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## **Initiatives for Menstrual Health in India: lessons from three case studies**

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### **Abstract**

Menstruation is part of 1.8 billion people around the world. Menstrual health has to concern every person. Given the lack of facilities and basic resources, many develop severe harm in the body. A person who menstruates is limited with mobility, empowerment, and with no access to rights like education, health, and several factors as such impinge on the basic right to life.

Acknowledging the reality of people who menstruate face every month and recognizing the importance to know and understand menstruation and its causes is important. Sharing concerns and fears, and what can be the consequences if there is no access to adequate management and hygiene? What be done about it? and what kind of alternatives are available to manage menstruation? are just a few points to ponder.

During the last twenty years, India has been active in the area of menstrual health. New practices around menstrual facilities have emerged to construct a different reality for menstruators and challenge the system, creating accessible alternatives for people who menstruate.

Today, menstrual products are available in the market but not all of them

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are affordable and accessible to many. This disadvantage paves the way for some initiatives that have been taken by some organizations across the country with alternative solutions, according to the context and reality of each community: cloth pads, menstrual cups, and disposable pads that are biodegradable and stitching one's cloth pad are in use. All of them are concerned and directed towards people who menstruate and the environment.

This paper explores three different initiatives focused on menstrual health and their contribution to women's health from a feminist and ethnographic perspective. The research was conducted with three organizations: Gramalaya located in Tiruchirappalli (Trichy), Tamil Nadu, Sakhi, located in Vadodara, Gujarat and Jatan Sansthan and UGER in Udaipur, Rajasthan.

**Key Words:** *Menstrual health, menstrual products, women's health*

### **Initiatives on Menstrual Health**

Menstruation is not only a women's issue, it is a public health issue. Nowadays, there is extensive research and interest in menstrual health. How many activists, politicians, educators, and organizations, which are advocating are changing this reality?. India presents a different reality in every state and a multi-cultural context, which makes it a complex condition to work on, but not impossible.

In India there are voluntary organizations that play an important role in society. Some organizations in India ardently work for most of the underprivileged people. They are breaking barriers of class, caste, gender, affordability, religion, access to toilets and water, education, creating initiatives that represent better living conditions. They are inclusive of all communities including men, women, girls, and menstruators on menstrual health and break the silence.

The process of menstruation represents for many menstruators a traumatic experience or an experience that will change their life completely due to the taboos and shame associated with it, having no access to information, and learning by themselves makes it daunting.

Working for women's rights in India is not an easy challenge owing to its diversity. Despite the fact, there are a many programs and policies to address menstrual health. In an effort to work with menstrual health there is a need to question the policies, the approach, and the effectiveness of these programs. It is inclusive of all parts or only institutions: like health workers, education system and expectations according to international models? What about the context and concerns of women in the diverse communities? This paper looks at three case studies from Gujrat, Rajasthan and Tamil Nadu to answer some fundamental questions on menstrual health.

### **Tamil Nadu**

Accordingly with the NFSSM study in India there is a big disparity across the states about menstrual health reality including awareness<sup>1</sup> and access<sup>2</sup> to affordable products, supportive infrastructure, usage<sup>3</sup>, and disposal<sup>4</sup>. (NFSSM, 2019) Factors that are essential to managing menstrual health, and to be aware of the effects in the environment. Building a social change involves families, institutions, government, community leaders, society, and organizations.

In terms of Menstrual Hygiene Management (MHM) adoption in different states according to the study of NFSSM Alliance in 2019 states like Bihar, Madhya Pradesh, and Assam have performed very poorly with average sanitary napkin use being 31%, 37.6%, and 44.8% respectively, which others like Mizoram (93%), Tamil Nadu (91%), Kerala (90%), Goa (89%) and Sikkim (85%) have performed well (NFSSM, 2019, p. 4).

