

**CHALLENGES TO MENSTRUAL HYGIENE MANAGEMENT
AMONG ADULT FEMALE SALES PERSONNEL IN TEXTILE
SHOWROOMS OF URBAN PATHANAMTHITTA DISTRICT,
KERALA**

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DECLARATION

I hereby declare that this dissertation titled “Challenges to menstrual hygiene management among adult female sales personnel in textile showrooms of urban Pathanamthitta District, Kerala” is the bonafide record of my original research. It has not been submitted to any other University or Institution for the award of any degree or diploma. Information derived from the published or unpublished work of others has been duly acknowledged in the text.

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CERTIFICATE

Certified that the dissertation titled “Challenges to menstrual hygiene management among adult female sales personnel in textile showrooms of urban Pathanamthitta District, Kerala” is a record of the research work undertaken by Dr. Shamila Beegum in partial fulfilment of the requirements for the award of the degree of Master of Public Health under my guidance and supervision.

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GLOSSARY OF ABBREVIATIONS

BV	Bacterial Vaginosis
MHM	Menstrual Hygiene Management
NHRC	National Human Rights Commission
RTI	Reproductive Tract Infections
UNICEF	United Nations International Children's Emergency Fund
USAID	United States Agency for International Development
UTI	Urinary Tract Infections
VVC	Vulvo Vaginal Candidiasis

ABSTRACT

Introduction

Menstrual hygiene management (MHM) is an important aspect of reproductive health for women of reproductive age. However, in developing countries they face challenges due to lack of access to safe and affordable menstrual products, inadequate water and sanitation facilities, social stigma and taboos, and limited education and awareness. Infrastructure and regulations at the workplace affect working women's MHM. Women in sales related work spend long hours standing and interacting with customers and this affects their health in general. This study aimed to explore the means of MHM used by women working in textile showrooms in urban Pathanamthitta district, Kerala, to describe the challenges they face and strategies they employ to overcome them.

Method

The study adopted a qualitative research approach using in-depth interviews with women working in different types of textile showrooms in urban Pathanamthitta district, Kerala. The informants were female working staff of reproductive ages who worked for at least six months in the same shop. Inductive coding using WEFT-QDA enabled the identification of themes to describe the challenges to MHM.

Results

Seven major themes identified. Lack of proper toilet and disposal facilities, limited break times, long duration of work time were some of the challenges faced by participants for appropriate MHM. Because of the long years of experience, they developed coping mechanisms for these challenges, which would have resulted in health issues like pad allergies, fungal infections, UTI and pelvic infections.

Conclusion

Workplace conditions, gender norms, and women's health are connected. Limited infrastructure and the reluctance to discuss difficulties in menstrual management difficulties is gendered. This underscores a broader public health and occupational health issue impacts not only physical health including infections and discomfort, but also mental health and job satisfaction. Workplace policies should include regulations regarding appropriate facilities for MHM of women.

CHAPTER 1

INTRODUCTION

1.1 Background

In the context of India's economic growth, the retail industry is crucial as it adds to the country's overall economic output and provides job opportunities especially for those belonging to low socioeconomic backgrounds. Many educated individuals who are currently unemployed are drawn to the retail sector because formal sector jobs are scarce and some drop out due to the challenges posed by unemployment. (K, Sivasubramanian, 2019)

About 85 per cent of India's 524 million workforce are classified as "unorganised sector," which means they do not have any official work contracts, social security or health benefits that an organisation normally provides to its employees. (Anand S, 2023) While the Indian Constitution pledges justice, equality, and liberty a substantial gap persists between the organized and unorganized sectors. The unorganized sector, comprising enterprises with fewer than ten workers, faces multifaceted challenges. Issues such as inadequate wages, unsafe working conditions, job insecurity, and the absence of fixed working hours trouble this sector. Workers often struggle with multiple jobs due to insufficient income, exacerbating their job instability. The violation of statutory wage levels as highlighted by the Supreme Court raises concerns of forced labour and contradicts Article 23 of the Constitution. In addition, the unorganized sector lacks adherence to regulations such as the Factory's Act of 1948, which stipulates a maximum of 48 working hours per week for adult workers, further contributing to uncertainties in working hours. The sector also contends with inadequate sanitation facilities, substandard working conditions, and a lack of provisions for old-age security, compounding the challenges faced by these workers. (Team, 2020)

