenges of addressing the special needs of girls in schools.