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Morale: Le bon entretien des outils de travail

Présumé: Le corps du chien est couvert de poils: il comprend la tête, le tronc, le cou, les pattes, le ventre, le dos, les oreilles et la queue.

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Menstrual Health and Hygiene: Transforming Lives and Communities

Overview

Menstruation is a natural fact of life and a monthly occurrence for the 1.8 billion girls, women, and other people of reproductive age around the world. Yet, millions of menstruators are denied the right to manage their monthly menstrual cycle in a dignified, healthy way and can face stigma, harassment, and social exclusion. These challenges are particularly acute for girls and women in humanitarian crises.

A [new report](#) from UNICEF and the World Health Organization analyses for the first time emerging national data on menstrual health and hygiene in schools globally. It found that only two-out-of-five schools provide menstrual health education and less than one-in-three schools globally have bins for menstrual waste in girls' toilets. Access to menstrual products and a clean toilet or private space also remains a problem for millions of girls.

These challenges not only affect the health, well-being and safety of girls, women, and other people, it also impacts their ability to go to school; participate in the workforce and community and support their families. In other words, a lack of good menstrual health not only restricts individuals' freedom, mobility, and choices, it undermines societies' economic growth.

Managing menstruation is directly linked to girls' and women's human rights and gender equality. Human rights treaties with obligations relevant to the provision of menstrual health and hygiene include the Convention on the Rights of the Child; Convention on the Elimination of All Forms of Discrimination against Women; and the Convention on the Rights of Persons with Disabilities. The research is unequivocal: when girls are valued by society, they realize their full potential, their families grow stronger, communities thrive, and economies prosper.¹

The case for investment in menstrual health and hygiene

According to research commissioned by the United Nations' Sanitation and Hygiene Fund, published in December 2023, investing in menstrual health and hygiene (MHH) can deliver the following health, education, and economic outcomes:

- **Reduced healthcare costs** – including by reducing reproductive tract infections and through early diagnosis and treatment of menstrual pain and disorders.
- **Reduced disease prevalence** – including the incidence of chlamydia, gonorrhoea and other diseases, and the early detection of other diseases or health concerns.
- **Improved psychosocial well-being** – including through reducing shame and embarrassment and improving a sense of autonomy and control over the management of an individual's body.
- **Reduced drop-out rates and reduced absenteeism from school** – along with increased concentration and participation. MHH-focused interventions can improve girls' confidence, concentration, and participation in school and academic performance.
- **Positive effects on health and education** – when girls can attend school regularly, they are more likely to enter the workforce and ultimately contribute to economic growth.
- **Improved earnings** – initiatives with factory staff in Egypt and Pakistan showed subsidised access to menstrual products led to increases in monthly salary, overtime payment and savings, partly due to greater punctuality and decreased absenteeism and attrition.
- **Economic gains for wider society** – lower psychosocial stress as a result of improved MHH can lead to higher workforce participation and performance.

As these findings show, there are clear links between menstrual health and hygiene and achieving the Sustainable Development Goals.

¹ [Five game-changing solutions with and for adolescent girls | UNICEF](#)

What is holding us back?

Communities around the world can face similar challenges in addressing menstrual health and hygiene. These include:

Lack of access to menstrual products – can cause health risks and limit girls' and women's mobility, reducing their participation at school or in the workforce.

Lack of knowledge – without comprehensive sexuality education, many adolescent girls and young women have a limited understanding of menstruation, among other issues. This can affect their self-determination and agency.

Lack of adequate infrastructure – this can prevent women and girls from washing and changing regularly, which can increase the risk of infection and other complications, and lead to feelings of shame, discomfort, and anxiety.

Shame and stigma – myths, misconceptions and harmful traditions related to menstruation, particularly among men and boys, can lead to stigma, shame and difficulties accessing support and menstrual products for girls and women, as well as limiting their participation in education, work, and social life, or increasing the risk of violence.

Lack of adequate solutions for pain or other recurring symptoms – untreated or overlooked irregularities and comorbidities associated with the menstrual cycle can affect fertility. Women and girls are also unlikely to receive effective advice on how to handle symptoms and treat underlying conditions.

What is needed?

National governments must take action to adequately meet the needs of those who menstruate; particularly by improving access to WASH facilities. Yet, more than one-third of countries have no WASH policy or plan with measures for menstrual health and hygiene and only one-in-five countries have reported having national targets related to menstrual hygiene management.

While tax reforms have been introduced in some contexts, the full impact of those measures is yet to be seen. There is some evidence that, even after the removal of goods and services taxes, access to affordable menstrual products can still be a challenge for those living in rural areas.

Most countries lack a harmonised approach to mainstreaming menstrual health and hygiene across ministries and departments and significant budget needs persist.

Because everyone has the right to manage their menstruation safely and in dignity, we call for:

- Increased government investment to scale-up evidence-led programmes in menstrual health and hygiene
- Greater investment in monitoring, evaluation, and research to better track awareness of and access to menstrual health and the impact of investment
- Menstrual health and hygiene programmes to be aligned with national strategies and plans in WASH, education, gender, women, youth, health, and other relevant sectors.
- A wide range of stakeholders to be involved in plans and actions on menstrual health and hygiene (community members, civil society, advocates, media, students, school staff, local and regional authorities)
- Innovations and new partnerships to help scale improvements in menstrual health and hygiene.
- Particular efforts to reach and co-design inclusive programmes with girls with disabilities, girls from minority groups, transgender, or non-binary menstruators.

How UNICEF is working to improve menstrual health and hygiene

UNICEF is a global leader in menstrual health and hygiene, in both humanitarian and development contexts. We work in four key areas for improved menstrual health and hygiene:

1. Social support
2. Knowledge and skills
3. Facilities and services
4. Access to absorbent materials and supportive supplies

In 2023, we expanded our work to reach 7.9 million women and girls with direct MHH support in 80 countries, two-thirds of which were in developing contexts. We also worked on system strengthening in multiple countries, including through the development of MHH guidelines, standards and curricula, integration of indicators in national monitoring systems, and through tax reforms to combat period poverty.

UNICEF has contributed to, or led, innovative menstrual health and hygiene initiatives around the world, including:

- In **Bolivia**, a transformative menstrual health and hygiene programme in schools, with a particular focus on the inclusion of men, boys, and the wider

community, showed that open conversations and involving men and boys in MHH programmes can help to break taboos, foster empathy and understanding, and shift the responsibility for MHH from women and girls alone, to the entire community.

- In **Brazil**, UNICEF supported an extensive six-month training programme for 370 community health agents and community endemic disease agents, addressing the specific vulnerabilities and needs of migrants and refugees.
- In **Burkina Faso**, menstrual hygiene awareness training which was supported by UNICEF benefited more than 120,900 adolescent girls.
- In **India**, UNICEF helped to strengthen the service value chain to address some of the menstrual hygiene challenges faced by tribal girls and women.
- In **Iraq**, cross-ministerial dialogue on menstrual health and hygiene management supported by UNICEF laid the groundwork for a National Menstrual Health and Hygiene Plan.
- In **Mexico**, UNICEF's evidence-based advocacy on menstrual health contributed to the adoption of the Dignified Menstruation Law.
- In **Mongolia**, in partnership with the Ministry of Education and Science and the General Authority for Education, UNICEF supported the development and approval of the national guideline on schools' dormitories that include menstrual health and hygiene requirements for girls.