
**THE IMPACT OF MENSTRUAL MANAGEMENT AND THE EXPERIENCES OF
SCHOOL-GOING GIRLS OF LOW SOCIO-ECONOMIC STATUS:
A CASE OF KUWADZANA, HARARE, ZIMBABWE**

BY

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Abstract

Women and girls all over the world continue to experience gender discrimination because of the high cost of menstrual management products and the state's failure to provide adequate access to favorable and suitable menstrual management facilities. Despite much research on the subject of menstrual hygiene and management, little is being done to improve the lives of girls, especially those in schools where they should be provided access to safe and effective products and hygienic and properly equipped facilities where they can use them with dignity. This research employed grounded women's law theory to explore and understand the challenges and experiences being faced by school-going girls from low socio-economic status in managing their menstruation. Its purpose was to assess the extent to which current measures achieve menstrual equity in terms of the laws that govern and protect women and school-going girls from menstrual poverty at national, regional and international levels. The study was conducted in Kuwadzana, a high density suburb of Harare (Zimbabwe's capital), the majority of whose residents are lodgers employed as blue collar workers or work in the massive informal sector. The study looked at existing measures which help to alleviate the situation the girls face before and during their menstrual cycles. An investigation was also made into the ways in which community leaders, parents, government institutions and civic organisations are working together to provide assistance to school-going girls in Kuwadzana. The major question asked was how menstruation impacts the school attendance and academic performance of girls given the cultural perceptions and hypothetical gender discriminatory environments. Observations, interviews and focus group discussions were held with representatives from different primary and secondary schools in Kuwadzana, church groups, a woman Member of Parliament and non-governmental organization representatives. Consequent upon the findings most of the research assumptions were confirmed and a number of emerging issues arose which included the notion that much silence surrounds the issue of menstruation which is culturally regarded as a taboo subject. A number of feminist theories were applied to understand how and why menstrual issues continue to be ignored even though it is universally accepted that this natural function is extremely important not only to girls and women alone but also culturally and socially to their families and community at large. My findings revealed that as a result of the poor measures in place to meet their menstrual needs, girls miss between one and five days of school every month in order to manage their periods from home. Although this has not affected their academic performance, the suggested improvements to the current measures should still be implemented.

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Declaration

I **CHIPO FAITH MADZIWA** declare that the work presented in this dissertation is my own and it has never been submitted for a degree course in any other university. Where information has been obtained from other sources, I verify that this has been revealed.

Signed..... Date.....

This dissertation was submitted for examination with my approval as the University Supervisor

Signed..... Date.....

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Dedication

Special dedication goes to my parents, Florence Kanganwani and Ngonidzashe Edward Tsitsi Madziwa. I will strive to honour your memory and support your legacy with all my breaking and bleeding heart. I know you are proud of me wherever you are. May your souls continue to rest in eternal peace.

“If a community values its children, it must cherish the parents”

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List of abbreviations and acronyms

CEDAW	Convention on the Elimination of all forms of Discrimination against Women
FGD	Focus group discussion
Maputo Protocol	Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa
MHM	Menstrual health management
NGO	Non-governmental organisation
NORHED	Norwegian Programme for Capacity Development in Higher Education & Research for Development
SEARCWL	Southern and Eastern African Regional Centre for Women's Law, University of Zimbabwe
TSS	Toxic Shock Syndrome
ZNFPC	Zimbabwe National Family Planning Council

List of international human rights instruments

Convention on the Elimination of all forms of Discrimination against Women (CEDAW)

General Recommendation No. 24

Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in
Africa (Maputo Protocol)

List of national legislation

Constitution of Zimbabwe Amendment (No. 20) Act, 2013 (the Constitution)

Education Act [Chapter 25:04]

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CHAPTER ONE

1.0 INTRODUCTION AND BACKGROUND OF THE STUDY

1.1 Introduction

This chapter introduces the research and will look at the issues that prompted me to undertake this study, the background of the study and the assumptions and research questions that I needed to explore and answer. I will also briefly discuss the study area as well as the limitations encountered during the duration of the study.

1.2 Background of the Study

When I was growing up it was so difficult to access menstrual management products. Although my parents did their best to provide for my sisters and me, the enforced cultural silence surrounding menstruation meant that these provisions were inadequate. This meant that I would spend months using unhygienic products like pieces of cloth and toilet paper and often contract vaginal infections because I lacked proper menstrual management education and care. As a result of this trying experience, I have, in my later years, often felt the need to look into this issue to find out how other women and girls are coping with it today in the light of the new products which are now available and the changes which have occurred in society since then. Grateful for the opportunity this Masters programme has given me to do such research and given the importance of education, I decided to focus specifically on whether school-going girls are absenting themselves from school in order to manage their menstruation and also whether such absenteeism has any effect on their academic performance.

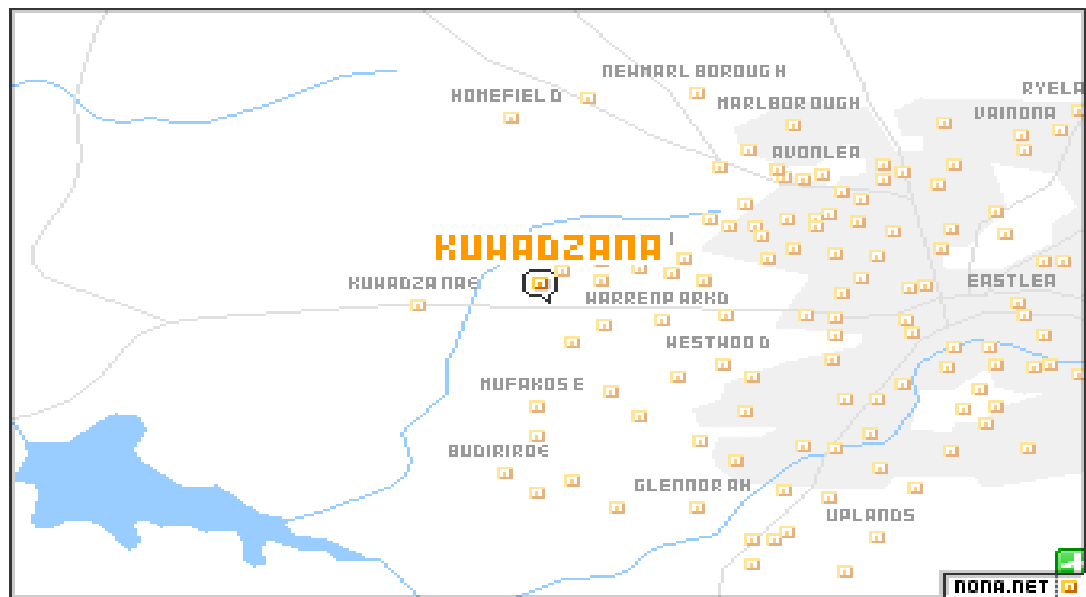
As the result of a study in which I was previously involved, I learnt that women and girls of low socio-economic status face challenges due to menstrual poverty which forces them to use unhygienic products, such as pieces of cloth, leaves and even cow dung to manage their menstruation and such knowledge triggered my assumptions (Madziyire, Magure and Madziwa, 2018). I was also motivated by the research of other scholars that despite this subject being over researched, there is a constant need to educate women and girls on how to improve their lives regarding menstrual hygiene management and to involve men and boys in an effort to do away with the culture of silence which continues to discriminate against and harm women.

My assumptions were borne of the deafening silence surrounding menstruation at the international, regional and national levels which convinced me that it should be regarded as a separate and distinct human right. Although we have international, regional and national instruments and laws in place with clearly specify important rights and freedoms (for instance, the rights to dignity, equality and non-discrimination, privacy, education and to health care in the country's Constitution) they are not being utilized to their fullest in order to realize the right of girls and women to safe and effective menstrual health, hygiene and management.

1.2.1 Study Area

The sample population was picked from Kuwadzana, a high density suburb in Harare (Figure 1). Kuwadzana has a population of approximately 800,000 residents. Recent reports by the Zimbabwe National Statistics Agency indicate that 52 percent of its population are females and the remaining 48 percent are males.

Figure 1: The research area



The research was carried out over a 4 month period between November 2019 and February 2020. I selected this research site because of its proximity to my home which is in Marlborough to

reduce research costs. The target population comprises school-going girls of menstruating age, non-governmental organisations representatives, parliamentarians, parents (mothers and fathers), church women as well as boys. I carried out a focus group discussion (FGD) with students from four schools, including boys, male vendors from the Areno shopping market and women from two religious sects being the white garment Apostolic Church (*Mapostori*) and the Anglican Church (Mothers' Union). Most participants of the focus group discussions were women between the ages of 19 and those in their early 70s. Ordinarily, the men and women with whom I had FGDs are not in formal employment.

1.3 Research Problem

In addition to menstruation instilling discriminatory practices, poverty and humanitarian crises limit the access of women and girls' access to safe and effective menstrual management products and facilities. These challenges often deter school-going girls from accessing an education and other human rights. It has been argued that the inaccessibility of management products and inadequate facilities in schools to cater for menstruating girls has caused their irregular school attendance and participation and in turn poor academic performance.

In addition, there is not enough information and education on women's health especially with regard to menstrual health and management as this topic is considered taboo and seldom discussed due cultural beliefs and attitudes. Women's health encompasses a plethora of health issues and conditions that are exclusive to women or which affect women differently from men. Menstruation affects women and girls in a great number of ways economically, socially and medically. For instance, due to the country's harsh economic climate, many women and girls are severely challenged trying to access affordable menstrual management care products which results in their having to use unhygienic products such as leaves, pieces of cloth and even cow dung.

Furthermore, there are poor infrastructural and sanitation facilities such as disposal bins and sinks in institutions which are factors essential to achieving safe and effective menstrual health. Girls are reported to be missing school for up to several days during their monthly period and such absenteeism results in their poor performance. Moreover, the Constitution of Zimbabwe

Amendment (No. 20) Act, 2013 (the Constitution) provides for basic individual rights but is silent on menstrual management issues which creates a gap between the law and human rights, despite Zimbabwe Government having ratified the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo Protocol) which provides for the right to health (article 14) and which supposedly includes their right to access safe and effective menstrual health care.

1.4 Objectives of the Study

The aim of this study is:

- To explore the problems encountered by young school-going girls with regard to safe and effective menstrual management and the influence this has on their school attendance and academic performance.
- To assess whether there are appropriate safe and effective facilities and menstrual management products to cater for the needs of girls in schools.

1.5 Research Assumptions

- (1) There is silence surrounding menstrual issues in schools and communities.
- (2) Menstruation affects the school attendance and academic performance of girls of low socio-economic status.
- (3) There are adequate menstrual management facilities in schools to cater for girls' monthly menses.
- (4) There are laws that address issues of menstrual equity in Zimbabwe.
- (5) The laws in Zimbabwe are being implemented to promote and improve girls' menstrual management needs.

1.6 Research Questions

- (1) Is there silence surrounding menstrual issues in schools and communities?
- (2) Does menstruation affect school attendance and performance of girls from low socio-economic status?
- (3) Are there adequate menstrual management facilities in schools to cater for girls' monthly menses?
- (4) Are there laws that address issues of menstrual equity in Zimbabwe?
- (5) Are the laws in Zimbabwe being implemented to promote and improve girls' menstrual management needs?

1.7 Limitation of the Study

A major study limitation is that menstrual issues such as menstrual management are considered a health issue when menstruation itself is not a 'health problem' but rather a 'biological reality' that every girl and woman has no choice but to experience for the most part of their lives. The fact that women, girls, men and boys were not at liberty to freely discuss issues concerning menstrual challenges and inadequacies due to cultural and religious myths and beliefs posed a major limitation to the study.

Although the right of girls and women to safe and effective menstrual health is sufficiently important to warrant its own recognition by the Zimbabwe Constitution, much silence surrounds the issue. Notwithstanding the fact that this piece of legislation awards women and girls a number of very important human rights including the right to sexual and reproductive health, it does not go far enough and fails to make specific provision for their right to safe and effective menstrual management which in itself is a major limitation.

During the field research, another limitation encountered was the language barrier. The subject of menstruation is difficult to explain to in *Shona*, one of Zimbabwe's indigenous languages in

which some of the research was conducted, since the language, unlike English, does not have the words English has for different reproductive organs and their parts. This limitation made it difficult for me to explain some concepts of the research in *Shona* to research participants whose English was poor. I tried my best to overcome this problem, but sometimes, they understandably found it difficult at times to understand, to express themselves or be understood.

1.8 Conclusion

This Chapter provided a summary of the research, its background and the research assumptions and questions in relation to menstrual management and the experiences of school-going girls of low socio-economic status. It also reflected on the challenges that I faced during my field visits to Kuwadzana.

CHAPTER TWO

2.0 LEGAL FRAMEWORKS & THEORETICAL PERSPECTIVES

2.1 Introduction

This chapter reflects on international and regional instruments that Zimbabwe has ratified and signed as well as the national laws that are in place to protect the rights of school-going girls with regard to menstrual management and measures that have been put in place at national level in line with the international human rights laws. It will also look at the feminist theories applicable.

