Use of menstrual cup by adolescent girls and women: Potential benefits and key challenges

Who is this policy brief for?
Policymakers, program managers, their support staff, doctors, researchers and other professionals dealing with reproductive health, people with interests in gender issues and women affairs, educationists, school principals, teachers, parents and people with an interest in education outcomes in sub-Saharan Africa.

Why was this policy brief prepared?
To highlight the potential benefits of using menstrual cups elicited from findings of a feasibility study on the menstrual cup as a method in managing menstrual flow among adolescent girls and women in Kenya. This evidence aims at encouraging the formulation and implementation of policies that promote the reproductive health and education rights of adolescent girls and women by tackling problems associated with managing menstrual flow and by improving access to appropriate menstrual products.

What does this evidence-based policy brief include?
A summary of the study – methods, findings, potential benefits of the menstrual cup and the associated challenges.

Not included
Recommendations for implementation
Full report and references
The evidence that is summarized in this policy brief is described in more detail in the report entitled: Research and Feasibility Study to Explore Menstrual Practices and Investigate the Suitability of Menstrual Cups for Adolescent Girls and Women in Kenya. Final Report, 2010. The report is available upon request.

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Managing menstruation requires the use of disposable sanitary towels. Disposable sanitary towels are the most frequently used methods to manage menstruation. In resource-poor settings, they are often too expensive and unaffordable to most adolescent girls and women who need them. Consequently these women and adolescent girls resort to unhygienic methods. Lack of access to sanitary products confines some women and adolescent girls at home during their periods, restricting their mobility and undermining their participation in education, economic and social activities. The project entitled ‘Research and Feasibility Study to Explore Menstrual Practices and Investigate the Suitability of Menstrual Cups for Adolescent Girls and Women in Kenya’ was designed to explore the potential benefits that can accrue from providing adolescent girls and women with safe, affordable, and convenient materials (such as the menstrual cup) for menstrual management. This policy brief is based on the field research and feasibility study. It shows that there are tremendous benefits which will ultimately contribute to the promotion of the reproductive health and education rights of adolescent girls and women.

The menstrual cup (cup made of medical silicone rubber that is inserted into the vagina to collect menstrual blood) may be an appropriate new technology for poor women and girls in Kenya.

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This policy brief was written by the Menstrual Cup Project Team within the Population Dynamics and Reproductive Health Theme, in collaboration with the Policy Engagement and Communication Unit, APHRC.
The Problem

Disposable sanitary towels are the most frequently used methods of managing menstruation. In resource-poor settings and crowded informal settlements in particular, they are often prohibitively expensive, bulky to transport and difficult to dispose of. Many women and adolescent girls from poor families cannot afford to buy these hygienic towels, and resort to using strips of old cloth and other unhygienic methods. A number of researchers and policymakers have reported the importance of menstruation in limiting school and work attendance. Limited access to safe, affordable, convenient and culturally-appropriate methods for dealing with menstruation has far-reaching implications for the rights and physical, social and mental well-being of many women and adolescent girls. It undermines sexual and reproductive health and wellbeing and has been shown to confine some women and adolescent girls at home during their periods, restricting their mobility and undermining their participation in education, economic and social activities.

In collaboration with the Division of Reproductive Health (DRH) of the Ministry of Public Health and Sanitation and the Institute of Development Studies (IDS), UK, and with funding from UK’s Department for International Development (DFID), the African Population and Health Research Center (APHRC) carried out a research on menstruation with adolescent girls and women in Kenya. The project entitled ‘Research and Feasibility Study to Explore Menstrual Practices and Investigate the Suitability of Menstrual Cups for Adolescent Girls and Women in Kenya’ sought to provide policymakers and program managers with a better understanding of menstruation and associated practices of adolescent girls and young women in Kenya, including their experiences and attitudes as well as the problems they encounter. The ultimate goal of the project was to promote the reproductive health and education rights of adolescent girls and women by tackling problems associated with menstruation and by improving access to appropriate menstrual products.

The research was conducted in two phases. Phase 1 was a qualitative research to explore beliefs, attitudes, practices and problems associated with menstruation among women and girls in informal settlements and other urban areas of Nairobi. Based on the findings summarized in the Policy Brief No. 20, 2010 (Experiences and problems with menstruation among poor women and schoolgirls in Nairobi, Kenya), Phase 2 was designed as a pilot study to assess the cultural, practical and health-related appropriateness and feasibility of the menstrual cup as a method for managing menstrual flow. Findings from Phase 2 have been summarized in the Policy Brief No. 21, 2010 (Attitudes towards, and acceptability of, the menstrual cup as a method for managing menstruation: Experiences of women and schoolgirls in Nairobi, Kenya). These two Policy Briefs are available upon request.

