

WHITE PAPER/POLICY BRIEF

PARLIAMENTARY FORUM FOR MENSTRUAL HEALTH AND HYGIENE IN UGANDA

EXECUTIVE SUMMARY

Menstrual health and hygiene (MHH) is a critical yet under-prioritised development issue in Uganda, directly affecting education, gender equality, health, and dignity. Evidence shows that up to 50% of girls miss school during menstruation due to lack of menstrual products, while 70% use unhygienic materials to manage their periods. Additionally, about 28% of girls report missing school due to menstrual-related challenges, contributing to poor educational outcomes and increased dropout risk.

Despite policy commitments under SDGs 3, 4, 5, and 6, gaps in implementation, WASH infrastructure, affordability of products, and stigma continue to hinder progress. This brief calls for the establishment and strengthening of a Parliamentary Forum on Menstrual Health and Hygiene to drive coordination, accountability, and sustained investment in menstrual health.

BACKGROUND AND CONTEXT

Menstrual health is a cross-cutting issue linked to education, health, gender equality, and water and sanitation. In Uganda, girls face multiple barriers to managing menstruation safely and with dignity, including: High cost and limited access to menstrual products, Inadequate WASH facilities in schools, Cultural stigma and silence around menstruation, and weak integration of menstrual health into national planning and budgets

These challenges contribute to absenteeism, reduced participation in education, and long-term gender inequality.

Key Statistics (Uganda):

- 50% of girls miss school during menstruation due to lack of sanitary products
- 70% of girls use unhygienic materials for menstrual management
- 28% of girls miss school due to menstrual-related issues
- Up to 11% of school days are lost annually due to menstruation in some settings

Linkages to Sustainable Development Goals

SDG4 – Quality Education

- By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and Goal-4 effective learning outcomes
- By 2030, ensure that all girls and boys have access to quality early childhood development, care and preprimary education so that they are ready for primary education

- By 2030, ensure equal access for all women and men to affordable and quality technical, vocational and tertiary education, including university
- By 2030, substantially increase the number of youth and adults who have relevant skills, including technical and vocational skills, for employment, decent jobs and entrepreneurship

SDG5 – Gender Equality

- End all forms of discrimination against all women and girls everywhere
- Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation
- Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation

SDG6 Clean Water & Sanitation

- By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations
- By 2030, improve water quality by reducing pollution, eliminating dumping and minimising the release of hazardous chemicals and materials, halving the proportion of untreated wastewater and substantially increasing recycling and safe reuse globally
- By 2030, substantially increase water-use efficiency across all sectors and ensure sustainable withdrawals and supply of freshwater to address water scarcity and substantially reduce the number of people suffering from water scarcity

SDG2 Good Health & Well-being

Good health is essential to sustainable development and the 2030 Agenda reflects the complexity and interconnectedness of the two. It takes into account widening economic and social inequalities, rapid urbanization, threats to the climate and the environment, the continuing burden of HIV and other infectious diseases, and emerging challenges such as noncommunicable diseases.

- By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes. The need and opportunity for the digital health care ecosystem are premised on the demand and supply gap in achieving the Sustainable Development Goal „Good Healthcare and Well Being“ (SDG Goal 3). In the assessment of India’s achievement of SDG 3, it scores 58.8 out of 100 2 , pointing towards the lack of access to adequate health care services. This has specifically come to light in facing the current pandemic wherein we are increasingly realising shortages in medical and nursing staff (doctor-population ratio of 1:1404, WHO recommends 1:1000), 3 inadequate healthcare infrastructure (0.55 beds per 1000 population as per the national average, WHO recommends 5 beds per 1000 population) 4 and shortage of medical supplies.

KEY CHALLENGES AND GAPS

- Limited Access and Period Poverty
- Inadequate WASH Infrastructure
- Persistent Stigma and Cultural Barriers
- Weak Policy Implementation and Coordination
- Limited Data and Accountability Systems

POLICY OPPORTUNITIES

The establishment of a Parliamentary Forum on Menstrual Health and Hygiene in Uganda presents a strategic opportunity to:

- Elevate menstrual health as a national development priority
- Strengthen cross-sector coordination (Health, Education, Gender, WASH)
- Improve oversight and accountability of government commitments
- Mobilize domestic and external financing for MHH programmes

Key Assessments

Access and Adoption: There always have been major concerns regarding the reach of the public health care system in India. This is specifically true for rural areas, as these regions face a shortage of around 37 per cent of doctors in primary healthcare (including vacant positions and shortfalls) as of March 2019.¹⁵ There are more shortages in specialised categories at the level of Community Health Centres (CHC)- physicians (85.7 per cent) and paediatricians (82.6 per cent)¹⁶. To mitigate these challenges, the government had envisioned several initiatives to reach remote areas with unequal access to healthcare. However, these have not grown in scale.

Privacy and Data Protection: The government has taken several initiatives to integrate and create a centralised repository of health data through Electronic Health Records (EHRs), the 27 Strategy for National Health Stack, and the NDHB, to use data for better tracking and efficiency, and for develop Artificial Intelligence tools for diagnostics. Materialising these initiatives has become crucial now, considering the relevance of data in epidemiological surveillance and contact tracing to mitigate the effects of the pandemic. Simultaneously, privacy concerns regarding data of infected and quarantined people being made public by some of the state governments and risks of surveillance due to lack of apt privacy protocols of the Arogya Setu app launched by the government have increased.

Recommendations

1. **Strengthen Policy Integration** - Menstrual health should be included across education, health, gender, and WASH policies, with dedicated government budget lines to ensure consistent funding and implementation.

2. Improve Access to Menstrual Products - Girls and women should have affordable and reliable access to menstrual products through government support, while also promoting local production and reusable options.

3. Invest in WASH Infrastructure - Schools and public spaces need safe, private, and gender-responsive toilets with water, hygiene facilities, and proper disposal systems for menstrual waste.

4. Address Stigma through Education - Menstrual health education should be included in school curricula, and community awareness efforts should be strengthened to challenge myths and reduce stigma.

5. Strengthen Data and Accountability - Countries should develop clear indicators and monitoring systems to track menstrual health progress and ensure policies are effectively implemented.

6. Enhance Coordination Mechanisms - Stronger coordination is needed among government, civil society, and partners to ensure aligned, efficient, and effective menstrual health programming.

CONCLUSION

Menstrual health is not only a health issue it is a matter of dignity, rights, education, and equality. Addressing it requires strong political leadership, coordinated action, and sustained investment. The Parliamentary Forum on Menstrual Health and Hygiene has a critical role in driving a unified national response that ensures no girl is left behind due to her period.

References

- Ministry of Education and Sports (Uganda) – MHH data reports
- UNICEF Uganda – Menstrual Hygiene Management programming reports
- UNFPA Uganda – SRHR and adolescent health reports
- Sustainable Development Goals (United Nations, 2030 Agenda)
- NGO and research studies on menstrual health in Uganda