Tamil Nadu, located in the southeast of India, with 72,147,030 million people living in the state, where 36,137,975 are men and 36,009,055 are women, with

- 1 Awareness: Many communities in India due the cultural restrictions, social norms and taboo around menstruation, arising misconceptions and improper understanding, originate menstruators be stigmatized or excluded from the social sphere. (NFSSM, 2019, P.5)
- 2 Access: lack of affordable menstrual hygiene products prompts adoption of unsafe alternatives thereby impeding the participation in social and economic activities. (NFSSM, 2019, P.5)
- 3 Usage: Lack of appropriate sanitation in homes and public spaces does not allow for privacy to change materials. And many user are not familiar with safe usage practices. (NFSSM, 2019, P.5 )
- 4 Disposal: Lack of improper disposal facilities leads to loss of dignity and unhygienic surroundings.(NFSSM, 2019)

32 districts (Census 2011, 2021).

Tamil Nadu is one of the pioneers in menstrual health management and is known for being one of the first states in India to introduce measures to overcome the lack of awareness about and access to hygienic menstrual practices. (NFSSM, 2019).

The NFHS-4<sup>1</sup> 2015-2016 in Tamil Nadu, data noted that 91% of women between 15 and 24 years old use a hygienic method of menstrual protection has been 65% use sanitary napkins, 32% use locally prepare napkins, 16% use cloth, and 1 % use tampon. (NFHS-4, 2019)

Menstrual health in Tamil Nadu has been approached for women since 1992 with the initiative and work from Ms. Kannaghi Chandrashekar in Pudokottai through working with self-help group (SHGs)<sup>2</sup>, and in 2002 Ms. Santha Sheela Nair, started an intervention due to the lack of resources that some women were having at home, working in the same line as Ms. Kannaghi where women from SHGs, were made to produce their sanitary pads and encouraged to distributed in the communities creating economic incentives to produce their pads in this way Tamil Nadu start with the initiative in local production. In 2004 Tamil Nadu was the first state to recognize MHM as an issue to be addressed through sanitation policies and programs (NFSSM, 2019)

Some of the organizations that started working with menstrual health in Tamil Nadu a decade after like Eco-Femme, Ghandigram, and Gramalaya started spreading awareness about menstrual health by working with the communities, schools, institutions, families, and women.

### **Gramalaya**

Gramalaya, an NGO founded in 1987, is located in Tiruchirapalli, Tamil Nadu, working with more than 300 villages in sixth southern states Tamil Nadu,

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1 NFHS: The National Family Health Survey in India. Available at: <http://rchiips.org/nfhs/NFHS-4Report.shtml> , consulted on 08.03.2021.

2 Self-help groups: Initiative from South India that consist in a group of women from 8 to 15 women , which main purpose is to save money collectively but at the same time promote awareness about domestic violence, alcoholism, jobs and initiatives to generate small business.

Kerala, Andhra Pradesh, Telangana, Karnataka, and Pondicherry, dedicated to promoting water, sanitation and hygiene and overall improvement of the rural, urban, coastal and tribal population in India whereby the empowerment of marginalized communities especially the women and children is ensured (Gramalaya.org, 2021).

### Why talk about Gramalaya?

Gramalaya has been working in the sector of water and sanitation for more than 30 years this has equipped them and allow them to identify the needs of every community, working with water and sanitation takes to cover also an important area like menstrual health, also, to understand the perception, beliefs and knowledge



that every community has about menstruation. Working not only in a technical approach also taking with the communities about practices and knowledge to work for better conditions for menstruators.

Having the opportunity to experience the conditions that thousands of women and young girls live every day, during menstruation using what is available like rice husk, ash, old clothes, at schools and household. Gramalaya started working in 2005 with menstrual hygiene and health implementing a program based on 5 pillars of sanitation (water, sanitation, hygiene, menstrual health and nutrition), working with schools and communities to spread awareness and guarantee better conditions to manage menstrual health but also to understand the process of menstruation.