The menstrual cup (cup made of medical silicone rubber that is inserted into the vagina to collect menstrual blood) may be an appropriate new technology for poor women and girls in Kenya. The menstrual cup has been used since the 1930s in Europe and North America and are manufactured commercially in those regions. The Mooncup®, one of the manufacturers of the menstrual cup, has received regulatory acceptance from the Food and Drug Agency (US), which regulates menstrual flow management products (http://www.mooncup.co.uk). For more information about the menstrual cup, refer to the document Menstrual Cup: Frequently Asked Questions (available upon request).

This policy brief draws from the findings of Phase 2, which was conducted between May and September 2010.

Methodology

The study used quantitative and qualitative methods to collect data at baseline before the use of the menstrual cup, and at endline after four months of use of the menstrual cup.

- Quantitative component: A structured questionnaire was used to collect data on background information, access to clean water and sanitation facilities, menstrual beliefs, practices and reported symptoms of reproductive tract infections (RTIs) and sexually transmitted infections (STIs); consistency of use and discontinuation rates and reasons for discontinuation.

- Qualitative component: In-depth interviews (IDIs) were used to explore menstrual experiences, problems and needs, personal and social practices, norms, attitudes and beliefs, and their attitudes towards menstrual cups, perception of social acceptability and their experiences upon using the cups.

A scientific review working group and an advisory group of experts on new technologies in reproductive health, adolescent health and feasibility study methodologies provided input into the design of the study. Clearance was obtained from the Pharmacy and Poisons Board’s Expert Committee on Clinical Trials, the Kenya Medical Research Institute’s Ethical Review Committee and the National Council for Science and Technology.

Data collection was conducted in Kiswahili and/or English. Qualitative information was recorded on digital recorders and later transcribed in English and coded for data analysis and report writing. Sensitization and ongoing support for participants was provided by nurses from the Division of Reproductive Health over the four month period. For a description of the study participants see Policy Brief No. 21, 2010 (Attitudes towards, and acceptability of, menstrual cups as a method for managing menstruation: Experiences of women and schoolgirls in Nairobi, Kenya).

Key Findings

1. Possible benefits on school attendance and participation

- The quantitative results suggest that the use of the menstrual cup does not seem to have resulted in significant improvement in school attendance, with 11 participants (20%) reporting at endline that having their periods stopped them from attending school classes (27% at baseline).

- Use of the menstrual cup seemed to improve school girls’ concentration. The proportion of participants who reported that having their periods affected their concentration in school dropped from 28 (47%) at baseline to 16 (29%) at endline.

- Participants in the study felt that there was no reason to absent themselves from school because the chances of being embarrassed were less. “You are very comfortable and you can do so many things with the cup on. You walk freely with your head high, in class you are not worried that you will spot and people know that you are menstruating, it doesn’t leak and I no longer have to keep running to the toilet to change”. (IDI with a schoolgirl)
Possible economic benefits

Participants indicated that the education given to girls at menarche was fragmented, with the approach being more cautionary or admonitory, leaving girls more disturbed about menstruation and forced to discover things for themselves. However, when the menstrual cups were introduced to the community, they were accompanied by educational sessions on how to use them and issues about reproductive health. This introduction provided a platform and forum of discussion where girls were educated, given an opportunity to discuss their reproductive system, health issues, problems and other relevant topics like family planning and sex education. Thus menstrual cups provide an avenue which could be explored to open discussions about female maturity and growth and what steps or measures girls or women can take to address changes in their bodies and the reproductive system. Participants expressed gratitude to learn a lot about their reproductive health and even have an opportunity to raise questions on menstruation, an area considered taboo and not talked about.

Participants also reported that since using the menstrual cup, they no longer worried about having to dress in particular clothes that concealed stains because the menstrual cup hardly leaks and therefore, there is no reason for worrying about being embarrassed.

3. Potential health benefits

Participants reported that use of the menstrual cup collected blood before it left the vagina and was not felt by the user as they walked or went about their business. Thus, there was no occurrence of skin irritations as caused by sanitary pads.

4. Possible social benefits

There is less stress about leakage when using a well-fitted menstrual cup, previously a common problem during menstruation attributed to not so appropriate methods for managing menstrual flow.