2.2 Legal Framework

2.2.1 *National Law*

2.2.1.1 Constitution of Zimbabwe

The Zimbabwe Constitution is the supreme law of the land and any law that is inconsistent with it is considered null and void to the extent of such inconsistency. This means that the Constitution takes precedence over all other laws. However, the Constitution provides in section 27 that the State must take all practical measures to ensure girls are awarded the same opportunities as boys to obtain education at all levels. However, girls are missing school to manage their menses and this prejudices them and undermines their performance. Section 75(4) requires that the State must take reasonable legislative and other measures to achieve the progressive realization of the right to basic education. Since their schools are lacking the necessary products and facilities to cater for them, some of its students opt out of school from between one and 5 days every month in order to manage their menstrual period at home. There is therefore a need for schools to provide menstrual management care products and adequate facilities for girls in order to prevent such absences and protect their academic performance.

Although there has been some positive improvement to women's health care through the inclusion of section 76 of the Zimbabwe Constitution, recognition should also be given to the rights of girls and women not only to manage their periods with dignity but also to menstrual equity in general which should include, through a variety of laws and policies, the provision of menstrual management products in schools, shelters and prisons at affordable prices.

Some girls encounter symptoms such as dysmenorrhea and endometriosis prior to or during their menstruation. As a consequence, these girls tend to miss school in order to take different remedies until they feel well enough to return to school. These disruptions have a negative impact on the girls' studies and are likely to affect their academic performance. Section 80 of the Constitution also provides for the "rights of women." Section 80(1) affords woman the right to full and equal dignity with men including the enjoyment of equal opportunities in political, economic and social activities. Section 80(3) specifically provides that any laws, customs, traditions and cultural practices that violate the rights of women afforded by the Constitution are null and void. This is important for women and school-going girls as it is aimed at eliminating cultural practices and traditions that suppress and propagate discrimination against women.

Zimbabwe adopted its new Constitution in 2013 and this piece of legislation includes provisions which protect women's human rights and the obligations which must be performed in order to realise or implement them. Under the old Constitution women's rights to equality and non-discrimination could be legally breached on account of cultural and customary laws, practices and processes. Although this is no longer the case in terms of section 56(2) of the new Constitution, which provides that women and men have the right to equal treatment, including the right to equal opportunities in political, economic, cultural and social spheres, implementation of such rights for women is still posing a problem. Therefore, despite the fact that the new Constitution goes a long way to recognize, promote and protect women's basic individual human rights it is disturbingly silent about their menstrual rights. These rights are perhaps the most crucial of the health and reproductive rights of girls and women in view of the fact that they affect such a significant part of their lives. In other words, there is a gaping hole in Zimbabwe's legislation through its failure to recognize, protect and promote the unique and specific right of girls and women to manage menstruation safely, effectively and with dignity.

2.2.1.2 Education Act [Chapter 25:04]

The Education Act sets out the objectives and fundamental rights relating to education in Zimbabwe. It also provides for the establishment, maintenance and regulation of government schools and educational facilities. In accordance with the Constitution of Zimbabwe (2013), section 10 of the Education Act entitles every child of school-going age to be enrolled at a

Government primary or secondary school, as the case may be. Thus in terms of this section, the state is obliged to ensure that girls are given the same opportunities as boys to obtain education at all levels. Furthermore, section 64 of the Act, in accordance with section 29 of the Constitution, obliges the state to take all practical measures to ensure the provision of basic, accessible and adequate health services in schools throughout Zimbabwe. It empowers the minister to make regulations for the purpose of safeguarding the health of pupils or students attending any educational institution by providing government medical officers or practitioners as school medical officers at government schools. This means that there should be medical personnel to take care of school children especially those menstruating girls and assist them with the necessary management and care they need both before and during their menses. The medical personnel should be on hand to administer medication to those girls who suffer from menstrual symptoms as well as providing menstrual health education as and when required. Such provisions support the important basic human right of education for all in Zimbabwe.

Kanyongo (2005) correctly observes that the government has made education accessible through the policies of free education, compulsory education and upholding children's right to education. In this regard, Zimbabwe has taken a step in the right direction by affording all children the right to education. However, there is still the need for the responsible authorities to ensure that schools have adequate and accessible ablution facilities to cater for menstruating school-going girls in order to prevent them from missing school because of menstrual management challenges.

2.2.1.3 Public Health Act [Chapter 15:17]

Section 3(2)(a) of the Public Health Act states that the functions of the Ministry shall be to protect, promote, improve and maintain the health of the population. This means that there should be provision of medical personnel, either a qualified nurse or a nurse aid at every institution to take care of school pupils. In this case, the personnel can assist school-going girls with medical and menstrual assistance when required so that they are not forced to abscond and go home to manage their menses.

Section 3(2)(f) of the Public Health Act lays down that the functions of the Ministry include informing, educating and empowering the population about health issues. Section 28(2) provides

that the Minister shall develop policies and guidelines and monitor the provision, distribution, development and utilization of human resources within the public health system. The Public Health Act works in line with the Constitution and provides everyone with the right to health. It is nonetheless silent on menstrual health and management for girls and women despite menstruation being such a crucial aspect of female reproductive health. The Act guarantees that school-going girls should be educated and empowered with health information and this includes menstrual management information which should be given to both boys and girls. It is noteworthy that the proper implementation of these provisions should result in the elimination of stereotypes that place women and school-going girls in unacceptable discriminatory and humiliating positions simply as a consequence of managing their menstrual health.

2.2.2 International and Regional Laws

Convention on the Elimination of all forms of Discrimination against Women (CEDAW) and the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo Protocol) are good international starting points for Zimbabwe to have signed and ratified as they are concerned with, among other things, the rights of girls and women to sexual and reproductive health care. Both instruments, however, are silent on the issue of menstrual health and management.

2.2.2.1 CEDAW (General Recommendation No. 24: Article 12 (12) (a))

State parties should report on their understandings of how policies and measures on health care address the health rights of women from the perspective of women's needs and interests and how they address distinctive features and factors that differ for women in comparison to men. General Recommendation No. 24: Article 12, Paragraph 12(a) is central to the health and wellbeing of women. It necessitates the elimination of discrimination against women in their access to health care services and enforces measures to ensure that women realize this right to the highest attainable standard of health. It further acknowledges the fact that there are biological differences between men and women, such as women's menstrual cycle, their reproductive functions and menopause, which are influenced by societal factors through menstrual shaming and humiliation thus resulting in some girls missing school during their menstrual periods. Consequently, despite this instrument elaborating on the need for State parties to differentiate between men's and

women's health issues taking into consideration biological factors such as menstruation, there is still the need to give special attention to the measures to be adopted in addressing the plight of women.

The assumption that school-going girls' absenteeism from school is negatively affecting their academic performance was challenged as the girls are said to be performing better than boys according to the Zimbabwe National Statistics Agency (2017). This then boils down to the requirement for school-going girls' need to fully enjoy, without infringement, the right to human dignity (in terms of section 51 of the Constitution), the right to education (section 75) and the right to health (section 76). The Government of Zimbabwe has considered providing free sanitary wear to school-going girls in rural areas which it says are the most economically depressed in the country. Given, however, Zimbabwe's high inflation rate which literally gobbles up its Health budget which is pegged in local currency, all school girls should enjoy this benefit since both rural and urban school-going girls from low socio-economic backgrounds suffer equally from menstrual poverty.

2.2.2.2 Maputo Protocol (Articles 2, 3, 14, 26)

By ratifying the Maputo Protocol, Zimbabwe committed itself to domesticate its provisions relating to addressing women's issues including menstruation. It emphasises that women should be protected and state parties should enact and enforce laws that prohibit all forms of discrimination against women and upholds and protects their dignity. It points out that states should allocate adequate budgetary resources and other forms of support for the implementation and monitoring of measures to eradicate menstrual poverty.

Although it is argued that rights are rights no matter where you are, the Maputo Protocol is concerned with transformative rights which seek to change the way women's issues are viewed. While it is similar to CEDAW which speaks of eradicating the negative aspects of culture, the Maputo Protocol speaks positively of promoting favorable aspects of culture. In pursuance of section 2(1) of the Protocol which urges state parties to eliminate discrimination against women, Zimbabwe has enacted laws, in particular the 2013 Constitution, whose various provisions, including the right to human dignity (section 51), education (section 75) and health (section 76)

are major rights which advance the rights of women. Article 3 deals with the right to dignity whose violation occurs as a knock-on effect from the violation of a related but separate human right/s. For instance, a violation of the right to menstrual hygiene and management violates school-going girls' right to education, among other rights, resulting in these girls being forced to miss school for fear of being humiliated and this may, in turn, have a negative impact on their academic performance. Likewise, article 14 requires state parties to ensure that women fully enjoy their health and reproductive rights. In other words, this article is also silent on the issue of menstrual management care and as a result can also be said to violate the human dignity of women and school-going girls.

Article 26 goes on to elaborate on the implementation, monitoring and provision of budgetary and other measures, thus placing a direct responsibility on states to use their resources to meet and fulfill the rights of women. In this case, since Zimbabwe is a signatory to the Protocol, it is obliged to come up with a budget allocation for the provision of menstrual management care products and adequate facilities in schools to cater for school-going girls. On this note, Government, through its Finance Ministry, announced a budget allocation for the provision of menstrual care products to rural school-going girls but has so far failed to implement its undertaking.

The Protocol further observes that women are often left vulnerable and exposed to abuse as a result of the different application of other rights such as economic, social, and cultural rights which exposes them to intimidation, humiliation and degradation. Hence, the Protocol urges the need for interventions to provide for women's needs in order to eliminate discrimination irrespective of whether it takes place in the private or public sphere.

2.3 Theoretical Perspectives

Feminist theories represent many views with a need to seek social justice for women's interests which include, but are not limited to, women's diverse views on human rights, violence against women, reproductive rights, employment and discrimination to mention but a few. I will look at the Relational Feminist, Existentialist, Dominance, Radical and Marxist Feminist theories in deliberating the issue at hand.

2.3.1 *Relational Feminism*

Historically, putative biological differences between men and women were used to justify the secondary status of women (Bailey, 1993). This brought about the theories that biological make-up is the basis of all discrimination against women. Relational feminism, also known as maternal feminism, is used to express the dominant thinking in the older women's movement. It is derived from the assumption that while men and women are fundamentally different, the main contribution that women make to society should entitle them to equal rights. Thus, there is a need to move away from the perceived notion that men are superior and women inferior to a situation where men and women are equal partners with each overseeing different areas of influence. Thus, women should not be regarded as unclean when it comes to reproductive health issues such as menstruation because it is simply a biological fact that cannot be changed and needs to be accepted.

This theory emphasizes women's rights as women. While women and men are indeed different, the distinctive contribution that women make to society should entitle them to equal rights. Young (2005) postulates that "feminists would affirm that of course men and women are "different" in physique and reproductive function, while denying that these differences have any relevance for the opportunities members of these sexes should have or activities that they should engage in". Notably, since women menstruate and contribute to procreation, they should not be considered inferior to men, but different because of their biological make-up. Therefore, women and girls should be respected and their needs and rights should not be infringed. However, special measures are required in order to bring the disadvantaged or marginalized groups of persons, in this case, school-going girls, to the same level as boys by making available to them both free menstrual management care products and a safe and clean environment of suitable school ablutions where they can use such products with dignity.

2.3.2 *Existentialist Feminism*

Society, according to existentialist feminists, views women as "the other" and are regarded as a "second class sex" hence, they are oppressed and deprived. Women have been socialized to view men as more important and therefore older women continue to teach younger girls to look down upon themselves as a consequence of which school-going girls lack confidence in themselves.

Hartling, Rosen, Walker & Jordan (2004) are of the view that experiences of shame and humiliation often alienate and silence individuals leading to condemned isolation. As a result, because school girls fear humiliation and being teased for soiling their uniforms they end up isolating themselves and missing school in order to manage their menstrual period and this may have a negative impact on their academic performance. This scenario reveals the urgent need to reflect and eliminate negative cultural attitudes, social injustices and pre-conceptions of people in order to address the issues surrounding menstruation for school-going girls. This can be achieved by creating equal opportunities for both boys and girls through providing free menstrual management care products and adequate facilities in schools as well as menstrual education.

“The way in which a woman sees herself is affected by early traumatic experiences which demarcates her from the opposite sex. The internal struggle is often with the idea whether she sees herself as a free subject or as the object of society’s “gaze” as de Beauvoir would say. Unfortunately, due to the development of a girl’s body and how society reacts in a hostile manner, the latter view is often the one which moulds a girl’s self-concept. The culture and certain societal attributes inhibit women from finding meaning in uniquely female experiences such as menstruation, understanding the female sex organs, pregnancy and menopause. Each experience is tarnished by a hostile reaction from a society which imposes a meaning of burden, disadvantage and even shame. A young girl is looked at very differently once she experiences her first menstruation cycle. Once this incident is known, questions are raised and alarm bells ring and the talk of honour, shame, chastity and the loss of innocence begin. This is one of the main causes of negative body image at an early age” (Shaw, 2017).