This initiative has contributed to improving women's health through:

Training capacity and capacity building, The building or renewing infrastructure, Creating awareness and peer leaders, Improving women's health conditions, Women empowerment, Strengthening communities. Establishing

production units for manufacturing and distribution will be described in the below table along with the other two initiatives.

## **Gujarat**

Gujarat, located in the Northwest of the country with a population of 64,439,692 of which 28,948,432 represent women and 31,491,260 represent men in 26 districts. (CENSUS,2011)

Is one of the states that recently have implemented initiatives on menstrual health, one of them has been this March 9<sup>th</sup>, 2021 where the High court of Gujarat proposed to prohibit the social exclusion of women based on their menstrual status in private and public spaces, including religious and educational places<sup>1</sup>. (Indianexpress, 2021)

The NFHS-4<sup>2</sup> 2015-2016 from Gujarat noted that 60% of women between age 15-24 uses a hygienic method of menstrual protection being 48% using cloth, 34% use disposable pads, 29% use locally prepared pads, and 5% use tampons. Only 54% of rural women use a hygienic method of menstrual protection compared with 70% of urban women. (NFHS, 2017)

One of the organizations that have been working on menstrual health and creating a different reality to women and the opportunity to attend school is Vaisala Foundation through Sakhi Project.

## **Sakhi Initiative**

Sakhi Project is an initiative that has been working on menstrual health for the last 12 years, transforming lives and granting girls the right of going to school, as Mrs. Swati B. shared in an interview, impacted the conditions in rural areas in Gujarat in management on menstrual health due to the lack of resources and misconceptions in the communities, women, and girls were facing terrible conditions like isolation in huts outside of the villages exposed to any kind of

1 The content of the proposal can be consulted on : <https://indianexpress.com/article/cities/ahmedabad/gujarat-hc-bench-proposes-norms-to-end-menstruation-taboo-7220258/> , consulted on 10, march, 2021.

2 NFHS: The National Family Health Survey in India. Consulted on: <http://rchiips.org/nfhs/NFHS-4Report.shtml> , 08.03.2021.

violence or danger, cancer or severe infections, motivated her to generate an alternative and affordable product for people who menstruate changing their lives and creating the possibility to have a different conception about menstruation including men and communities.

Sakhi project is part of Vatsalya Foundation, an NGO located in Vadodara, Gujarat since 2000, having nowadays active school programs and 160 units in five states Gujarat, Kerala, Manipur, and Tamil Nadu, dedicated to helping women and girls maintain their menstrual hygiene and also provide a source of income to these women. This initiative has been taken to other countries like Cameroon, Zimbabwe, Bhutan, and some regions like the Zatari refugee camp in Jordan.



### Why talk about Sakhi?

This initiative promotes the importance of collective work and sisterhood through Sakhi Units created by women for women that provides the access to local pads at low cost, organic, and with a good quality offering the alternative way to dispose of with an eco-friendly incinerator that they have designed and has been installed in more than 5000 schools for people who menstruate in rural areas and contributing for the wellbeing of the communities.

Sakhi has contributed to women's health in different aspects the key aspects are described below.

### Udaipur, Rajasthan

Rajasthan is located in the Northern part of India, with 68, 548, 437 million people, while men are 35,550, 997 and women 32,997, 440. (Census2011, 2021).

The NFHS-4<sup>1</sup> 2015-2016 from Rajasthan noted that 55% of women between age 15-24 uses a hygienic method of menstrual protection, most of the women

1. NFHS: The National Family Health Survey in India. Consulted on: <http://rchiips.org/nfhs/NFHS-4Report.shtml> , 08.03.2021.

68% use cloth (old saris and ) while 42% use disposable pads, 13% use locally prepared pads and 2% use tampons. In Rajasthan, only 48% of rural women use a hygienic method for menstruation, compared with 79% of urban women. (NFHS, 2017, p.26)

Rajasthan has been in a critical situation regarding a majority of the indicators related to demographic, infrastructure, and socioeconomic development, most of the women living in rural areas were not using underwear or any protection during menstruation until some initiatives start working in the state during the '90s.

