

Menstrual Hygiene Practice during Water Scarcity in South Andaman District

R. EVANGELIN SANTHARANI¹ AND K. VENKATESAN^{2*}

¹Research Associate, MGNCRE Research Project,
Department of Home Science, Jawaharlal Nehru Rajkeeya Mahavidyalaya (JNRM)
Port Blair, Andaman and Nicobar Islands, India

²Assistant Professor and Head & Principal Investigator, MGNCRE Project,
Department of Home Science, Jawaharlal Nehru Rajkeeya Mahavidyalaya (JNRM)
Port Blair, Andaman and Nicobar Islands, India

ABSTRACT

Menstruation is a natural occurrence that every woman go through every month. The term menstruation is always surrounded by cultural beliefs, myths, and stigma. If there is no proper practice of menstrual hygiene that would indirectly affect the Sustainable Development Goals (SDG) set by the United Nations (UN). The major issues related to menstrual hygiene management during water scarcity that results in the using a minimal number of sanitary napkins due to unavailability of water. Contrarily, due to Poor menstrual hygiene, however, can pose serious health risks, like reproductive and urinary tract infections which can result in future infertility and birth complications. Neglecting to wash hands after changing menstrual products can spread infections, such as hepatitis B and thrush. In this study, a survey has been conducted to understand the menstrual practices followed by the individuals during water scarcity .The survey was conducted in interview (case study) method, we have submitted 3 case study. The usage of water for sanitary purpose by individuals is very limited and the proper disposal mechanisms have not been in practice. Further studies implies that from schools many more awareness programme and initiation should be taken for healthy menstrual hygiene .As a result the study concluded by stating, to avoid the poor menstrual hygiene , UTI (urinary tract infection) and high risk the government should take steps for the clean water supply in all the region equally.

Key Words : Menstruation, Awareness, Hygiene, Water scarcity, Practice

INTRODUCTION

The Andaman and Nicobar (A&N) Islands are even more lucky as they receive an average annual rainfall of about 3080 mm. About 95 percent of annual rainfall is received during May-December of which nearly 75 percent is lost as runoff to the sea due to undulated terrains and steep slopes. The Islands have a width of 15 to 40 km east to west and the slopes are from centre to either towards east or west due to which the length of drainage line to the sea is short. Because of this, there is only one perennial river Kalpong in North Andaman Island. Thus the actual water availability is much less and Islands faces

severe problem of water scarcity even for drinking. As safe water is vital to sanitation. In the year 2023 some parts of Andaman Nicobar islands hits a huge water scarcity during summer which results in dread impact on people's daily life and especially the women faced strong hurdles during their menstrual time because of water scarcity. 90% of the population depends on the municipal water. In many areas the underground water was fully drained and even the boar water was not able to fetch. In this situation the people were panicked and they didn't get pure water from the municipal tap even after so many days of no water. People who can afford to buy water from the truck was not pure. This craved the way for

How to cite this Article: Santharani, R. Evangelin and Venkatesan, K. (2023). Menstrual Hygiene Practice during Water Scarcity in South Andaman Districts. *Internat. J. Appl. Home Sci.*, **10** (5 & 6) : 189-193.

the unhygienic practice on every day bases and many infections were spreading in these days. Then the government have taken steps to ensure the water supply to all the people and so they borrowed water from the near by island where there is less populated.

The importance of access to water for menstruating women can't be emphasized enough. Access to clean hand washing facilities and toilets allows women to keep themselves clean during menstruation. The fact that India is standing at the brink of impending water scarcity is known to all. Several reports over the years have articulated the poor state of the country's water resources. Good menstrual hygiene management (MHM) plays a fundamental role in enabling women, girls, and other menstruators to reach their full potential. The negative impacts of a lack of good menstrual health and hygiene cut across sectors, so the World Bank takes a multi-sectoral, holistic approach in working to improve menstrual hygiene in its operations across the world.

Menstrual Health and Hygiene (MHH) is essential to the well-being and empowerment of women and adolescent girls. On any given day, more than 300 million women worldwide are menstruating. In total, an estimated 500 million lack access to menstrual products and adequate facilities for menstrual hygiene management (MHM). To effectively manage their menstruation, girls and women require access to water, sanitation and hygiene (WASH) facilities, affordable and appropriate menstrual hygiene materials, information on good practices, and a supportive environment where they can manage menstruation without embarrassment or stigma.

According to the WHO/UNICEF Joint Monitoring Programme 2012, menstrual hygiene management is defined as:

“Women and adolescent girls are using a clean menstrual management material to absorb or collect menstrual blood, that can be changed in privacy as often as necessary, using soap and water for washing the body as required, and having access to safe and convenient facilities to dispose of used menstrual management materials. They understand the basic facts linked to the menstrual cycle and how to manage it with dignity and without discomfort or fear.”