Society views men as essential, while women are inessential. Men are free from the reproductive role simply because they are able to shape their future using all the time they have on their hands. There is also the assumption that men are academically smarter than women. In terms of redressing this inequality, we talk of affirmative action and consider opportunities and access.

2.3.3 *Dominance Theory*

When theorizing about the experiences of women, feminist perspectives view unequal power distribution as being rooted in sexuality, a socially constructed process which creates and organizes human sexual desire, and at the root of the social categories known as “man” and

“woman” (MacKinnon, 1982). Emphasis is placed on hierarchy and power structures where these hierarchies justify the condemnation of women through some cultural beliefs for instance the silence around menstruation which is never freely spoken about or discussed in public. This deprives school-going girls of accurate education and information which results in the violation of their rights to education, access to information, and non-discrimination among other rights; while, on the other hand, these same hierarchies bestow on boys the privilege of enjoying the right to education with impunity when they victimize and humiliate girls for messing their clothes during menstruation. Indeed, Chilisa and Ntseane (2010) observe:

“It is reported by teachers that girls sometimes have their menstruation in class and occasionally would mess up chairs. Boys shunned the girls for this. So they tended to keep a ‘safe’ distance away from them. During menstruation among ethnic groups, girls miss classes.”

Bailey (1993) hypothesizes that since menstruation is unique to women, it has become intrinsically bound up with the issue of gender inequality and has been used to justify oppression. For example, menstruation is used to exclude school-going girls from accessing an equal education to that of the boys and this confirms one of my assumptions that girls miss school as verified by the teachers who were interviewed in the research. This once again points to the need to initiate a conversation about the value of menstruation to affirm women and girls with a view to ending the oppression, manipulation and coercion in an effort to control and obtain power over their menstrual rights. According to Machera (2004), culture controls women’s sexuality more than men and Tau (2017) hypothesizes:

“The standard women are wired to live up to is always beyond the woman and the identity of the woman herself; it is at the disloyalty of sameness, fairness, equivalence, equality. Instead, we continue to be the gatekeepers of patriarchy, we continue to ‘correct and teach’ women to ‘act like a woman’ so that one day they will be the classical ideal ‘woman’ for men and never for oneself.”

Furthermore, the dominance revealed by this research was noted to be coming more from older women who are there to police the younger women and girls on cultural and religious norms. For instance, girls are warned not to use products such as tampons and menstrual cups because they tamper with or destroy their virginity when, in actual fact, these are more comfortable and

appropriate products that could give girls the freedom to fully participate in school activities including sports. Thus, while women are restricted as to what they can or cannot do with their organs, culture allows men to freely experiment with their bodies. Therefore, social, cultural and economic factors have a huge influence on the products women are permitted to use, irrespective of comfort, affordability and what they can achieve academically.

2.3.4 Post-modern Feminism

The roots of post-modern feminism are found in the work of Simone De Beauvoir where she questions the issues of otherness and meaning of equality (Mahoney, 1995). This theory is a combination of post-modern ideals and post-structuralism theory and post-modern feminists incorporate the approach to sex as the basis of their ideologies.

According to Tsanga and Stewart (2011), patriarchal control is seen as being particularly evident in culture, religion and control of women's sexuality where men have forced women into oppressive gender roles and sexual behaviour. For example, women and girls are deprived of the right to choose the menstrual management products of their choice. Semi-autonomous social fields place more emphasis on the need for young girls to maintain their virginity. Regardless of it being an ancient tradition in some communities, formal assessments of virginity testing are now scarce despite there being societal gatekeepers who inculcate fear in the younger girls by discouraging the use of insertable menstrual management products in order to preserve their virginity. For instance, school-going girls are strongly discouraged from using products like tampons and menstrual cups, thus, they are prevented from exploring and trying out cheaper and more favorable menstrual management care products in an effort to save their virginity. Boys, on the other hand, are not similarly questioned or tutored about saving themselves for marriage. Matswetu and Bhana (2018) observe that such patriarchal values produce sexual double standards causing virginity to have greater significance for females than males.

“A young girl, from this discovery onwards, is not only battling with her own understanding of her body and its functions which is entirely dependent on the support provided to her by significant others, but also is vulnerable to any ridicule from others about that very fact of life which happens to every female, every month until reaching menopause” Shaw (2017).

In the light of this theory, women need to be empowered with accurate information to teach young girls about matters pertaining to menstrual health management as well as their rights so that they too will be empowered and are not deprived to their rights.

In addition, menstruation is a factor in the control of women by men not only in ancient and primitive societies, where knowledge of physiology was rudimentary at best, but also in our post-industrial world (Delaney et al., 1988). Thus, no matter how much education women achieve, and no matter how many women penetrate the public sphere, nothing fundamental will change for women as long as biological reproduction remains the rule rather than the exception.

Radical feminists would view menstruation in a negative way which suppresses women. They then would suggest and encourage women to take medications such as oral contraceptives in order to escape from menstrual suppression and facilitate the freedom of choice over their body. For example, some senior school-going girls said that they resorted to the use of contraceptives such as the pill in order to avoid menstruation and side-step buying menstrual management products because it was cheaper for them to do so. While some girls said that this course of action had worked for them, others said it had not. This goes to show that women are not a homogenous group due to the desperate measures to which they are driven in order to manage their menstruation.

This aspect of the research brought to light a number of emerging issues. While the decision of school-going girls to use the pill to manage menstruation may reduce their fear of teenage pregnancy, it also exposes them the danger of engaging in early sexual encounters and the contraction of sexually transmitted diseases. This is all the more justification for the government's intervention to provide subsidized menstrual management products to school-going girls in order to alleviate the challenges of menstrual poverty being faced by women and girls. Even though efforts to eradicate such practices (of taking the pill) are required and the law is already in place to do so, the Government is actually falling short in helping to overcome these challenges for school-going girls and improving their menstrual experience.

Sheivari (2014) is of the view that Marxist feminists argue that women's oppression is a result of political, social and economic structures associated with capitalism meaning that whoever owns the means of production calls the shots and controls the pace at which things move. The role of class is significant as women and girls do mostly unpaid housework, hence, they cannot afford to buy or finance their sanitary wear which has become expensive and beyond the reach of many. In this study, the research participants are from the lower social strata of society and are largely dependent on their husbands and fathers for financial support. However, because these providers do not see menstruation as pertinent, women and girls end up using unhygienic products.

Gender oppression is reproduced culturally and maintained through institutionalized inequality. Portraying men as privileged at the expense of women, by refusing to acknowledge traditional domestic labour as equally valuable, the working class male is cultured into an oppressive structure which marginalizes the female.

“The topic of menstruation abounds with negative myths and stereotypes that ought to be excised so that women can be empowered through eliminating the unfair constraints associated with this aspect of their bodies” (Bailey, 1993).

Friedan (1963) is of the view that housework oppresses women by making them dependent on men and devalued since their work is outside the meaningful sphere of public economic production. However, there is also the need to economically empower women and make them independent so that they will be able to provide their daughters with not only emotional but also financial support to purchase their menstrual management care products. Access to resources should also help to solve the problems women and girls face; thus, if school-going girls are provided with menstrual management care products and adequate facilities in schools, then they, like their male counterparts, would have equal and dignified access to education and social justice will be achieved. Hence, the role of the state is to ensure that adequate facilities are availed as well as medical personnel at every government school or institution in order to take care of pupils and, whenever necessary, to assist the menstruating school-going girls.

Female subordination is rooted in a set of customary and legal constraints that prevent women from entering into public spaces and, therefore, confining women's work to the home. Liberal

feminists seek formal equality which works towards the elimination of differences as a first step to equality. For instance, stereotyping and discrimination affects school-going girls in so far as cultural myths and beliefs about menstruation deprive girls of the freedom to enjoy a number of their rights, for instance, education and dignity, among others.

Secondly, liberal feminists also search for substantive equality meaning that they push for the need for men and women to work together to eliminate their differences and liberate women from oppressive gender roles and to achieve this they propose interrogating, changing and utilising these laws to change women's lives. The various versions of liberal feminism insist that women's opportunities should be equal to those of men and that policies, legislation and statutes should be put in place to address social injustices between the sexes. According to Chilisa and Ntseane (2010), liberal feminisms focus on the subordination of women through unequal opportunities that are institutionalized through the legal, political, social and economic structures. It is based on this discourse that the liberal feminists emphasize making the legal and political rights of women equal to those of men.

Notably, the Government of Zimbabwe is moving in the right direction by passing laws that grant women equal opportunities to basic education as well as good health as guaranteed by sections 75 and 76 of the Zimbabwe Constitution (2013), respectively. Furthermore, the Government has taken a step further and incorporated in its budget an allocation for the provision of menstrual management care products for rural school-going girls. Despite these efforts there is still the need to put in place policies and measures to ensure that not only are the outlined measures and programmes implemented but also that they address the inequalities and challenges that are being experienced in order to achieve social justice for the school-going girls.

2.4 Conclusion

This chapter concludes that the adoption of international laws and enactment of domestic laws has assisted in addressing a number of human rights issues that affect women and girls in Zimbabwe. It also looked at a number of feminist theories applicable to the issue at hand. It should be noted that the international, regional instruments as well as the domestic laws are all silent on the issue of menstrual management and care for school-going girls.

CHAPTER THREE

3.0 METHODOLOGIES & DATA COLLECTION METHODS

3.1 Introduction

This chapter details the approaches and data collection methods I adopted in carrying out the research. It consists of the methodological framework and data collection methods applied to the study. In this chapter, I discuss the methodologies applicable to the study and how they were used to analyze the findings from the data gathered through interviews, observations and focus group discussions (FGDs) with respondents in Kuwadzana.

3.2 Theories to Methodologies

3.2.1 Women's Law Approach

The women's law approach is a basket of theories, methodologies and perspectives which allows one to pick and choose what is helpful. Knowledge from experimental evidence is also incorporated into the analysis in order to come up with a holistic picture of the factors acting on and affecting how women engage with their lived realities and how this is affected or in some cases aided by the law (Bentzon, Hellum, Stewart, Ncube & Agersnap, 1998). Thus, the women's law approach provides a reason to look into women's lived realities by analyzing and reflecting on the challenges being faced by women and girls from a personal and individual point of view. A number of approaches were implemented that helped to look at the different issues affecting school-going girls with regard to menstrual management.

In addition, the role of women's law is to identify barriers to adopting human rights, law reform, social and economic change for women. Through the application of this approach, I looked at the cultural barriers, the Constitution, customary law challenges, educational inequalities and choices, sex and gender prejudices, policy administration as well implementation with the intention of trying to identify problems facing school-going girls under study as well as possible solutions that can be adopted in addressing these challenges.

3.2.2 Human Rights Approach

Menstrual health is a human right although seldom discussed. Both the international and regional instruments applied to this study are silent on the subject of menstruation. According to Cusack and Cook (2009), CEDAW obliges state parties to protect women's rights by condemning all forms of discrimination against women and provides that state parties pursue by all means appropriate constitutional, legislative measures to eliminate discrimination against women. The Convention obliges state parties to ensure the right of every woman to political participation (arts. 7-8), work (art. 11), education (art. 10), health (art. 12), and equality before the law (art. 15) on an equal basis with men. However, the Convention mandates states to put in place legal, economic and social structures that address issues of discrimination against women. While the Maputo Protocol guarantees women's right to health (article 14), including sexual and reproductive health rights, and acknowledges that men and women are biologically different, it is strongly suggested that it should contain a separate provision providing for the right to menstrual health care.

The CEDAW Committee is of the view that women's right to access justice is a fundamental element of the rule of law which is essential to the realisation of women's human rights everywhere (Rudman, 2018). In accordance with the provisions of CEDAW and the Maputo Protocol, Zimbabwe adopted its 2013 Constitution whose section 80 provides for the rights of women and protection of their dignity and worth as equal human beings in society. Thus, the human rights approach helps to recognize that women have the right to manage their menstruation with dignity within the wider context of menstrual equity. In as much as the Constitution provides basic individual rights it is silent on menstrual management issues, thus creating a gap between the law and human rights despite Zimbabwe's ratification of international human rights instruments such as CEDAW and the Maputo Protocol. Furthermore, although the state is obliged but has failed to provide the services of a medical practitioner at every school or tertiary institution in terms of the Education Act, such failure has caused school-going girls to absent themselves from school to seek medical attention before and during their menses when they suffer from menstrual symptoms such as dysmenorrhea, endometriosis, anaemia or severe headaches.

3.2.3 *Grounded Theory*

This study used the grounded theory approach with the purpose of clarifying new and existing theory by confirming and challenging the assumptions raised. Grounded theory is a general methodology for developing theory that is grounded in data systematically gathered and analyzed (Strauss & Corbin, 1994). It enables the identification and description of occurrences and thus allows us to understand what is happening within a particular setting or an area. The aim of adopting grounded theory is to engage empirical knowledge about gender relations in relation to this study.