The major social implication of menstruation mentioned was embarrassment after staining clothes when using methods which are not appropriate. The study on the menstrual cup revealed that, embarrassments are no longer the case because cups are worn into the vagina and capture the blood before it gets outside the body. Thus chances of leaking are small.

Consequently with less worry or fear of leakage and embarrassments there is reduced opportunity for being victimized or stigmatized. Previously this was experienced a lot by school girls who stained their clothes.

Participants indicated that the education given to girls at menarche was fragmented, with the approach being more cautionary or admonitory, leaving girls more disturbed about menstruation and forced to discover things for themselves. However, when the menstrual cups were introduced to the community, they were accompanied by educational sessions on how to use them and issues about reproductive health. This introduction provided a platform and forum of discussion where girls were educated, given an opportunity to discuss their reproductive system, health issues, problems and other relevant topics like family planning and sex education. Thus menstrual cups provide an avenue which could be explored to open discussions about female maturity and growth and what steps or measures girls or women can take to address changes in their bodies and the reproductive system. Participants expressed gratitude to learn a lot about their reproductive health and even have an opportunity to raise questions on menstruation, an area considered taboo and not talked about.

Participants also reported that since using the menstrual cup, they no longer worried about having to dress in particular clothes that conceal stains because the menstrual cup hardly leaks and therefore, there is no reason for worrying about being embarrassed.

I would not wear tight trousers, especially white ones, because the pad would show and at the same time you would never know when it is going to leak. No one would know when you are wearing a menstrual cup unless you mention it yourself.” (IDI with a schoolgirl)
5. Challenges

Limited access to water

Participants in the menstrual study found it problematic to change when there was no water, preferring to remain with the cup the whole day so that they could change at home.

‘At school there are times when there is no water and during those times, I don’t remove my cup at all until I reach home. Because I need water to pour in the toilet and also to rinse the cup with because I cannot leave the toilet like that.’ (IDI with a schoolgirl)

Limited access to toilets, privacy and security

Participants reported that they could not access toilet at night, forcing them to change in the house and retain the waste for disposal the next morning in the sewage point.

‘In Korogocho, you cannot go out at night so I have a plastic container that I use. I pour the menstrual blood in it, rinse the cup with water and use it again. In the morning I can go and pour that waste in the toilet and then wash the container.’ (IDI with a woman)

It is necessary to have some privacy when changing the cup. Sometimes changing the cup needs extra caution and care which means one can take longer in the bathroom/toilet. This can easily raise suspicion among other people who also need to use the toilet, for instance in schools.

There isn’t enough privacy [with emptying the cup], because for example during break time everyone wants to go for a short call and there you want to change and people are wondering why you are delaying.’ (IDI with a schoolgirl)

‘It would be tricky going to empty the cup in the public toilets especially when you are traveling and maybe there is a queue, someone is banging on the door for you to finish quickly, and in the process of hurrying, it can easily drop in the toilet.’ (IDI with a woman)

Implications for the use of the menstrual cup

The menstrual cup is an alternative technology that increases the choice for women when deciding which methods to use to manage their menstrual flow.

When using the menstrual cup one needs to maintain a high standard of hygiene especially during insertion, removal and general cleaning. Although water shortages could present challenges for its use, the amount of water required when using the menstrual cup is minimal compared to the other methods used.

Study findings reveal that infrastructure was not adequate to ensure proper privacy for girls during menstruation. Most of the toilet facilities had water basins outside the cubicles which becomes obvious to other people that one is menstruating, a major concern for schoolgirls. It is recommended that in future, development of infrastructure should take into consideration the needs of menstruating girls and women.

The menstrual cup presents a perfect opportunity to educate and impart knowledge on reproductive health issues which in the process becomes a platform for initiating dialogue and discourse on reproductive health issues otherwise never discussed.

Conclusion

These findings on the use of menstrual cups among adolescent girls and women highlight the efforts to promote the realization of reproductive health and rights in Kenya. As information and acceptability of menstrual cups become more widespread nationally, distribution methods that could be considered include social marketing and distribution through youth-friendly services to offer proper guidance on its use and uptake. Other interventions include the provision of information on menstrual flow management, production and distribution of cheaper menstrual flow commodities and guidance and counseling programs for young girls.

In the context of the study, useful information has come to light some of which requires further research to increase evidence about menstrual cup use, and its appropriateness and acceptability among women and girls in various parts of Kenya.

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