A Water Scarcity Collide with Menstrual Hygiene Practice:

At a time when a woman should be taking proper

care of herself, maintaining hygiene and sanitation, making long, arduous journeys in search of clean water acts risk to their health. The physical burden of carrying water comes with its own sets of problems. It can lead to increased health risks, such as uterine prolapsed, musculoskeletal issues, and stress. He lack of clean water is also acting as an impediment to women's education. Since water collection is a woman's job, it is expected that they have to leave everything in search of it. The impact lack of clean water has on women's education is startling.

A report revealed that 23% of Indian women drop out of school due to lack of clean water and sanitation facilities. Access to clean water is also crucial for women's safety. Due to the lack of water in their homes, women either walk long distances or go out to relieve themselves during the night. As a result, water collection points or the journey traversed in the search for water, act as hotspots for harassment, violence and sometimes even rape of these women.

There is a saying said by Ajita a social activist here:

“Lack of access to clean water has a cyclical impact on menstruating women. A simple example could be this. Women in rural areas usually use a cloth during menstruation. They use this cloth multiple times, resorting to washing and drying it again and again. Now, if a woman doesn't get access to clean water, she washes the cloth with contaminated water or worse, doesn't wash it at all. What anyway wasn't the ideal product to use during menstruation just got more dangerous as it carries a higher risk of infection now”

Therefore, it is alarming to see that even being in developing country where communities don't have access to water, women are facing the worst possible situations. It is imperative to understand that access to clean water is a fundamental right, and adequate steps are needed to ensure that women get their due when it comes to clean and safe water in the country.

Objectives:

1. To study the difficulty situation of water scarcity for women during menstruation
2. To bring out the risk factor on improper menstrual hygiene practice during water scarcity.
3. To identify how many women are really affected by other personal issues during water scarcity.

METHODOLOGY

The present study conducted in the South Andaman districts which is the third largest island groups of Andaman it is separated only by a narrow channel a few hundred meters wide. The island is 83 kilometers (52 miles) long and 28 kilometers (17 miles) at its widest part. South Andaman is less mountainous than the more northerly of the Andaman Islands. Geographical area covered by 1,262 KM² with a total population of 20,9602. Studies at CARI has shown that if only 3% of the water which flows out is stored in surface and underground storage, the requirement of domestic and agriculture can be met. To achieve the goals of providing sufficient water for domestic purpose and irrigation to cultivated area, a policy is required to develop and manage water resources on a sustainable basis without endangering the fragile Island ecosystem. This document is a step in this direction and is based on open discussion with stakeholders during brainstorming session held at CARI Port Blair on 7th and 8th July, 2009.

In this study case study method was used and the data's were collected through observation. The case study was focused in the southern part of Andaman Port Blair especially in this region where the water scarcity hits maximum which is said to be the capital city of Andaman. Water scarcity hit this region very hard especially the womens suffered chronically for their daily hygienic practices. The client involved in the case study were a multi labored women, which is each from different sectors and house wives.

Study 1:

Mrs. Sunitha, age 34 There are 5 members in the family consist of husband two kids in the age of 3 years and 8 years old and her mother in law who was 55 years old all together residing at Garacharma, Port Blair, South Andaman district. Mrs. Sunitha is a house wife living in a small rental house where there are 6 houses nearby. They were facing many difficulties without proper water supply and the house owner also have not taken proper steps to provide them the water to all the rental families. she personally suffered from urinary infections due to lack of water to drink and also for toileting purpose. Since there are 5 in the family they were not able to meet their daily need so her husband use to buy water from the truck once in every 5 Days for rupees 1500 for 1000 liters. The water they buy through the truck was also not hygienic as it was contaminated with mud and some

worms. After few week she had a high fever and visited the doctors and the investigate as UTI (urinary tract infection). She also suffered in her menstrual time without proper water supply. Through her conversation and through observation her neighbor women's also suffering from the same problem.

Conclusion:

The women said that, this was the first time in her experience in facing very bad water scarcity situation. Through this worse experience as a family they learnt how to utilize minimum water for households and toileting.

Study 2:

Mrs. Laxmi age 42, living with her family of 4 members residing at Haddo. She was a working in a shop as a shop keeper and her husband also working as bus driver. She has 2 female twin children and they are studying 11 standard. Since both are working parents they have no time to fetch water and store when they have the water supply in certain unfixed timings. She said there are 3 female in her home and three of them had their menstruation one after the other. Without proper water supply they couldn't manage especially during their menstruation and that was the worse situation in their life time. They received water once in 15 days which means only 2 time of water supply in a month that was not sufficient for them to do all the households and personal care. Due to their low income they were not afford to buy water from water truck. After some days she sent both of the daughters to her brother's house which is located at Hut bay as they have sufficient water supply. She said then they able to manage the situation but that was a temporary solution.

Conclusion:

She conveyed that due to low income they couldn't buy water and they managed without bathing for few days but during periods times the suffered so much without water. She said all her hope was in the nature but that also denied to give rain. She was thankful that at least she has some water to drink daily.