The grounded theory approach was used to come up with the research assumptions in much the same way in which the dung beetle operates. Assumptions were established and taken into the field during the data collection process where they provoked further questions. At this point, the assumptions were brought back to the “drawing board” and further revised or even changed in order to respond to the questions inspired by the initial assumptions which may or may not have been confirmed by the data collected or the evidence on the ground. For instance, one of my main assumptions was that there are adequate menstrual management facilities in schools to alleviate girls’ monthly menses. However, from my observations the facilities in schools are not adequate for the girls to manage their menstrual periods as there are not enough sanitary disposable bins, water facilities or private cubicles for girls to manage their menstruation in private. This was despite the fact that in my interviews with Council and Ministry of Education officials, I had been advised that the school facilities were up to standard.

Grounded theory is a way of thinking about data processes or theorizing from data so that the end result is a theory that the researcher produces from data collected through interviewing and observing respondents’ everyday lives. Grounded theory was employed in my study successfully as I was able to apply various feminist theories and I went out into the field to speak to women on the subject of menstruation which is a largely unacceptable social norm.

3.2.4 *Legal Pluralism*

We have different laws operating in the same legal system. General laws are operating together with and alongside customary laws and there are often contradictions and conflicts between

them. Before colonization, Zimbabwe as a state, had its own customary laws; colonization brought with it general law (the common law and legislation). Although the legislature has passed legislation to protect women, the mere passing of such laws has not achieved social justice because their intended outcomes are hampered by various powerful factors. For example, women still encounter on-going practices and processes on the ground that may be far stronger than national laws or human rights standards, and it is in this respect that semi-autonomous social fields come into play. During the study, I realized that women are still not in a position to fully exercise and enjoy their menstrual rights, i.e., manage their menstruation safely, effectively and with dignity. This is because some cultural views maintain that it is a taboo topic and there are also negative cultural myths and beliefs that deprive women of their rights to dignity (section 51 of the Constitution), health (section 75) and education (section 76).

The approach takes into account that the law is biased and affects men and women differently. It is an analytical framework which provides an understating of the position of women in the context of multicultural societies and plural systems of law according to Hellum et al. (1998). It helps to obtain an appreciation of the position of women in the context of multi-cultural societies and the role of the state in addressing the plight of women and girls. I noted from this study that customary and religious practices are not in accord with basic laws which means there are gaps. In as much as we have laws, these laws are not going far enough to protect and safeguard women's rights and there is therefore a culture of silence surrounding menstruation which prevents women and girls from accessing information and education on how to take care of themselves and seek help when they need to do so. From this standpoint, law is state recognized and enforced law is the most important normative order. All other institutions are thought to be either insignificant or irrelevant as they challenge the administrative mindset. As a result, women's rights and needs are taken for granted and neglected and social justice seems far from being achievable.

3.2.5 Gender and Development

The gender and development approach aims at addressing women's needs within a wider context, calling for different life courses of men and women to be considered from an early age, while emphasizing the need to monitor the policies and programmes in place for women, men,

boys and girls. This approach seeks not only to meet women's practical or basic needs like water, food and shelter but also strategic needs such as reproductive health rights including menstrual management care which embraces issues of both accessibility of products and adequate facilities as well as access to decision making processes in order to avail these rights. However, girls' needs are usually cast aside as a result of gender socialization. Thus, Bentzon et al. (1998) recommends that to achieve this it is advocated that all legal discrimination between women and men has to be eliminated so that women can make use of these reforms and be empowered.

In this case, menstruation is part of a women's biological make-up and is considered irrelevant and does not receive much recognition. Such an approach has a negative impact on girls' school attendance and academic performance. The approach was adopted to assess women and girls' lived experiences, their access and lack thereof to strategic needs such as menstrual management products and adequate facilities.

3.3 Data Collection Methods

3.3.1 Purposive/Selective Sampling

Purposive sampling is a technique widely used in qualitative research for the identification and selection of information-rich cases for the most effective use of limited resources (Patton, 2002). This technique involves identifying and selecting participants, individuals or groups who are knowledgeable about the experiences of the topic at hand. As part of the research design, I applied this type of sampling because it focused on certain characteristics of the target population that are of interest and would enable the respondents to answer the research questions. Purposive sampling was also adopted as a way of identifying key informants taking into account the fact that not all school-going girls were of menstruating age yet they also needed to be included so that I could ascertain at what ages they receive information with regard to menstrual health issues.

3.3.2 Focus Group Discussions (FGDs)

Qualitative research is particularly appropriate in relatively new areas when the main goal of the study is to learn more about people's perspectives and experiences (Moretti et al., 2011). The discussions I conducted when carrying out this research ran for approximately one to one and a

half hours. Focus groups aided in obtaining valuable information and allowed me to observe the expressions of the participants. Focus group discussions were convened by bringing together women and girls from similar backgrounds to discuss the topic of interest with the intention of understanding how women and girls feel and think about menstruation as well as the similarities and differences that exist in terms of cultural beliefs, experiences and practices. Thus, focus group discussions provided insight into different experiences and lived realities pertaining to menstruation challenges being faced by school-going girls with regard to access to menstrual management care products and facilities in schools. Colicci (2007) also notes that the focus group discussion is a qualitative method that possesses elements of both participant observation and individual interview among those predominantly used. I found it a helpful tool to gather information from young people and for the purpose of discussing the sensitive topic of menstruation which society considers taboo.

3.3.3 Observations

Byman (2016) proposes that research methods such as participant observation is used so that the researcher can keep an open mind about the shape of what he or she needs to know and so that concepts and theories can emerge out of the data. The aim was to explore the experiences of school-going girls and this research method was a natural way of gaining a broader understanding of the research topic. It was applied in an effort to obtain a deeper understanding of the situation and also to watch the behavior of school-going girls during the discussion and I noticed that some of the younger girls were shy in the beginning because they have been socialized not to talk about the topic. I also observed that one of the girls became emotional when I spoke to her in private and I realized that she was a victim of sexual abuse. Some of the girls would giggle with embarrassment and this confirmed that menstruation is still considered an embarrassing topic of conversation.

3.3.4 Interviews

The interview has become the main data collection procedure which is closely associated with qualitative, human scientific research, and researchers tend to choose this method in order to find and explore the meaning of a phenomenon as it is lived by the subjects (Englander, 2012). I adopted this technique with the intention of exploring the research subjects' personal opinions so

as to obtain in-depth information from them. I connected with the participants through the interview process since they relaxed and felt sufficiently comfortable to share their experiences and concerns with me without any fear of embarrassment or humiliation. A good number of the girls kept insisting that I handle their information with as much confidentiality as possible.

Interviews were conducted with civic society organizations' representatives, the Member of Parliament for Kuwadzana, Government and Council officials, eight girls of which four had acted emotionally during the focus group discussions and women from the white garment church who preferred to make their contributions anonymously and teachers from the schools visited. The purpose of the interviews was to effectively collect information as they provided a foundation from which I could venture further and ask deeper questions of the respondents which meant that the answer to one question would lead to another question and so on.

3.4 Conclusion

This chapter focused on the feminist perspectives applied during the field research. I favoured the post-modern feminist take which advocates for the emancipation of women by simply encouraging them to free themselves from any kind dependence so that they are able to fend for themselves and their school-going daughters. For example, instead of school-going girls depending on their mothers, fathers or brothers as sponsors for the purchase of their menstrual management care products, they could utilize the education obtained from technical subjects like fashion and fabrics and clothing to design and make their own products. The research employed focus group discussions, observations and key informant interviews, and the triangulation or verification of data was implemented in order to identify common and relevant issues in the research. This ensured the collection of qualitative data which was dependably processed and analyzed. These research methods helped in ensuring that the research objectives were achieved.

CHAPTER FOUR

4.0 FINDINGS

4.1 Introduction

This chapter looks at the research findings based on the data captured during the data collection process in Kuwadzana with groups of school-going girls, groups of church women, civic society organizations' representatives, the Member of Parliament for Kuwadzana, government and council officials and men picked at random at Areno Shopping Centre.

4.2 Understanding and Knowledge on Menstrual Health

According to the UNFPA Report (2019), menstruation is a process in which the uterus sheds blood and tissue through the vagina. Stubbs (2008) claims that menstruation carries both a good and a bad reputation. Its “good reputation” can be found in the many anthropological accounts that emphasise the importance of menarche (i.e., a woman’s first menstruation) as a sign of physical maturity and fertility while, its “bad reputation” as being physically and psychologically problematic has persisted and overshadowed positive perceptions throughout history in many cultures including our own. In other words, this loss of bodily fluids has given birth to many social fears.

Some cultures consider menstruation to be a symbol of ‘impurity’, which appears proscribed in several sacred texts. The Book of Leviticus in the Bible (10 v. 19-32) refers to the impurity of women during menstruation and what they do differently during this time. Since monthly menstruation is part and parcel of the lives of women and girls and menstrual hygiene is essential to their dignity and wellbeing, they therefore have the right to enjoy health and reproductive health services. Therefore, clean menstrual management material should be used to absorb or collect this blood and these materials have to be regularly changed using clean water in private for the duration of the menstruation period. Access to facilities to dispose of used menstrual management materials is also required in order to exercise menstrual hygiene. It follows that the provision, protection and improvement of rights to menstrual management which may be exercised with dignity and without discomfort or fear of being stigmatized is essential for women and adolescent girls.

Most of the older school-going boys and girls had knowledge of what menstruation is because they have had some science education on reproductive health issues. They understood that it is a biological process that every woman goes through when blood is discharged through the vagina in preparation for the next cycle. However, the younger girls did not have much understanding and could not explain the process fully and clearly. During the study, access to discussion with boys on the topic was limited to only one school which meant that I could not ascertain whether the younger boys had any idea of what menstruation is all about.

4.3 Cultural Myths, Beliefs and Attitudes

Although menstruation is part of life for most women, it is seldom spoken about. Popular beliefs are grounded on principles that have been historically passed down from one generation to the next. These principles have resulted in menstruation being viewed as taboo and associated with a great many negative cultural myths, attitudes and behaviours, among them being that menstruating women and girls are unclean and contaminated. Across cultures, menstruation is frowned upon and is therefore construed as something that is impure and blanketed in silence.

Scrutiny of formal menstrual education materials, another important source of girls' information about menstruation, proved them to be wanting (Stubbs, 2008). Thus, upon asking what the girls were taught about menstruation, I realized that the school-going girls held different information and knowledge about the subject. Some of the girls pointed out that they were advised never to talk about menstruation as that would bring them bad luck. Some stated that their blood was never to be seen by anyone except themselves as this would result in their being bewitched. They also emphasised that they were told "not to play with boys" because it would result in their falling pregnant. This showed that the young girls are being fed a lot of misinformation about menstruation. For instance, when translated into *Shona*, the phrase "playing with boys" could mean a lot of different things and if not clearly stated, a girl would not know.

Menstrual stigma continues to haunt women and girls meaning that topics on menstrual health, hygiene and management are never openly discussed and this therefore poses challenges for school-going girls in accessing accurate information or reaching out for support.

“In many households, where the woman is expected to look after the children, carry out the daily chores, provide a cooked meal and have these discussions with young daughters as early as 7 and 8 years old, the chances of this conversation being had in an informative and straight forward way is scarce. Often, the conversation brings about deep feelings of anxiety, shame and embarrassment of one’s body” (Reisel & Creighton, 2015).

It is noteworthy that school-going girls suffer from stigma and lack of services and facilities to help them to cope with the challenges they face during menstruation. According to Payne (2019), “parents should consider the messages they pass on to children, if they are not comfortable talking about menstruation, it is going to be a lot harder for them to talk about it with others.” Without honest conversations about menstrual issues, a commitment to support and eradicate negative cultural and social attitudes such attitudes will remain a forbidding consequence that will continue to be experienced by school-going girls in Zimbabwe.

Gender inequality can also impact women and girls through the internalization of negative role descriptions applied to them (incompetent, weak, powerless, etc). They may start to believe that they really do possess those negative attributes and act according to the behaviours they deem society prescribes (Buscher & Quick, 2004). Accordingly, the way in which girls are socialized instills negative attitudes about menstruation. Societal expectations are internalized in girls from a tender age to keep their menstrual status hidden as well as to stay away from or avoid contact with men and boys. This inculcates a culture of shame as well as depriving these girls of the knowledge and social support to freely enjoy experiences of menstruation. In addition, the continued sense of secrecy, shame, and stigma keeps menstrual health, hygiene and management issues on the peripheries of substantial social justice discussions.

4.4 Absenteeism and academic performance

There are reports that girls are missing school for a period of one to five days every month in order to manage their menstruation. This is because of the inaccessibility of management care products which have become expensive and beyond the reach of many girls coupled with poor services and facilities in the schools. For adolescent girls in low to middle income countries, lack of menstrual health management (MHM) within and outside the schools may pose a serious challenge to their health and participation in their education (Benshaul-Tolonen et al., 2019).