Women's workforce participation in India stands at a mere 17 per cent, with a significant concentration in the unorganized sector where more than 90 per cent of female workers are

employed. This concentration is due to societal biases, easy entry, traditional gender roles, and technological advancements in the organized sector. Textile garment shops in organized or unorganized sectors, offer significant employment opportunities for women, particularly for those who are economically disadvantaged, migrants, and both educated and uneducated unemployed individuals. Female workers are employed in various roles, including sales helpers, sales associates, billing associates, package helpers, housekeepers, sweepers, and receptionists. (K, Sivasubramanian, 2019) Saleswomen, who are predominantly from economically disadvantaged backgrounds often serve as primary breadwinners and continue to play their roles as homemakers and labourers. (Patrick, 2000)

In Kerala, the situation of women working in the textile sales industry is quite unprivileged. The fact that all regulations relating to social security, welfare, safety, working conditions, and the like are predicated on the existence of an employer-employee relationship. Any attempts to negotiate for better terms result in the replacement of the still-existing job when unemployment is high and there are few alternatives for alternative employment. The fear of having no work and no income restrain the workers from asserting their rights. (Anil, 2016)

According to a complaint filed with the NHRC, many textile shops in Kerala do not even have toilets in place for their employees. And even when these are catered for, permission is required from the manager for its use during working hours. It is truly disheartening for female workers who are prohibited from sitting or taking breaks to use the restroom throughout their workday, which spans over ten hours daily. Sometimes, they work for 12 hours a day and are allowed to sit only during lunch break, that too never more than fifteen minutes. Floor managers will keep a tab of how many times they go to the restroom and during rush-hour they are simply not allowed to go to the bathroom. (Anil, 2016)

Menstruation is a natural biological process often acknowledged as a transitional phase from adolescence to womanhood. To promote a healthy and dignified experience during

menstruation, the World Health Organization (WHO) and the United Nations International Children's Emergency Fund (UNICEF) have given specific attention to Menstrual Hygiene Management (MHM). (Singh et al., 2022) Menstrual hygiene management (MHM) pertains to the upkeep of hygiene during the menstrual process. The WHO and UNICEF Joint Monitoring Programme (JMP) for drinking water, sanitation, and hygiene defines MHM as follows: Women and adolescent girls utilize a sanitary material for managing menstrual blood, ensuring it is changed in privacy as needed throughout the menstrual period. They employ soap and water for bodily hygiene and have access to safe and convenient facilities for the disposal of used menstrual management materials. Furthermore, they possess a comprehensive understanding of the fundamental aspects related to the menstrual cycle, enabling them to manage it with dignity and without discomfort or fear. (UNICEF,2019) This definition underscores the importance of a holistic approach to menstrual hygiene, encompassing not only the materials used but also privacy, sanitation facilities, and knowledge for dignified and comfortable management of the menstrual process.

Inadequate MHM has been linked to negative health outcomes for women. Poor MHM was associated with greater risk of gender-based violence, reproductive and urinary tract infections, and increased psychosocial stress. There is substantial research indicating that sanitation insecurity leads to psycho social stress for women, resulting in long-lasting mental and physical health consequences. (USAID, 2019) According to Caruso et al. (2017), sanitation insecurity is characterized by insufficient and uncertain access to socio-cultural and social environments that respect and cater to the sanitation needs of individuals. It involves having inadequate physical spaces and resources for the independent, comfortable, safe, hygienic, and private management of urination, defecation, and menstrual hygiene throughout the day or year. In the context of women's experiences, sanitation insecurity has notable implications for managing menstrual cycles. This includes feelings of anxiety or distress related to challenges in accessing

water, privately washing and drying menstrual cloths, obtaining disposable pads, and discreetly disposing of them. These challenges can lead to heightened stress levels and may prompt the adoption of unhealthy coping behaviours. (Caruso et al., 2017)