Study 3:

Rani age 39 living with her husband at Lambaline Port Blair. She work as a house maid in of the house in the CPWD quarters, Port Blair. She has no kids due to her PCOD issues. She gets her menstruation once in 3

months with 15 to 20 days of menses. She said that was a challenging situation in her life time because she uses pad in the first few days and she shifts to cotton cloths as pad so that she feels comfortable. During this water scarcity she didn't get enough water supplies so she struggled even for drinking purpose. There after some days she seeks help for drinking purpose from her owner house where she worked they let her to take 4 liters of water every day. She also said few years back same situation happened but this year it's worse than ever. Due to water scarcity she was not able do proper menstrual hygienic practice and she also had itching along with cyst in her private part due to unhygienic practice. She also visit doctor for her problem they also advice to take some antibiotics and use clean water in the private area.

Conclusion:

The situation is helpless because all over Port Blair people are facing water scarcity due to global warming. Especially women like her in low income situation they couldn't afford to buy water for daily routine and they managed to utilize with minimum quantity with unhygienic water.

Conclusion:

As rainwater is the only source of the fresh water availability in these Islands, its harvesting, storage and recycling is the most important strategy for water resource management. Though the government has taken measures to save water that is not enough because every individual should take initiative to save a drop of water. The insufficiency of natural resource and sanitary materials impact the menstrual hygiene management negatively of their physical health as well as mental health. Menstruation does not wait in epidemic and the result is the crisis of period destitution and poor menstrual hygiene, health and menstrual hygiene management ingeminate the need to improve the condition of hygienic management. A basic part of our human right is a right to health which is inclusive. The right include the basis infrastructure for women, availability of water and awareness on hygiene. Hence, Water is a main natural resource to maintain the healthy and hygienic life style. The issue of water crisis is not just limited to Port Blair, but many other islands are also facing severe water crisis during this time.

Islanders urge the administration to take immediate action and constitute a Jal Board department dedicated to water supply, construct massive ponds in all remote

pockets of Andaman and Nicobar island, and find alternative water sources to prevent dependency on only one water source. It is time to end the persistent water crisis in Andaman Nicobar Island and provide the Islanders with a sustainable solution for their water needs. Therefore, Water is a basic necessity, and the administration must realize that without water, people cannot survive or lead a normal life. Supplying water should be the top priority for the administration, and they must take immediate steps to address this problem.

Acknowledgement:

The researchers thank MGNCRE, Hyderabad for providing financial assistance to carry out this research work under the project of "Role of Gram Panchayat in Water Sanitation Hygiene and Waste Management through Swachh Bharat Abhiyan and Jal Sakti Abhiyan in South Andaman Districts".

REFERENCES

- Allen, E., Marian Morazan, I. and Witt, E. (2018). Actively Engaging Women is Helping Solve The Global Water Crisis (1/12/2018) vol.8 Issue 4.
- Central Ground Water Board (2002). Abridged recommendation of all water supply augmentation structures applying artificial recharge technique in A&N islands
- Das, Padma, Baker, Kelly K., Dutta, Ambarish, Swain, Tapoja, Sahoo, Sunita, Das, Bhabani Sankar, Panda, Bijay, Nayak, Arati, Bara, Mary, Bilung, Bibiana, Mishra, Pravas Ranjan, Panigrahi, Pinaki, Sandy Cairncross, Belen Torondel (2015). Menstrual Hygiene Practices, WASH Access and the Risk of Urogenital Infection in Women from Odisha, India doi:10.1371/journal.pone.0130777.
- Deepa, S., Saranya, L. Lt. Sridhar and Saravana Kumar, S. (2018). A survey on mensteual health and hygienic sanitation. *Internat. J. Pure & Appl. Mathematics*, **118** No. 202018, 365-369 ISSN:1314-3395,
- Editorial: Water Crisis: Time to take concrete steps to solve this issue for good April 23, 2023 By: Sanjib <http://www.andamansheekha.com/114488/>
- Ellis, Anna *et al.* (2016). WASH challenges to girls' menstrual hygiene management in Metro Manila, Masbate, and South Central Mindanao, Philippines. *Waterlines* (2016): 306-323.
- Mahon, T. and Fernandes, M. (2010). Menstrual hygiene in South Asia: a neglected issue for WASH (water, sanitation and hygiene) programmes. *Gender &*

Development, **18**(1): 99-113.

Srivastava, R.C. and Ambast, S.K. (2009). Water Policy for Andaman & Nicobar Islands: A Scientific Perspective. Director Central Agricultural Research Institute (CARI) Port Blair – 744101 (A&N Islands): CARI, Port Blair

The importance of menstrual health education By: Gabrielle

Rocha Rios (28/5/2019) www.girlsglobe.com

Van Eijk, Anna Maria, M. Sivakami, Mamita Bora Thakkar, Ashley Bauman, Kayla F. Laserson, Susanne Coates and Penelope A. Phillips-Howard (2016). Menstrual hygiene management among adolescent girls in India: a systematic review and meta-analysis. *BMJ Open*, **6** (3) : e010290.