Below are a couple of responses from some of the school girls after I asked them if they had ever missed school to manage her menstrual period:

“At times I just decide not to go to school because some of the pieces of cloth I use are not comfortable when walking for long distances or even when seated. I am very sweaty and anxious and this also affects my concentration” (Sharon, a Grade 7 pupil in Kuwadzana).

“Most of the time I suffer from terrible abdominal cramps and mom has said its normal. I choose to stay at home during this period until a time that I feel better because I won’t be able to concentrate and sometimes boys in my class tease me and call me names because I will be so grumpy” (Zvisinei, a Form 2 student).

In an interview with a teacher, Mrs. Dee from one of the secondary schools in Kuwadzana, she reported:

“Although school-going girls do not actually excuse themselves from school stating their problem as menstruation, they simply state that they are unwell citing other illnesses. However, with a sizable number of school-going girls, this has become habitual or a monthly trend, and as a teacher, we are able to deduce that these pupils are facing menstrual challenges The challenge of access to sanitary pads often leads to absenteeism with a monthly trend where most girls here miss two to five schooling days because when they are on their menstrual periods they fear humiliating themselves and being laughed at by their classmates (boys and girls alike) after spoiling uniforms as a result of using improper sanitary wear.”

Menstrual health management in developing countries is considered a neglected issue (Sommer and Sahin, 2013) with the need for more comparative, high-quality studies (Sommer et al., 2016) as poverty, coupled with stigma and lack of information, prevents adolescent girls from properly managing their menstruation (Sommer, 2010 as stated in Benschaul-Tolonen, et al, 2019). The majority of school-going girls of low socio-economic status cannot afford commercial sanitary pads and resort to other methods which may be highly unhygienic and unsafe. This then makes menstruation a very stressful issue for most school-going girls as it affects their self-esteem, school attendance and concentration while attending school. During the focus group discussions the girls reported being extremely worried about their menstrual blood leaking, fear of sexual harassment by their male peers, shame and confusion surrounding the whole issue of

menstruation as barriers to the successful management of their periods which acting together infringed their right to equal access to education with their male counterparts.

4.5 Menstrual Experiences of School-going Girls

The needs and requirements of adolescent girls and women are often ignored despite the fact that there are major developments in the area of water and sanitation (Kaur et al., 2018). Women and girls' menstrual experiences are complicated and difficult to understand for someone who does not encounter similar situations and there are consistent factors that contribute to these experiences which present health implications, social, economic and cultural barriers and pressures. Studies suggest that these challenges negatively impact school participation, health and well-being (Hennegan et al., 2019).

The challenges that girls in other research have reported in managing their menstruation have included a school environment that lacked adequate toilet facilities and discrete places where they could dispose of their used pads (Sommer, 2010a). This was also found to be the case for the school-going girls in this research. Due to the stigma and negative perceptions around menstruation, they are constantly distracted by the fear of accidentally soiling their clothes and this has a negative impact on their confidence. Furthermore, resource limitations underlie inadequate physical infrastructure to support menstruation as well as a depressed economic environment which restricts access to affordable menstrual materials (Hennegan et al, 2019). The lack of health practitioners at schools also results in the girls missing school to manage their menstrual periods at home. This is because mismanaged menstruation can have negative health consequences and when coupled with a lack of supplies and facilities for school-going girls, they are then forced to skip school to deal with related disorders and this ultimately exerts a negative effect on their performance. Below is a comment from one of the students:

“I cannot even remember when I last used sanitary pads because my mother cannot afford to buy them for my sister and I...They are now too expensive and the usual Farai products that she used to buy are rare to find, so I use material I take from old bed linen and T-shirts as pads because my family cannot afford to buy me pads” (Thobekile).

“I cut out some old T-shirts made of soft fabric into small pieces which I use during my period as my sanitary wear. This is because it absorbs menstrual blood better and I do not chaff, but that does not mean it is comfortable” (Patience, a Form 2 student).

According to a recent study conducted by the Zimbabwe National Family Planning Council (ZNFPC), 72% of girls do not use sanitary wear during menstruation but materials such as cow dung, rags, cobs and newspapers and they miss 104 hours of school per term (Matiashe, 2018). This means that many school-going girls have no access to ideal menstrual management care products due to unavailability or affordability and at the same time they suffer a lack of access to facilities with clean water in the schools to clean themselves in privacy without facing discrimination from cultural norms and practices as was shared by the girls in a focus group discussion. This makes it difficult to maintain menstrual hygiene and therefore breaches girls’ basic human rights. Hodal (2019) emphasises that basic necessities for dealing properly with menstruation, such as access to clean water or a decent toilet, are simply unavailable to millions of women and girls. When I visited the ablution facilities of the schools I observed that all the bathrooms at the primary schools were filthy dirty and smelly and the girls said that it usually takes them approximately five to ten minutes to clean themselves up during their menstrual period. Figure 2 is a photograph of the toilets at a primary school in Kuwadzana.

Figure 2: Photograph of the toilets at a primary school in Kuwadzana



I also noticed that none of the schools had no water in their toilets, although the City Council had drilled boreholes to curb this challenge. Since the borehole water tanks were situated some distance from the toilets it meant that the girls had to wash or clean their hands in the open. In other words the schools' sanitary facilities did not make it possible for the girls to manage their menstrual needs in private and with dignity.

For women living without access to basic sanitation, menstruation can be especially challenging. Their resourcefulness knows no bounds (Hodal, 2019). In one of the schools there were no disposal bins in the toilet cubicles to give the girls some privacy when disposing of used sanitary wear. The school-going girls pointed out that the only disposable bin was not accessible as it was mounted high on a wall in the public part of the ablutions area and too high for them to reach, yet a further infringement of their right to privacy and dignity (Figure 3).

Figure 3: Photograph of a disposal bin mounted in an ablutions block in a primary school in Kuwadzana



Women and girls across the world face different challenges in managing their menstruation which should be an openly discussed issue (Sommer et al., 2015). Mazzei (2011) observes that “the taboo nature of the topic at hand makes traditional methodologies difficult and there is little

to no research that directly investigates or discusses school bathrooms and the menstruation of students.” This observation challenges the assumption that there are adequate menstrual management facilities in schools to alleviate girls’ monthly menses.

4.6 Conclusion

During my research, I came to realize that menstrual hygiene should be promoted by implementing a course on menstruation and menstrual hygiene management to help demystify the cultural and religious beliefs and attitudes which surround menstruation. Teachers should be educated and trained to impart knowledge about menstruation and menstrual hygiene management among students in order to address the challenges being faced by school-going girls. Furthermore, there is a need for a government intervention to ensure that there are adequate facilities in schools, for instance, water, disposal bins, sinks and locks on cubicle doors to cater for these girls so that they do not absent themselves from school in order to manage their monthly menstrual needs.

CHAPTER FIVE

5.0 MANAGEMENT

5.1 Introduction

This chapter sets out to look at the menstrual management products that school-going girls are using to manage their menstrual periods on a monthly basis. During the study, other alternative products were introduced to the girls and from the discussions and interviews held with the girls, parents (men and women), teachers, community leaders and women from different religious faiths concerns were raised about some of these products and these will also be discussed.

5.2 Products used during menstruation

When I asked the girls if they knew about the provision of sanitary wear by some of the schools, they seemed shocked. The teachers pointed out that the girls do not disclose their need due to the stigma they feared from those who would learn that they are poor. From a study conducted in Zimbabwe, it was noted that women in Zimbabwe struggle to find appropriate affordable menstrual care products and often use pieces of cloth, blankets and toilet paper (Madziyire et al., 2018). It should be noted that some of these products are a health risk to school-going girls considering the current challenges that the country is facing with regard to the government's failure to supply water to schools.

5.2.1 Commercial Sanitary Pads

The lack of adequate and poor menstrual management for school-going girls results in low self-esteem and has a negative impact on their dignity and academic performance. Commercial sanitary pads (Figure 4) are considered the most suitable menstrual management product for young school-going girls. The pad is better than the other products, for example, cotton wool, pieces of cloth and toilet paper that the girls admitted to using. The pad is more comfortable and stable (as the pad sticks to one's pants) and allows the wearer to enjoy greater freedom of movement which gives them more confidence. However, the girls were concerned about the price of the product as it has become too expensive for most of them to afford.

Figure 4: Photograph of a commercial sanitary pad



5.2.2 Cotton Wool

For women living without access to basic sanitation, menstruation can be especially challenging (Hodal, 2019). School-going girls confirmed that they used cotton wool (Figure 5) despite its high cost but complained of the discomfort it causes by chaffing making it difficult for the girls to interact and participate in co-curricular activities. This results in school-going girls confining and alienating themselves for fear of being labelled or stereotyped. Some girls are forced to stay at home for the duration of their menstruation period due to a lack of menstrual management products which causes them to miss school.

Figure 5: Photograph of cotton wool



5.2.3 *Pieces of cloth*

Pieces of cloth (Figure 6) are said to be more absorbent than the other products because the wearer can choose to wear as much as they need for their comfort. Mothers said that a major problem with them is that, depending on the age of the wearer, they may not be able to clean them properly which may expose them to infections. Borowski (2011) explains that such items can be soaked in cold water with vinegar or other natural disinfectant, rinsed out and washed with regular laundry. I come, however, from a culture of myths and stereotypes about menstruation which means that these materials are supposed to be handled with extreme confidentiality and no one besides their wearer should see and handle them. This means that the girls are not at liberty to discuss or show such items to others for inspection due to the stigma and humiliation they may suffer. During the group discussions the girls were unwilling to openly disclose in front of each other that they were using such pieces of cloth as a menstrual management method because of the fear of being ridiculed and only a few of them admitted they were doing so during one-on-one interviews. The major challenges cited about using this product were the water shortages both at the schools and at home. This has resulted in the girls' inability to properly clean these cloths and a good number of them have contracted fungal or bacterial infections. Such infections could cause them to absent themselves from school for extended periods which might harm their academic performance.

Figure 6 **Photograph of pieces of cloth**



5.2.4 Reusable Pads

These pads are sewn into a similar shape as the commercial sanitary pads with an envelope style holder that fastens round the underwear (Figure 7). This is an eco-friendly menstrual management method that is meant to last for up to 5 years and one requires at least two pads at a time. Period poverty, the lack of access to an adequate supply of menstrual products, like pads or tampons, is an indignity experienced by thousands of individuals in our region on a regular basis (Adams, 2019). It was noted that some non-governmental organisations are distributing recyclable pads to schools, despite menstrual hygiene concerns being raised as well as the unavailability of water supplies in the high density communities.

Figure 7: Photograph of reusable pads



Dhingra et al. (2009) explain that these items can be washed and dried in secret. The school-going girls agreed with this as they said that they are taught right from the start that menstrual blood is sacred and should never be seen by anyone except themselves. The problem is, however, that the communal sinks in the school ablutions blocks make it impossible for them to clean themselves after having soiled their uniforms without anyone noticing and therefore exposing them to negative reactions from others. Most mothers warmed to this product as it is economically and environmentally friendly. Many concerns were raised about the ability of the younger girls, especially those in the lower grades, to wash the reusable pads clean considering the water shortages facing the schools and communities. Another challenge was that young girls did not feel at liberty to wash their own menstrual blood off the pads because they considered it

to be filthy based on the myths surrounding menstruation and this was also their reaction to recyclable menstrual pants.

5.2.5 Toilet Paper

Iwalokun, (2019) says that some tissue paper was made from waste paper and therefore not ideal or hygienic for absorbing menstrual blood. Thus, the use of toilet paper (Figure 8) as a menstrual management method shows that there is a lack of menstrual hygiene and education among school-going girls as well as poor supervision and monitoring by their parents and guardians.

Figure 8: Photograph of a toilet roll



Some girls confessed to using tissue paper they find in their school toilets as a menstrual management care product. Girls should be advised to desist from the use of this product in order to avoid health complications. The use of toilet paper as a menstrual management method puts them at risk of contracting infections which can pass through their vaginal cavity and enter their bloodstream. This has huge consequences for the girls who risk vaginal infections or even infection of their reproductive organs which may lead to serious health problems.

5.3 Alternative Menstrual Management Products

Apart from tampons, the following alternative menstrual management products were new to the participants.

5.3.1 Reusable Menstrual Pants

Reusable menstrual pants (Figure 9) are also known as period-proof underwear. It has layers of cotton and waterproof material so that they can be worn instead of (or with) other period products (Jones, 2018). This method of menstrual management was considered very acceptable and the most suitable method to address the challenges being faced by school-going girls. Menstrual pants are designed with a material that protects the wearer from leaks, stains and embarrassment. Although this product is suitable and makes it comfortable for school-going girls to participate in educational activities such as sporting and school attendance, much concern was raised over washing the pants considering the lack of water to do so. Nyava (2019) comments that ‘some critics would argue that there is no water in school and communities for school-going girls to wash the product clean and there is need to move away from the perceptions around reusable pads, as it is some kind of stigma.’

