Access to products
The country suffers from poverty so access to menstrual products is limited and pricy. In fact, 88% of women and girls are using disposable products in urban areas, versus 68% in rural areas according to WHO and UNICEF. Therefore, they resort to unsafe protections such as cloths from old clothes or cow dung covered with cloth - especially in rural areas. A SNV Zimbabwe study shows that 72% of girls going to school can’t afford disposable pads. There is also a high demand for underwear, because not all women and girls have access to them. 10% of the girls had no underwear which meant they would rather stay at home than face embarrassment at school – indicates study in Masvingo district.

Formative Research on Menstrual Hygiene Management Final Report, December 2019 shows that disposable sanitary pads are commonly used and preferred for sanitary hygiene as they are considered by the majority of girls as highly effective (59.4%). The cost however has become prohibitive with many relying on less user friendly and unacceptable sanitary materials such as old pieces of cloth (3.3% urban, 11.7% rural), tissue paper (0.1% urban and 0.4% rural) and cotton wool.(0.6% urban, 1.7% rural areas).

Access to WASH facilities, including schools
In schools, 30% of the girls indicated water challenges in terms of sanitary facilities. 95% of rural schools don’t have MHM waste disposal facilities.

An assessment of the availability of water and soap in the toilet/washroom in urban schools showed that 61.4% have water only, 25% water and soap and 13.7% with neither “water only” nor “water and soap”. The scenario is reversed in rural areas where 22.6% have water only, 7.1% have water and soap while 70.3% have neither water nor water and soap (Unicef Zimbabwe, 2020).

School Absenteeism
Due to period stigma and low access to menstrual products and facilities, 41% of schools report that girls miss out school because of menstruation.
**Access to education and information**

Over 60% of girls in school in Zimbabwe have received some basic MHM information (Unicef Zimbabwe, 2020), with the majority of them saying they received it before menarche i.e. (95.6% in urban areas and 88.9% in rural areas). Mothers and teachers are the major sources of this information. However, more than 50% of the girls in urban (68.2%) and rural (66.9%) areas felt that mothers should be the prime providers of MHM education before menarche than the teachers (19.7% in urban and rural 14.9%). While girls receive information on menstruation, the information provided was cited as inadequate. Learner-targeted information education and communication materials on MHM are generally not available for girls in and out of school (76.3%).

**Stigma & Taboo**

In Zimbabwe, there are many myths around menstruation. It is believed that girls with a heavy flow might suffer from a sexually transmitted infections. Moreover, if the period starts at an early age it is commonly believed that it was caused by sexual intercourse. Therefore, women and girls are supposed to hide the fact they are menstruating and hide products from men of their family, including their father or brother.

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**MHH POLICY LANDSCAPE**

**MHH policies**

Through its allocation of ZWL $1.23 billion in the 2022 national budget, the government is this year targeting to reach 300,000 school girls with sanitary wear and underwear. The project is already being rolled out, although its implementation is not being properly communicated to stakeholders to ensure accountability and transparency.

**Policies including MHH**

- The Education Amendment Act was enacted on 2 March 2020. Education Amendment Act. In March 2020, the Parliament obligates the state to provide adequate sanitary facilities for girls in schools.
- In the National Development Strategy, a five year blueprint issued in November 2020, Section 791 highlights the need to reduce extreme poverty and improve access to social services by providing free menstrual care products to female learners in schools.
- Both the Sanitation and Hygiene Policy (2017) and the Zimbabwe School Health Policy (2018) only mention MHM briefly to be addressed for school facilities but lack the details. - The Constitution of Zimbabwe obligates the Government of Zimbabwe to ensure the rights of women and girls are upheld.
What's next?
There is a lack of comprehensive MHM policies regarding access to MHM education in schools, therefore difficulty of access to information to good MHH practices to adopt. There is also a lack of policies transparency.

Key Government Actors
- Ministry of Health and Child Care - and subsidize the Zimbabwe National Family Planning Council
- Ministry of Primary and Secondary Education
- Ministry of Women Affairs, Community Small and Medium Enterprises Development
- Ministry of Local Government, Public Works and National Housing
- Ministry of Public Service, Labor and Social Welfare

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(3) https://periodtax.org/

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