According to Lakshmi Murthy: “The government through the Reproductive and Child Health Programme (RCH) in 1997 menstrual health got a space but not completely addressed. The NGO Sector, Child in Need Institute, and Chetna were some of the pioneers addressing menstrual health under reproductive health (RH) using “the life cycle approach” to include every stage woman’s reproductive life, and the contribution of some individuals like Yashodara and Abhijit Das, health activist worked for menstrual hygiene awareness in the Almora hill region of Northern India in 1999. Later in 2000 to 2010 the scenario improve with the implementation of certain programs from the government like the National Rural Health Mission including menstrual hygiene in Accredited Social Health Activist (ASHA) within the workers’ responsibilities, in Southern part of Rajasthan and Gujarat an inexpensive fabric called Time Piece or fanel made of polyacrylate was accessible and favored by the users that made accessible and affordable manage menstruation, additionally underwear was common in the market together with disposable pads created by SFGH”.(Murthy, L., 2017)

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Panchayat leader or Sarpanch or Gram Pradhan or Mukya according with the language of the state, is a decision maker, most are men but some are women elected by the village- level constitutional body of local self-government called the Gram Sabha (Village Government), The Sarpanch, together with other elected panchayat members (commissioners) constitute the Gram Panchayat. And The Sarpanch is the focal point of contact between government officers and the village community and retains power for five years. This person can be comparable with “local government council “of a village or rural community of about 1,000 people or more. (IRBC, 2018). According with the the Ministry of Drinking water and Sanitation the Sarpanch are responsible for the overall development of the village and play a key role in providing basic services for the health and well-being of the rural people, like drinking water and sanitation. (DDWS,2019)



Rajasthan started having a different panorama and reality for menstruators after 2000, with people like Dr. Lakshmi Murthy and the UGER Initiative.

### **Jatan Sansthan / UGER Initiative**

Jatan Sansthan is one of the pioneers working with menstrual health in India, since 2001, the organization starts working with some programs on reproduction rights due to the alarming situation and lack of resources, knowledge, and the conditions that menstruators were facing in the rural areas of Rajasthan like no water, no toilets, not underwear and some women wearing the same cloth for 24 hours, trough implementing programs related with health and education with adolescents, children and women during more than 20 years the reality has been a change within this communities.

Jatan Sansthan is a grass-root organization working with rural and resource-poor communities in the state of Rajasthan, India in the districts of Rajasamand, Dungarpur, Jaipur, Udaipur, and Bhilwara. Having a presence in more than 1300 villages across the area, have reached out directly to more than 100,000 menstruators, training NGOs, and more than 17,000 frontline workers (health workers from Anganwadi center and ASHA workers) from Madhya Pradesh and working for the transgender community and menstruation in 2018. (JatanSansthan.org, 2021)

### **Why talk about Jatan Sansthan and UGER?**

Jatan Sansthan offers an alternative approach that is through the idea of copyleft and the ideology of sharing knowledge to improve living conditions of the communities, having a different discourse it is interesting to see the approach and awareness that's been implemented in



Rajasthan through promoting stitching one’s cloth pad and empower people who menstruate to be self-sufficient and not depend on other people but at the same time being aware of what happens in your body and with the environment.

Jatan Sansthan has been working in different areas with rural communities with different programs focused on violence, human rights, sexual and reproductive rights, and the influence of patriarchy to empower communities by giving those spaces, tools, and knowledge to become agents of change.