Figure 9: Photograph of reusable menstrual pants



5.3.2 Tampons

The students knew about tampons (Figure 10) and during the discussion some of them admitted having used them and claimed that they were comfortable. This is despite the fact that society considers that they are inappropriate for young girls because they affect their virginity. The girls said that since tampons have become too expensive they have resorted to buying more affordable menstrual management care products. Furthermore, Toxic Shock Syndrome (TSS) although rare, is a potentially fatal disease caused by a bacterial toxin which is associated with tampon use and wearing tampons for more than eight hours at a time seems to increase its risk (Borowski, 2011).

It was on account of this syndrome that most parents were reluctant to introduce tampons to their school-going girls. Factors which steered them away from them included the fact that these girls spend approximately six to eight hours at school; they are still too young and not responsible enough to use them as well as the inadequate facilities at school. Taken together these factors increase the risk of exposure of the girls to TSS.

Figure 10: Photograph of tampons



5.2.3 Menstrual Cup

A menstrual cup (Figure 11) is a reusable bell-shaped device made from silicone, rubber or thermo-plastic elastomer, worn inside the vagina to collect menstrual discharge, which is emptied, cleaned and reinserted during menses and sterilized at the end of the menstrual period (Madziyire et al., 2018). The community's mothers, fathers, church women and children were not aware of this product prior to the study and therefore had mixed feelings about it. In her book, "The Second Sex", De Beauvoir (2013) provides the vocabulary for analyzing the social constructions of femininity and the structure for critiquing those constructions which she uses as a liberating tool to expose patriarchal structures which exploit sexual differences to deprive women of the intrinsic freedom of their bodies. Although some people showed an interest in the advantages of using the product, they did raise some concerns about its effects on the wearer's virginity and its implications for the community's cultural and religious beliefs.

Machera (2004) states that female sexuality is seen as something to be controlled and this can be seen through the dichotomy of labelling virgins as good women and non-virgins as loose,

immoral women. From the group discussion held with women from the Anglican Church Mothers' Union, there was uproar from the older women about the use of tampons and menstrual cups as menstrual management methods to alleviate the challenges being faced by school-going girls as they argued that these products will tamper with the girl's virginity.

Figure 11: Photographs of a menstrual cup



Of late, there has been a backlash against menstrual products that have negative effects on the environment. However, besides menstrual cups being viewed as a more sustainable alternative for school-going girls, it is argued by Adams (2020) that the misuse of menstrual cups 'can cause pelvic organ prolapse'. Below are some of the comments that oppose that assertion:

“I have been using a cup for over a year now. My regret is not making the shift sooner. It took some getting used to, but what a life changer once I did” (Mary Shongwe).

Machera, (2004) states that female sexuality is seen as something to be controlled and this can be seen through the dichotomy of labelling virgins as good women while non-virgins are regarded immoral and loose women. From the group discussion held with women from the Anglican Church Mothers' Union, there was an uproar from the older women about the use of tampons and menstrual cups as menstrual management methods to alleviate the challenges being faced by school-going girls as they argued that these products will tamper with the girl's virginity.

“Been using mine for years now, I absolutely love mine. More comfortable than some products and more sustainable, I have also introduced the menstrual cup to my teenage daughters and it is working out to be very economic, although I have to closely monitor the sterilization processes to avoid any form of infection that may be linked to it” (Danai Mashonganyika).

“I’m pretty upset that this environmentally friendly system of dealing with periods is being demonized. The cups are great unless they are not used properly” (Caroline Murombedzi).

5.4 Role of Teachers, Mothers, Government and NGOs in Awareness Creation

In many countries, including Zambia, the right to the appropriate conditions for reproductive health is challenged by numerous factors. These include the availability of accurate information, guidance, and support; religion and culture-based gender norms and values; and the impact of poverty (Larme & Stern, 2017). This essentially means that school-going girls require support from all spheres. They need support from all relevant social, economic, legal, cultural and religious spheres in order for them to manage their menstruation and to participate and enjoy their rights to education, dignity and health just to mention a few. This is because of their vulnerability and inability to defend and fend for themselves in the face of the unequal power relations between men and older women who continuously socialize and police them with the predominant idea of pleasing men.

5.4.1 *The Teacher*

Menstrual management education is very important and should be conducted to help young girls to better understand the developmental changes they will be experiencing. This education should be conducted regularly to constantly remind the school-going girls that they are normal and to instill confidence in them so that they will be empowered to adjust, challenge and remove the taboos and myths surrounding menstruation. Although poor sanitation is correlated with absenteeism and dropping-out of school of girls in developing countries, efforts in school sanitation to address this issue have ignored menstrual management in latrine design and construction, as emphasized by Mahon & Fernandes (2010) in Lahme & Ster (2017). There is a need to enhance menstrual issues so as to substantially improve school-going girls’ education, health and wellbeing. Support for this proposition emerged from the research when more than fifty percent of the school-going girls stated that they only knew about menstruation after it had

already happened to them and a huge number of the girls never told anyone about it because they just assumed something was wrong with them and were too ashamed to seek help from their parents or teachers.

Also, there is a lot of misinformation about menstruation in the communities as neither parents nor the schools have appropriate materials to teach school-going pupils about menstruation due to the language barrier. Teachers complain that the *Shona* language is too explicit which they feel makes it difficult to teach sexual and reproductive health topics. Women's experiences have either been misrepresented or are not represented at all due to a lack of language that fully and adequately represents them (Butler, 1990; Stanley & Wise, 2002; Wood, et.al., 2004). Upon inquiring from younger primary school girls what they knew about menstruation, most of them stated that they were told not to play with boys because if they did they would fall pregnant; others were advised never to talk about menstruation as it would bring them bad luck. Some stated that their blood was never to be seen by anyone except themselves as this would result in their being bewitched.

Girls' school experiences are negatively impacted if they are distracted, uncomfortable or unable to participate because of anxiety over menstrual leaking and odour (Manson et al., 2003). Teachers should be educated and trained to disseminate knowledge about menstruation and menstrual hygiene to students. They should also be in a position to offer guidance and counselling to school-going girls so that they do not feel isolated when they encounter shameful and embarrassing moments during menstruation. The teachers should also be equipped with medical aid kits to assist girls who require assistance in terms of emergency menstrual management products so that these girls do not resort to opting out of school in order to go home and comfortably manage their periods.

5.4.2 Mothers

Managing a daughter's menstruation is long-term and intimate work that may require considerable support from a mother (Chou & Lu, 2012). Most mothers pointed out that their support for their school-going girls is hindered because of their failure to provide appropriate menstrual management care products considering their escalating costs which have now become

unaffordable. Hence most mothers preferred that their daughters use cheaper products in an effort to save money. In one discussion, a woman vendor from Areno Shopping Centre emphasised:

“I barely make enough money to buy relish for my family from my sales on a daily basis, hence as a mother, I calculate what is important for my children and I chose to have them sleep on full stomachs. This means that at the rate at which prices are, sanitary pads have ceased to be a priority for me. I have taught my teenage girls to improvise although one major challenge I face is cleanliness in terms of washing the rags clean considering there's no water in the communities.”

Suresh (2010) suggests that there is a need for adolescent girls to have accurate and adequate information about menstruation and its appropriate management. Formal as well as informal channels of communication from mothers, sisters and friends need to be emphasized for the delivery of menstrual hygiene and management information. The home environment is supposed to be a safe haven for school-going girls yet it proves to be yet another challenge for girls due to the silence, myths and negative perceptions around menstruation. Although public health experts have assumed that girls receive pubertal-related guidance from parents or extended family, an increasing body of research suggests that in fact they often learn nothing about menarche before its onset and may even hide the arrival of their first menstrual period for fear of being punished for perceived sexual activity (Sommer & Sahin, 2013). Hence, the role of mothers should be centered on ensuring that young school-going girls are equipped with the necessary and accurate information. Zimbabwe has been hard hit by economic challenges as a result of which most family members have relocated in search of greener pastures. This has destroyed the extended family support structures in which traditionally young girls would be taken to their aunts and grannies for personal hygiene and developmental education. Now all such responsibilities increasingly fall on their mothers. Mothers have to create open relationships with their school-going girls in order to educate them from an early age about menstrual management, hygiene and health issues as well as creating a conducive environment to enable them to move away from harmful cultural practices, beliefs and myths around menstruation.

5.4.3 Government

Zimbabwe ratified CEDAW in 1991 and it considered the women's bill of rights. She is also a signatory to the Maputo Protocol and the SADC Protocol on Gender and Development. Through these instruments, Zimbabwe has obligations to comply with their stipulated regulations and among these is the obligation to eliminate all forms discrimination. Zimbabwe has taken a step in the right direction by subsidizing menstrual products so that every girl and women can afford them. However, this action by Government has not made any impact on the lives of school-going girls as the prices of these products are constantly increasing thus making it very difficult for the girls to access them. In addition, in order for there to be parity in the education system, there is a need for the Government to provide menstrual management care products to all school-going girls, irrespective of their geographical locations.

“In August 2018, the Scottish government made history by being the first in the world to pledge to provide free menstrual products in every school, college and university. They will be available in all toilets, like soap and toilet paper, so all students will have access to period supplies, regardless of financial means or any other barriers to accessing products at home that they may experience. Free menstrual products are also available in Scotland for people from low-income households” (George & Abbott, 2020).

Although schools may have toilets, many are lacking in water and therefore do not meet the basic health and hygiene requirements for educational institutions (Kirk and Sommer, 2006). Without access to adequate facilities in schools, school-going girls continue to face challenges in coping during menstruation periods. Poor sanitation is a major push factor to poor school attendance and efforts should be made to address this issue for social justice to be achieved. This means that it is the responsibility and obligation of the government to ensure that girls' toilets are designed and constructed in a friendly manner as well as to provide adequate resources. Hence the government should provide safe water, proper functioning toilets, private washrooms and menstrual management products as well as include in the education curriculum for both boys and girls menstruation and safe hygiene practices in order to end period poverty. Furthermore, the Government should ensure through the Education Act that the facilities are clean and not a health hazard by providing adequate human resources in government institutions as well as ensuring the

presence of medical personnel at every school and institution to assist school-going girls with their menstrual needs, among other issues.

5.4.4 *Non-Governmental Organisations*

A 360-degree approach for future interventions would help multi-layered community-based education instead of focusing solely on sanitary product access (Bobel, 2019). In as much as there is a need for the provision of menstrual management products to school-going girls, it is not a sustainable measure to address menstrual poverty. However, with the assistance of non-governmental organizations, programmes can be launched to empower school-going girls to make their own reusable pads. This will ensure that the girls move away from the dependency syndrome which often leads to oppression and suppression and move toward increasing autonomy over their own bodies.

Furthermore, non-governmental organizations should come forward to assist in educating school-going girls and boys as well as their communities at large about menstruation, menstrual hygiene, management, diseases related to the reproductive tract due to poor menstrual hygiene as well as appropriate products. Emphasis should be given to the use of reusable sanitary or cloth pads to overcome the economic and disposal problems. Educational television programmes, for instance, drama skits should be used in the same way as they have been in similar interventions to educate communities about circumcision, abortion and contraceptives like condoms (Figure 12).

Figure 12: Photograph of a circumcision notice at Spilhaus Clinic, Harare



5.5 The role of men and boys in Menstrual Hygiene

One of the underlying reasons why menstrual hygiene, health and management issues have been ignored is gender inequality (Mahon et al., 2015). Due to the influence of semi-autonomous social fields women and girls remain subjugated and subordinated, hence, their voices are not heard in decision-making within households, communities, and development programmes. For example, in 2018, Honourable Misihairambwe, who for many years has been lobbying for the provision of sanitary wear to school-going girls, raised a motion in Parliament for the subsidization of sanitary wear and provision of sanitary pads at maternity homes and schools but it was rejected.

“Four months previously a male Minister and Member of Parliament (name withheld) had told her in Parliament that the provisions of sanitary pads to schoolgirls was out of the question as the government could not afford it” (Zenda, 2019).

A welcome move by government, however, is that, through its Ministry of Finance, it has allocated RTG\$200 million of the 2020 Budget towards the provision of sanitary wear to rural school girls as well as suspending customs duty on sanitary wear in an effort to alleviate the menstrual challenges faced by school-going girls (Nyava, 2019).

Men and boys need to support women and girls in order to effectively facilitate the management of menstruation across different social domains including households, communities, schools and even the workplace. This support can be achieved by being loving, understanding and accommodating husbands, fathers, brothers, uncles and sons. Sadly, however, one of the study's emerging issues was that school-going girls feared being raped once their father, uncles or other male figures in their communities realized they were menstruating because menstruation is regarded as a symbol that the girls have matured into womanhood.

Bailey (1993) claims that although the experience of menstruation is unique to women, it is an issue that should be understood by both men and women, boys and girls in order to assist in alleviating the challenges faced by school-going girls as well as understanding that certain kinds of reactions impact negatively upon girls' experiences. Thus, there is a need for men and boys to

be sensitized and educated about menstruation so that social justice can be achieved by breaking the myths, taboos and perceptions around menstruation as well as eradicating discrimination against the girls in order for school-going girls to realize equal opportunities as their male counterparts. Furthermore, educating both boys and girls about this deeply personal and sensitive issue helps to reduce the risk and extent of humiliation experienced by the girls when they are going through different menstrual symptoms.