1.2 Rationale

Menstrual hygiene management (MHM) is an important aspect of health and well-being for girls and women of reproductive age. However, many girls and women in developing countries face various challenges in managing their menstruation, such as lack of access to safe and affordable menstrual products, inadequate water and sanitation facilities, social stigma and taboos, and limited education and awareness. (ARHR, 2022; Sivakami, 2023) These challenges can have negative impacts on their physical, mental, and social health, as well as their education, work, and participation in society.(SEI, 2023) While there has been an increased focus on MHM in India in recent years, most of the existing studies and interventions have targeted adolescent girls in rural areas or schools.(Sivakami, 2023) There is a dearth of research on MHM among adult women, especially those who work in the informal sector such as sales personnel. These women may face more challenges in managing their menstruation such as long working hours, lack of privacy, harassment, or discrimination at the workplace.(Draft Menstrual Hygiene Policy, 2023) Moreover, there is a need to understand the specific context and factors that influence MHM practices and outcomes among different regions and communities in India, as they may vary due to cultural, religious, economic, or environmental reasons. (Sivakami, 2023) Workplaces play a crucial role in impacting women's health either positively or negatively. On an average a woman in reproductive age menstruates for about 65 days a year, which is about 18 percent of the total number of days in a year, and yet the menstrual health needs of female employees in the workplace are frequently disregarded. (Hennegan et al., 2022)

In Kerala, women working in textile sales jobs face tough conditions. The rules meant to protect their rights and well-being are not enforced properly. Most of these regulations are designed for typical employer-employee relationships. When these workers try to negotiate for better conditions, there is risk of losing their jobs, especially when unemployment is high and other job options are limited. This fear of losing work and income stops them from standing up for their rights. Sales jobs involve interacting with customers directly and that requires being comfortable and confident. Poor menstrual hygiene can make these women uncomfortable, stressed, and embarrassed. This discomfort might affect their ability to do their job effectively when dealing with customers.

Therefore, this study aims to explore the challenges and opportunities in MHM among adult female sales personnel in urban Pathanamthitta district, Kerala. Even though the problem that is explored up on is generalized, to narrow down the focus, the present proposed study is limited to urban Pathanamthitta District, Kerala. The study site will be the various textile showrooms in urban Pathanamthitta. These showrooms often employ predominantly female workers, which makes it a relevant setting to understand the menstrual management experiences and challenges faced by women in the workplace. The study will use a qualitative research method to explore the MHM knowledge, attitudes, behaviours, and experiences of the target population as well as the availability and accessibility of MHM products and facilities, and the role of social norms and support systems. The primary objective of this study is to explore and understand the various challenges faced by female sales personnel during menstruation in the workplace. This study aims to inquire into the experiences of saleswomen how they manage their private needs like menstrual hygiene management within the constraints of prolonged working hours with limited facilities in textile showrooms and whether they encountered any health issues related to poor menstrual hygiene management. The study will also identify the best practices and recommendations for improving MHM among this population and will

contribute to the existing literature on MHM by providing new insights and evidence on MHM among adult female sales personnel, a neglected and vulnerable group in India. The study will also enhance the understanding of the regional and contextual variations and determinants of MHM in India and provide a basis for comparison with other studies or settings. The study will have practical implications for the health and well-being of the target population, as well as their empowerment and productivity.

1.3 Research Question

“What are the challenges in menstrual hygiene management among adult female sales personnel working in textile showrooms of urban Pathanamthitta District, Kerala?”

1.4 Objectives

- i. To explore the means of menstrual hygiene management (MHM) used by women working in textile showrooms in urban Pathanamthitta district, Kerala,
- ii. To examine the challenges to use of appropriate practices of menstrual hygiene among them (including the use of proper sanitary products, adherence to hygiene practices, and access to facilities that support menstrual management).
- iii. To explore the strategies used to overcome the challenges to proper menstrual hygiene management and
- iv. To determine whether they experienced any health-related issues due to the challenges in appropriate MHM.

1.5. Chapterisation plan

This thesis consists of five chapters of which the present chapter contains the introduction to the topic of research, detailing the rationale for the study leading to the express objectives of the study. The second chapter consists of the review of literature relating to the topic of interest, viz., menstrual hygiene management and working women, particularly in the retail textile industry. The third chapter describes the methodology used to undertake the study, detailing

the sampling strategy, the analysis undertaken and the ethical considerations. As the study was qualitative in nature, this chapter includes a note on the positionality of the researcher. The fourth chapter, i.e., the results, describes the understandings that emerge from the analysis of the 18 interviews with women working in the retail textile show rooms in urban Pathanamthitta, Kerala. The last chapter that includes the discussion and conclusions summarises the findings and describes the conclusions after dwelling on the study's strengths and limitations.