The contribution of Gramalaya, Sakhia and Jatan Sansthan, in menstrual health is described below in the table:

	Gramalaya	Sakhi	Jatan Sansthan
Training philosophy	Community Sanitation	Self-Sustainability	Copy Left
Improving women’s health conditions	Creates and generates a safe space to have dignified management of menstruation with the use of cloth pads and access to toilets. Reduction in the number of infections, allergies, and hospitalizations caused by urinary infection or reproductive tract infection.  Promotes good eating habits reducing the anemia in children and women.	Increase the attendance of girls at school, women to primary health centers for regular checks out. Implements regular checks in hemoglobin and anemia. Reduction of infections due to the use of unhygienic materials. Ensures availability and disposable process for pads through placed some vending machines that do not need electricity in some communities that cannot afford the cost of pads, Installation of incinerators in villages placed at schools or common places for washing clothes, and in the Aangandwadi center.	Breaking the silence about menstruation in rural areas from Rajasthan. Make people who menstruate aware of the harm of using plastics and disposable pads in the environment and the consequences of using for long periods disposable or reusable pads. Promoting with mothers to share about menstruation and eradicate the taboos.

<i>Training capacity</i>	Provides awareness about menstrual health and hygiene, including taboos, misconceptions, and practices within rural communities through materials (games, cards, and guide books) based on a cascade model, involving: health educators, volunteers, leaders of self-help groups, Schools, Centers, Aangandwadi and men and women from the villages.	Provide awareness through developed, adequate and strategic materials (games, books, poems, and songs) with different communities in different parts of India. It has a model based on: Educators from Sakhi trains women to create a unit in their locality and create awareness Training School teachers, health workers at the Aangandwadi centers, and local mentors that will work in communities.	Providing awareness about menstrual health, misconceptions, empowerment, and how to make a cloth pad through the idea of "CopyLeft", works with a team of experts (Program manager, field coordinators, and field workers) from the same organization that works with the communities through diverse programs focused on children, women, men, adolescent, and young people, each program menstrual health is included.
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<p><i>Women Empowerment</i></p>	<p>Access to water and a menstrual products that are safe and clean, Improvement on women's self-esteem. Be able to actively participate in society, work and generate income, decision making at home and with their bodies Go outside during menstruation</p>	<p>Employing widows rejected by society, or unemployed women from different religions to promote their capacity to generate their own money through creating Sakhi units to manufacturing pads and assured better conditions of life, has been one of the most effective processes to have autonomy for many women but also promote empathy among menstruators, removing the fear in young girls to ask for help or ask about what happens when they have their menstruation</p>	<p>A strong labor with a feminist perspective acknowledging how patriarchy influences the practices of the communities but at the same time make them believe that they can be an agent of change in their community by being vocal and speak on menstrual health with other communities by sharing their experience outside of their context and at the same time create their cloth pad and reuse having the correct hygiene and management during menstruation.</p>
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<i>Strengthening communities</i>	Community empowerment through involving elderly, women, men, young people, and children in every process. Engaging communities leaders from self-help groups and panchayat leader <sup>1</sup> to promote better relationships among them. Promotion to resolve social issues that the community is facing, being a leading community.	Promotion in the importance of community building based with the local context. Build better relationships among leaders from different religions, schools, women, men within the communities. Improvement of women's living conditions through economic empowerment building their own units. Generate an income source for women and families.	Promotes communities as self-sustainable taking the resources that they have available but also providing alternatives for well-being into the communities, engaging the communities' leader or panchayat leader, women, men, and young with a focus on human rights promoting leadership among them.
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<p><i>Innovation and manufacturing alternative menstrual products</i></p>	<p>Gramalaya has developed and designed an eco-friendly reusable cloth pad called Gio Care.</p> <p>GioCare offers a new reality for people who menstruate free of allergies and made of cotton creating a benefit for the environment allowing menstruators sharing with all the community the importance of using an alternative product so in this way it will not be a problem with the stigma to dry a cloth pad in the sun and others seen it.</p>	<p>Sakhi have created and develop a complete system to manufacture organic and biodegradable disposable pads, with an effective and easy way to dispose of through an ecological incinerator low cost that works without electricity and is easy to manage for women and girls.</p> <p>Creations done by Sakhi are the machines to manufacture the pads, the packing process, and the incinerators making affordable and accessible processes for people who menstruate.</p>	<p>Uger is an initiative developed by Jatan Sansathan with the purpose to have a design that other menstruators can copy to create their cloth pad and make it reusable, consist of two designs one for women who do not use underwear and the other that can use it with underwear as a cloth pad, this has brought the possibility to manage their menstruation but at the same time have better health conditions with a low cost.</p>
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<p><i>Establishing production units for manufacturing and distribution</i></p>	<p>The manufacturing process of Gio Care is managed by women's from the same communities having specific centers with the requirements to manufacture it and distribution, this initiative allows women be part of the project, provide feedback.</p>	<p>To promote the creation and installation of units in villages has contributed to tackling the problem from the local level. Awareness about menstrual health. Having a particular process of training during 6 months to develop and install their units and providing a follow-up to make them independent.</p>	<p>Jatan Sansthan has opted for the model of copyleft with the rural communities due to this self-sustainable works in two kind routes, the first one is to provide training to a group of women in rural communities to learn about menstrual health and stitch cloth pads for them and their community. The second route is production done by Jatan that is a project that is manufactured by a group of women (10) that live in marginalized areas are the responsible for stitch at home and send it to the organization but this works only when the NGO have orders.</p>
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<p><i>No of women reached</i></p>	<p>Gramalya has impact more than 600, 000 women as beneficiaries.</p>	<p>Sakhi has played an important role in the rural communities of Gujarat impacting more than 2000 women's lives.</p>	<p>Jatan has reached out directly to more than 100,000 menstruators</p>
<p><i>Impact of the Organization</i></p>	<p>Gramalaya has being part of 150 school programs giving awareness, building infrastructure, and promoting the use of cloth pads working with the entire community, making cloth pads users to full villages, and breaking the taboo about menstruation.</p>	<p>Active school programs and installed incinerators in more than 5000 schools and 160 units in five states Gujarat, Kerala, Manipur, and Tamil Nadu and taken to other countries like Cameroon, Zimbabwe, Bhutan, and some regions like the Zadari refugee camp in Jordan.</p>	<p>Alternative to approach menstrual health with the community. Promotes the importance of autonomy through being agents of change.</p> <p>Having a presence in more than 1300 villages across the area including NGOs, Government Programs for front line workers from ASHAS and Anganwadi Centers and some rural communities from Rajasthan and Northeast of India like Assam and Manipur and other states like Arunachal Pradesh, Maharashtra, and Haryana.</p>