“Menstrual hygiene research and programmes highlight the challenges girls face at school and the need for appropriate water and sanitation facilities and menstrual hygiene materials, pragmatic information, and supportive staff and peers. Interventions that have addressed these needs primarily target girl students and female teachers. Yet one of the critical challenges girls face at school in relation to menstruation is the fear of being teased by boys, which impacts on their self-esteem” (Mahon et al., 2015).

Therefore, boys should be educated about menstruation as they are the instigators of bullying in schools. In an interview with one male participant, he admitted:

“I went to boarding school from form one up to six. I do not remember many girls from my class whether beautiful, smart or sporty, but I remember vividly a specific girl who was in my form three class because she spoiled her uniform during one of her menstrual periods and back then, I used that experience to tease her until the time I left high school.”

Involving men and boys in menstruation discussions helps to empower them with the information they need in order to clear up misconceptions they have about menstrual blood. Open, well-grounded and informed discussions lead to the perhaps the most important quality of all and this is empathy for their female counterparts. Since it is fathers who are more often than not the breadwinners in families, it is also important for them to understand and make provision for funds to be available to procure menstrual management products for their school-going daughters.

5.6 Conclusion

One of the most important issues I realized during my research was that lack of access to an adequate supply of menstrual management products has diverse ripple effects on school-going

girls. It is heartening to note that statistics show that in spite of their menstrual challenges, girls are still out-performing boys academically. It is even more encouraging that with improved access to menstrual management products and facilities, girls are likely to perform even better. In order to make this promise a reality such improvements should include the provision or access to sufficient supplies of menstrual management products, adequate facilities, accurate information and education, laws to provide, protect and improve the rights of girls to menstrual equity, as well as social support from family, and communities to ensure a comfortable menstrual experience.

CHAPTER SIX

6.0 DISCUSSION

6.1 Introduction

This chapter will discuss the findings based on the data captured in the collection processes in Kuwadzana with the different groups I targeted who include school-going girls and boys, government officials and church women, a Member of Parliament, community men and non-governmental organization representatives who were interviewed and took part in the focus group discussions.

6.2 Discussion

The UNFPA Report (2019) observes that some restrictions in relation to menstruation are cultural, such as the prohibition against handling food or entering religious spaces, or the requirement that women and girls isolate themselves. During my research, it was reported that menstruating women and girls are indeed separated and isolated from normal spaces and activities during their menstrual period. For example, in an interview I held with one woman from the white garment church, menstruating women are not allowed to attend church and if they choose to do so, they are required to dress differently and sit apart from the general congregation. She claimed that this is done to save women from the shame and embarrassment of soiling their clothes. Menstrual hygiene practices are affected by cultural norms, parental influence, personal preferences, economic status, and socio-economic pressures. Menstrual beliefs refer to misconceptions and attitudes towards menstruation within a given culture or religion (Kaur, et al, 2018). In other cultures, menstruating women are not allowed to take up their usual chores, like cooking for the family or even sleeping in their matrimonial bed. Several women are killed every year in Nepal because of "*chhaupadi*", the practice of exiling women from their homes to bare-bones huts or sheds during menstruation because they are believed to be "*unclean*" (Vaughn, 2019).

6.2.1 *Interviews with Government and Council Officials*

An official from the Ministry of Education whom I interviewed pointed out that the government school facilities are inadequate to cater for the menstruating girls. The school ablutions blocks

should have showers to enable the girls to wash themselves when they have menstrual accidents so that they do not have to miss their classes and leave to go home in order to do so. Figure 13 is a photograph of the girls' ablutions block.

Figure 13: Girls ablutions block with outside water tank



In an attempt to address sanitation challenges in the school, the City Council has drilled some boreholes to alleviate its water shortages. However, these boreholes are not strategically positioned so as to alleviate the problems faced by school-going girls managing their menstruation. Their tanks are placed outside in a public area and do not pump water into the toilets. Therefore water cannot be accessed from the sinks in the ablutions block which means that the girls have to wash themselves at the tap outside the block. This therefore infringes their right to dignity as they cannot exercise privacy if they wish to wash themselves.

In addition, the sinks are not critically positioned as well they are situated right at the doorway of the ablutions block where the girls are visible to people walking on the pathways outside. In addition to having water available in school ablutions, the toilets should be designed and built in a girl friendly manner. Each private cubicle should be large enough to contain a private sink for the user to wash themselves, private parts and their hands, change their sanitary wear and clean

their soiled uniforms. For example, when the girls are using menstrual cups as a menstrual management method they have to be able to empty the collected blood and clean themselves and reinsert their cup in private taking into consideration the cultural myths and beliefs surrounding menstruation and menstrual blood exposure. Disposal bins should also be placed in the cubicles so that one can dispose of their used sanitary wear with dignity and in private without one being humiliated if forced to do so in public. This is to accommodate that girls are socialized at the outset that their menstrual blood is sacred and should never be seen by anyone except themselves. The communal sinks which are currently in place make it impossible for the girls to clean themselves during menstruation without anyone noticing them.

6.2.2 Meeting with Anglican Church Mothers' Union Members

“Attempts to control women’s sexuality in Africa, through the use of women held to embody what is best about the ‘nations’ that were being built after colonialism had been overthrown, remain problematic. Women’s dress, their movements, education and health are critical areas of concern because they are more strictly policed than those of men, who have adopted Western dress such as suits, long-sleeved shirts, ties and closed shoes, apparel that is inappropriate in hot, humid countries with limited water for washing clothes. The contestations around women’s sexuality have often had to be couched in terms of women’s health and reproductive rights, rather than the right of women to express, shape and explore desire and sexuality on the same terms as men.”

Gaidzanwa (2010)

From the group discussion with the church women, it was noted that the older women were quick to dismiss the use of tampons and menstrual cups claiming that the products would break the young girls’ virginity which is meant to be preserved for marriage. This resulted in the other women present becoming timid and fearful about sharing their views and opinions about the products. Most of the women who took part in the focus group discussion were housewives who depended mainly on their spouses for financial support. After taking that into consideration, I then asked the women to give their opinion about involving men in the menstruation discussions since they are the breadwinners who provide the funds to purchase menstrual management care products. There was some resistance to this idea from the women as they felt that menstruation

was a women's issue. Thus, older women feel that menstruation is an area over which they have to take control and impose themselves as leaders of their younger counterparts to ensure that their opinions prevail. Male inclusion may dilute or dominate this power.

6.2.3 Meeting with White Garment Church Women

While there is a great deal of publicity about circumcision and other aspects of a boy child's developmental cycle, this is not the case with campaigns to educate women and girls on menstrual health and management issues on account of prohibitory religious and cultural beliefs and practices. It has been found Zimbabwe that both rural and urban schools treat the issue of menstruation similarly and do not consider that it deserves special attention (Stewart, 2004). In a discussion with three women from the white garment church in Kuwadzana, I found that there are many myths and great stigma surrounding menstruation. For example, when women in the church are menstruating they wear a different uniform and instead of a long they wear a shorter head dress and they are not allowed to congregate with other members. They are not allowed to sleep in their matrimonial beds or cook food for their families, as they are regarded as unclean. They are required to stay in isolation until they have finished menstruating after which they may resume their normal chores and duties and this applies to young girls as well. Such practices suppress women and restrict them from participating in and taking up leadership roles in family, community and church life. It also stigmatizes the younger girls.

An emerging issue of the research arose when an informant subtly informed me that the practice of isolation alerts the leaders and male members of the sect which girls have matured and are ripe for marriage leading to their dropping out of school. Another informant pointed out that the reason for preventing menstruating women from congregating with everyone else was to eliminate their disturbing other members by having to constantly remove themselves to go and attend to their menstrual needs. It also saved embarrassing non-menstruating women and girls especially when those who were menstruating soiled their clothing. Furthermore, women are not allowed to attend church services when they are menstruation because there are no ablution facilities for them to change and wash in private.

6.2.4 Meeting with Men at the Market

“Barriers to men’s involvement include lack of experience with discussing gender issues, a lack of opportunities for men and boys to engage in open discussion, and a concern among men and boys about how they will be perceived by their peers. Men fear being derided and ridiculed by other men, they feel pressured by other men to conform to masculine stereotypes. Fear of criticism silences many men. Therefore, the lack of involvement of both formal and informal male leaders has a significant impact on the involvement of men.”

Buscher and Quick (2004).

My frantic efforts to contact and set up appointments with two male Members of Parliament to discuss their views on menstrual management issues proved fruitless. This inclined me to the opinion that men are ignorant and not interested in knowing about issues surrounding menstruation. They are not keen to learn about it or understand the issues surrounding it as it is regarded as a women’s problem and does not affect them. I met a group of men from Areno Shopping Centre who initially showed no concern but after a while started to show an interest in the matter. After warming up they agreed that they did try to provide sanitary wear for their daughters and wives although they did not give it specifically for that purpose but that it would be purchased from money used to buy groceries. When I asked about whether they were aware that menstruation is a biological issue, they said that they knew and shared that they would definitely be concerned if they learnt that their daughters were not menstruating by which they understood that menstruation is a very important aspect of a woman’s life. One of the gentlemen pointed out:

“My daughter would get sick a lot and many times would miss school, and my wife took her to the clinic where she was referred to a Specialist who prescribed some family planning pills and I freaked. The Doctor then explained that there was a need to balance her hormones and since then she is much better.”

It is a blessing to have a girl who matures into a woman. Before they can give birth women have to experience menstruation, yet this process is stigmatized and labelled unclean. When girls do not experience menstruation for one reason or another it is mainly fathers who worry that their daughters will not be able to marry because they cannot bear children and therefore they, the

fathers, will not receive any bride price for them. Despite their vested interest in their daughters, fathers are not interested in learning about menstruation. I am of the view that this is a cultural block and that it is time to move away from these myths and beliefs and start to celebrate and embrace womanhood. This initiative must start with women before we can begin to involve men.

Among the group were fathers who are taking care of their children. These fathers indicated that because they have moved away from the concept of the extended family (involving aunts and uncles who teach children about developmental issues), it has become their responsibility to look after their children in the best way possible. These fathers stepped up to the plate and were prepared to talk about menstruation and other reproductive health issues in order to assist their daughters. From the discussions held, it was pointed out that because of religious and cultural beliefs, men are not supposed to be involved in menstruation issues and the majority of them did not have an explanation as to why this was so apart from simply repeating that menstruation is a disgusting process.

6.2.5 Meeting with Hon. M. Mushayi – Kuwadzana MP

In my interview with Member of Parliament for Kuwadzana, the Honorable M. Mushayi (Figure 14), she pointed out that there have been no laws on menstrual equity in Zimbabwe until recently with the Education Amendment Bill which is meant to include access to free sanitary wear to all school-going rural girls starting in 2020 according to the budget allocation of RTG\$200 million which was announced by the Minister of Finance.

Figure 14: Photograph of my interview with Hon. M. Mushayi (MP - Kuwadzana)



A couple of challenges were raised and these include bureaucracy in Zimbabwe which may result in delays in the implementation of the project. In addition, the budget is in local currency and with hyperinflation the funds may become devalued and have less impact in alleviating menstrual poverty. However, the Education Act does not talk about menstruation, it only talks about provisions. Furthermore, there have been huge debates about reproductive health textbooks that were argued to be too sexually explicit to be used in the teaching of menstrual health. The main problem is that since culture considers menstruation a strictly taboo subject there is not only huge resistance against embracing it as a subject that should be taught in schools at all, but also there are serious questions as to how it should be taught.

6.2.6 Group Discussion with School-going Girls in Kuwadzana

“Gender inequality can also impact women and girls through the internalization of negative role descriptions applied to them (incompetent, weak, powerless, etc). They may start to believe that they really do possess those negative attributes and act according to the behaviours they deem society prescribes.”

Buscher and Quick (2004)

Some students complained that they normally experience some symptoms before or during their menstruation period including dysmenorrhea. The danger is that students who do not understand their condition may end up teasing girls who are menstruating. To address this plight, schools should have a trained nurse aid who can administer medication to alleviate such symptoms during school hours. This can help prevent girls from having to miss classes which may result in their poor school performance. The teachers from the different schools mentioned that when these girls start their menstrual cycles, their academic and co-curricular activities are negatively affected but they tend to cope over the course of time despite persistent challenges. Notably, many girls tend to face some challenges prior to and during their menstruation. Some of the girls suffer from dysmenorrhea, while others become withdrawn. A sizeable number choose not to attend school because they do not have access to suitable menstrual management products and this therefore undermines their performance in school.

Unchallenged cultures of male dominance lead to female subordination and even exclusion (Buscher & Quick, 2004). Although Zimbabwe is a signatory to regional and international human rights instruments, we should also consider the fact that we come from a system in which menstruation is regarded as taboo. In other words, culturally, no discussion should ever take place about menstruation and girls are supposed to manage it on their own. Such differentiation between the sexes leaves boys uninvolved in the issue which means they do not understand the experiences of girls when they menstruate and therefore when girls have accidents, it is the boys who are first to tease and make fun of them which is intimidating and causes girls to miss school and stay home.