<i>Funding resources for mobilization</i>	International founding like Bank of America among others and National programs and CSR.	National programs, CSR, Privates doners and self sustanibility	National programs International funds like USAID among others, and self sustainability
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### **Proposals and conclusions as a researcher, menstruator, and feminist for menstrual health**

Talking about menstruation is interweaving ideas, ideologies, practices, and diverse opinions to create a different concept about menstruation that can generate an alternative to offer better living conditions to people who menstruate.

Based on the above table it can be inferred that; there are several communalities and differences in philosophy, the approaches and in the implementation . For example - Gramalaya focuses on Sanitation, Sakhi concentrates in self-sustainability and the Jatan Sansthan in copy left and other projects, all of them are unique examples, at the same time they contribute towards the same cause.

The type of society that these organizations work with is similar, but the impact has been different due to the financial support that they have.

Government have to promote local consumption and the Indian initiatives to get the production for pads, which has to be distributed across the country and not to give concession to big companies that they do not care about environment and women's living conditions.

The impact and reach that organizations have across India depends on funding and access to resources. Therefore it is important to promote local economy and promotion of initiatives like the ones we have describe above being counciously aware of the context of the communities, but also have the knowledge and the tools for implementation and guarantee a dignified menstrual health for menstruators, but also improve the wellbeing of the communities.

Overall these organizations can be considered as models and can be replicated by small organizations that can scale up across the country, with the purpose to ensure a dignified menstrual health for menstruators in India.

Acknowledging the differences that exist in every rural and urban context with menstruators, and the importance to know the reality that they continue to face during menstruation is required.

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