Junior school girls are not mature enough when they start their menstruation and are therefore not able to clean themselves up properly. There is a need to provide these girls with extensive education and information on how to manage their menstruation both in school and at home. This means there is a need to engage both their parents and teachers in order to alleviate their menstrual challenges.

6.2.7 Meeting with Non-Governmental Organization Representatives

The Zimbabwe National Family Planning Services sometimes provide sanitary wear to rural schools but it was pointed out that the programme is not sustainable given the country's current poor economic situation, as well as the fact that sanitary wear is quite expensive. Furthermore, it was stated that the girls are not themselves at liberty to collect the free menstrual management care products that are provided due to cultural beliefs and stigmatization. One organization has a Parent-Child Communication programme aimed at teaching parents how to communicate with their children about reproductive health issues, including menstruation. Under this programme, parents are advised to break the silence on topics that are considered taboo, since societies have moved away from the concept of extended families to nuclear family systems in which it has become the responsibility of parents to provide truthful and honest information. The programme is also designed to avoid situations in which children will seek information from people who will take advantage of or abuse them.

6.3 Conclusion

To summarise, of my five assumptions one was confirmed. Two of the assumptions were challenged and the remaining two were partly confirmed and partly challenged. The reason was that due to the stigma and negative perception surrounding menstruation, the school-going girls could not disclose whether they would absent themselves from school to take care of their menstruation. However, the teachers confirmed that the girls always report sick and miss school for between a day to five days at a time although they do not clearly state their reason for doing so; but that due to their recurring absenteeism it is obvious that they miss school which confirms the assumption that the girls miss school to manage their menstrual periods. In addition, one of the issues that emerged during the research was the primary school girls' mention of their concern that talking about menstruation, especially to males, would exposed them to abuse and rape. The girls confided that because of myths and beliefs in their culture they are not at liberty to discuss their menstrual status as they have been cautioned that once someone is aware that they are menstruating they are at an increased risk of being raped or are vulnerable to being bewitched by people who want to cure themselves of sexually transmitted diseases such as HIV.

CHAPTER SEVEN

7.0 CONCLUSION AND RECOMMENDATIONS

7.1 Introduction

In this chapter, I make recommendations to address the gaps and loop-holes in the systems. The preceding chapters started out by setting out the scene and context in which the research was carried out on the impact of menstrual management and the experiences of school-going girls of low socio-economic status in Kuwadzana. The theoretical approaches, feminist theories and methodological framework were also discussed leading to the presentation of the findings as uncovered during the data collection exercise.

7.2 Recommendations

- Raising awareness at both local and international level on menstrual health management will help to boost confidence in women and girls through accurate and pragmatic information dissemination. This can only be achieved by incorporating this issue into various legal instruments and acknowledging it as a basic human right.
- As stated in CEDAW (Articles 5, 2(f) and 24), there is a need for the Government of Zimbabwe to address cultural and religious issues to eradicate gender stereotypes in relation to menstrual health and management methods. Despite the government having reduced tax on menstrual management products, the reduction has not made any impact on the girl child as the product is still expensive and beyond the reach of many. However, it is recommended that Government should provide sanitary wear to **ALL** school-going girls, whether they live in rural or urban areas. The Government should work in collaboration with non-governmental organisations to put in place structures to ensure that, like condoms, menstrual management care products are available in all public places, such as public bathrooms, doctors' consultation rooms and office reception areas.
- There is also a need to move away from the idea that menstruation is a health issue and come up with a policy that states that provision for the management of menstruation is a human right. Therefore, the Government of Zimbabwe needs to incorporate menstrual management issues into its legislation by adding a clause in section 76 of the

Constitution and similar clauses in the Public Health and the Education Acts which clearly provide that menstrual management health, care and hygiene is a separate and complete human right, thus bridging the gap between law and human rights.

- Provision should be made to educate both boys and girls about menstruation and this should be made compulsory instead of engaging girls alone because it is boys who are the major instigators of humiliation through the bullying, laughing and name-calling of girls who soil their uniforms during their menses. Thus, boys should be involved in all menstrual management education in order to instil in them a level of understanding and empathy for girls which will help to eliminate humiliating experiences for girls and transform the school environment into a better place for school-going girls as well as boys.
- Menstrual Education should commence as early as primary school before the girls start their menses so that when it occurs, the girls are better prepared and equipped with adequate information as to what is happening to their bodies, so that they know how to deal with their situation and where to go to receive help in case of emergencies.
- There should be more media coverage, pamphlet distribution and awareness campaigns on menstruation health, management and products just as there are campaigns on circumcision, sex education, abortion, condom usage and other reproductive health issues. There is also a need to educate people in order to demystify menstruation and for menstrual equity to take place, this information should be included in public education.
- There is a need to engage in more menstrual health and management research in order to gather statistics on girls who are menstruating so as to identify the age groups that are most affected. This will also provide information on how to create educational materials that may be easily understood by all affected girls in order to improve their lives and inform and involve boys on how to embrace menstruation with a positive mentality.
- Mobile clinics should be made available in communities similar to the HIV testing centers to provide free education on menstrual management to young children, girls, boys and parents.

- All schools should have a trained health practitioner, as required by the Education Act, to always be on stand-by to provide school-going girls with all the assistance and support they need to assist them in effectively managing their menstruation and to dispense appropriate medication to those girls who experience menstrual symptoms so that they do not miss school to manage their periods at home.

7.3 Conclusion

By and large, this is an old topic that needs constant revisiting because of the changes that continue to take place. While some positive changes have occurred so far, there is still much room for improvement to address areas of inadequacy as well as class generational issues.

Despite government bureaucracy, I managed to gather the information that I required which showed that in spite of the existence of enabling laws and a budget of RTG\$200 million to provide sanitary products to rural school-going girls, this initiative has not yet been implemented.

Although girls are missing school in order to properly manage their menstruation, reports have indicated that they are performing well academically and even better than their male counterparts, although it is expected that they could perform even better if their menstrual needs were adequately addressed.

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Appendices

Appendix 1: Permission for the research from the Ministry of Women's Affairs

All communications should be addressed to **The Secretary**

Telephone: 2-708398, 2-735188,
2-790932
www.women.gov.zw


Zimbabwe

Ministry of Women Affairs, Community
Small and Medium Enterprises
Development
P. Bag 7726 Causeway
Harare

B/ 14/1

08 November 2019

Ms Faith Madziwa
Southern and Eastern African Regional Centre for Women's Law
University of Zimbabwe
Mount Pleasant
Harare, Zimbabwe


Attention: Professor J.E. Stewart

RESEARCH PERMISSION ON THE IMPACT OF MENSTRUAL MANAGEMENT AND THE EXPERIENCES OF SCHOOL GOING GIRLS OF LOW SOCIO-ECONOMIC STATUS: A CASE OF KUWADZA: CHIPO FAITH MADZIWA: MASTERS IN WOMEN'S SOCIO-LEGAL STUDIES LAW STUDENT: SOUTHERN AND EASTERN AFRICAN REGIONAL CENTRE FOR WOMEN'S LAW- UNIVERSITY OF ZIMBABWE

I refer to your minute dated 16 October 2019 wherein you requested permission to conduct a research in the Ministry of Women Affairs, Community, Small and Medium Enterprises Development on **The Impact of Menstrual Management and The Experience of School Going Girls of Low Socio-Economic Status: A Case Of Kuwadzana.**

Accordingly, permission is hereby granted to carry out the research.

Please be advised that, the approval is granted on the condition that the information obtained from the Ministry shall be strictly for academic purposes only and that you are required to submit a copy of your final thesis to the Ministry for record keeping.


M. Mukurakudya
Acting Director Human Resources

For: Secretary for Women Affairs, Community, Small and Medium Enterprises Development

Cc: Director, SEARCWL-U.Z.

Min. of Women Affairs, Community,
Small & Medium Enterprises Dev.
Director Human Resources

08 NOV 2019

P. BAG 7726, CAUSEWAY
HARARE, ZIMBABWE

Appendix 2: Permission for the research from the Director of Health Services, City of Harare



CITY OF HARARE

All correspondence to be addressed to the
DIRECTOR OF HEALTH SERVICES

DIRECTOR OF HEALTH SERVICES
Rowan Martin Building, Civic Centre,
Pennefather Avenue, Off Rotten Row,
Harare, Zimbabwe.

P.O Box 596
Telephone: +263 (242)753326
753330/1/2
Fax: +263 (242) 752093

Director of Health Services
DR PROSPER CHONZI
MBChB, MPH, MBA

Ref: _____
Your Ref: _____

11 November 2019

Chipo Faith Madziwa
11 Westview Mansions
Marlborough
HARARE

Dear Sir/Madam

RE: REQUEST FOR PERMISSION TO CONDUCT A RESEARCH

I acknowledge receipt of your letter in connection with the above

Permission has been granted for you to carry out a research entitled "*The impact of menstrual management and the experiences of school going girls of low socio-economic status* a case study of Kuwadzana.

Thank you.

Yours faithfully



DIRECTOR OF HEALTH SERVICES
IM/rm

Harare to achieve a WORLD CLASS CITY STATUS by 2025

Appendix 3: Permission for the research from the Ministry of Education

All communications should be addressed to
"The Secretary for Primary and Secondary
Education
Telephone: 794895/795211
Telegraphic address: "EDUCATION"
Fax: 794505



Reference: C/426/3 Hre
Ministry of Primary and
Secondary Education
P.O. Box CY 121
Causeway
Harare

06 November 2019

Chipo F. Madziwa
30 Mt. pleasant Drive
P.O. Box MP 167
Mount Pleasant
Harare

Re: PERMISSION TO VISIT SCHOOLS IN HARARE PROVINCE FOR RESEARCH PURPOSES: WARREN PARK/ MABELREIGN DISTRICT: KUWADZANA 1 AND KUWADZANA 3 PRIMARY SCHOOLS, KUWADZANA 1 AND KUWADZANA 2 HIGH SCHOOLS.

Reference is made to your application to visit schools to collect data for research purposes at the above-mentioned school in Harare Province on the research titled:

" THE IMPACT OF MENSTRUAL MANAGEMENT AND THE EXPERIENCES OF SCHOOL GOING GIRLS OF LOW SOCIO-ECONOMIC STATUS: A CASE STUDY OF KUWADZANA."

Permission is hereby granted. However, you are required to liaise with the Provincial Education Director Harare Province, who is responsible for the schools which you want to involve in your research. You should ensure that your research work does not disrupt the normal operations of the schools. Where students are involved, parental consent is required.

You are also required to provide a copy of your **final report to the Secretary** for Primary and Secondary Education.

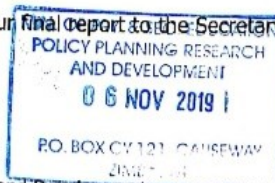
A handwritten signature in blue ink, appearing to read 'I.D. Chishumbah'.

I.D. Chishumbah

Education Research Officer: Research, Innovation and Development

For: **SECRETARY FOR PRIMARY AND SECONDARY EDUCATION**

Cc: P.E.D - Harare



Appendix 4: Permission for the research from the Ministry of Education (Harare District)

All communications should be addressed to
"The Provincial Education Director"

Telephone : 339334
E-mail : hararemetropolitanprovince@gmail.com



Ministry of Primary and Secondary Education
Harare Provincial Education Office
P. O. Box CY 1343
Causeway
Zimbabwe

21 NOVEMBER 2019

CHIPO F. MADZIWA
30 MT PLEASANT DRIVE
P. O. BOX MP 167
MT PLEASANT HARARE

RE: PERMISSION TO CARRY OUT RESEARCH IN HARARE METROPOLITAN PROVINCE: WARREN PARK / MABELREIGN DISTRICT: KUWADZANA 1 AND KUWADZANA 3 PRIMARY SCHOOLS, KUWADZANA 1 AND KUWADZANA 2 HIGH SCHOOLS

Reference is made to a letter dated 06 NOVEMBER 2019, from the Secretary for Ministry of Primary and Secondary Education granting you permission to carry out research in Harare Metropolitan Province on the research title:

THE IMPACT OF MENSTRUAL MANAGEMENT AND THE EXPERIENCES OF SCHOOL GOING GIRLS OF LOW SOCIO-ECONOMIC STATUS: A CASE STUDY OF KUWADZANA

Please be advised that the Provincial Education Director grants you authority to carry out your research on the above topic. You are required to supply Provincial Office with a copy of your research findings.

MIN. OF PRY. & SEC. EDUCATION
DISCIPLINE SECTION
HARARE PROVINCE
21 NOV 2019
TEL: 0413923117/798144

FOR: PROVINCIAL EDUCATION DIRECTOR
HARARE METROPOLITAN PROVINCE

Recommended
Please
[Signature]

MINISTRY OF PRIMARY AND SECONDARY EDUCATION
WARREN PARK/MABELREIGN DISTRICT
21 NOV 2019
HARARE PROVINCE
P. O. BOX CY 1343, CAUSEWAY
HARARE