CHAPTER 2

REVIEW OF LITERATURE

The review of literature was done using the search engines ‘PubMed’ and ‘Google Scholar’. The key terms used were “menstrual hygiene management”, “menstrual hygiene management at work place”, “challenges in menstrual hygiene management”, “health issues related to improper menstrual hygiene management”. Publications from the year 2012 to 2023 were selected. Filters such as “free full text”, review of literature, books and documents were used. Qualitative and quantitative studies which were conducted in low- and middle-income countries were selected for the review. Reports from World Bank, WHO, UNICEF were also included.

Figure 2.1 and Figure 2.2 show the process of selecting articles for literature review. The selected articles were read and categorised against the key aspects regarding women’s work and menstrual hygiene issues they highlighted. In all, 51 articles and guidance documents were reviewed.

Figure 2.1 Process of selecting literatures from ‘PubMed’

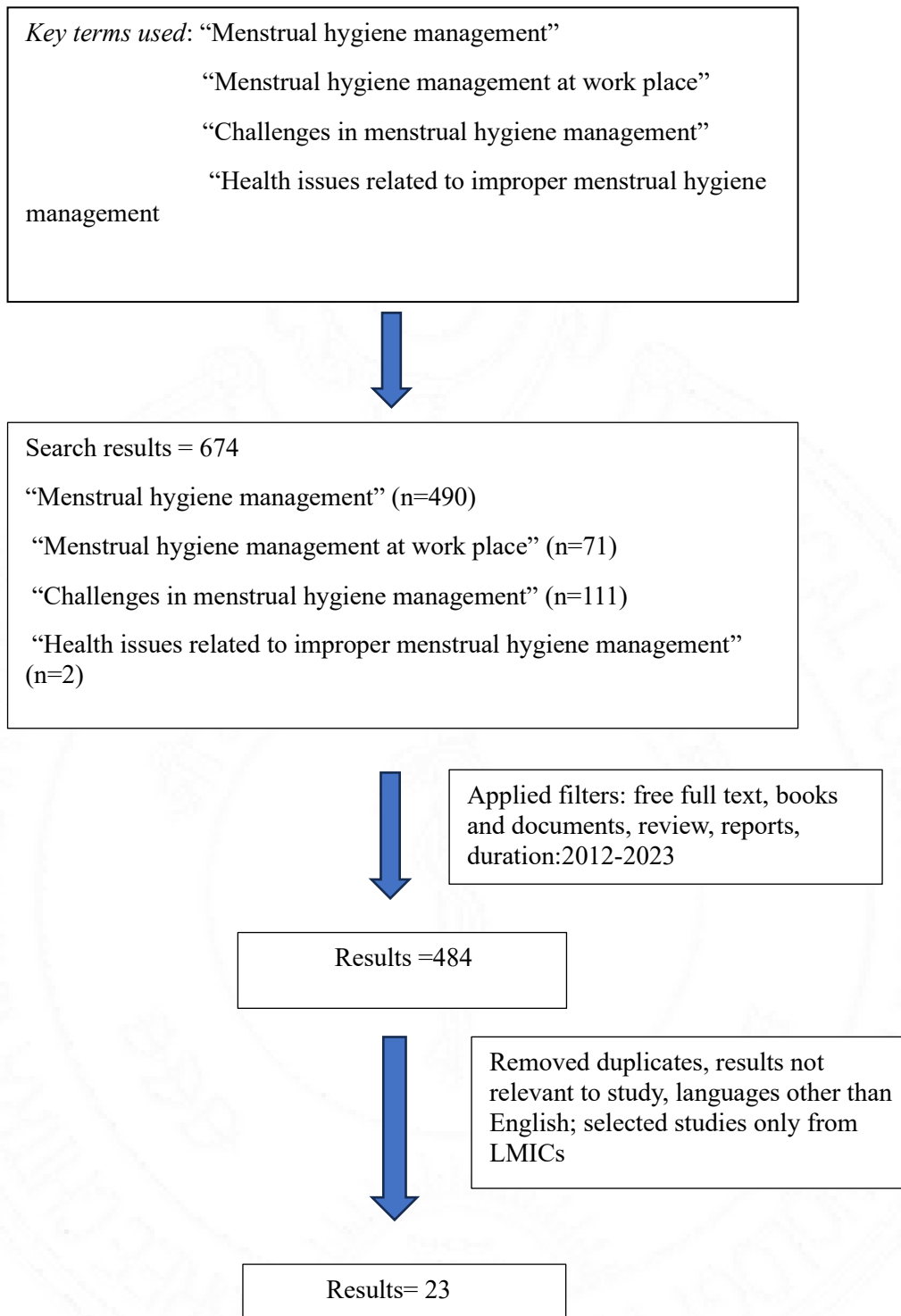
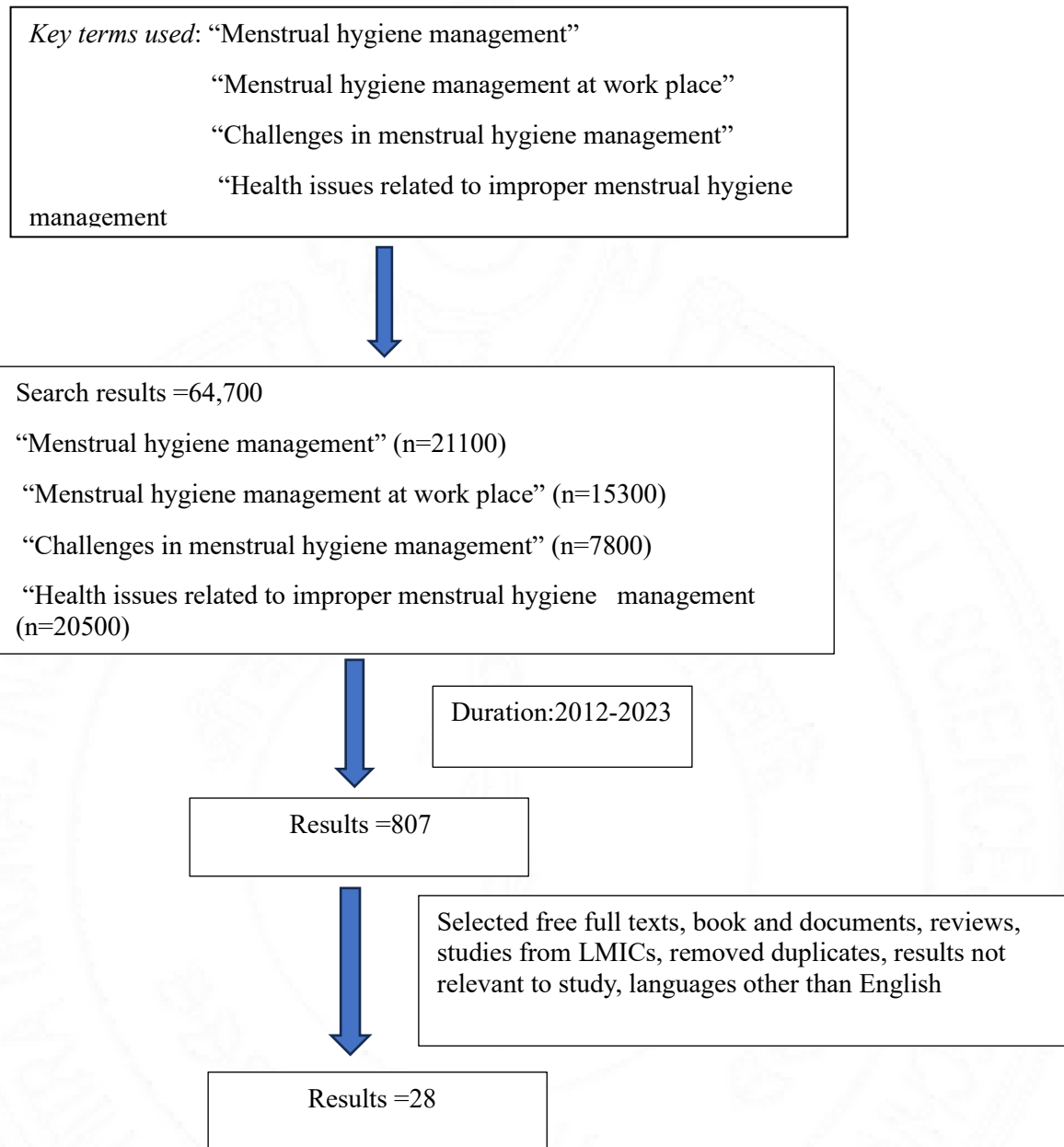


Figure 2.2 Process of selecting literatures from “Google Scholar”



Total documents selected for review -51

2.1 Menstruation

Menstruation is a biological process that symbolizes the transitional phase from adolescence to womanhood. Menstruation is controlled by hormones, and it includes the gradual thickening and shedding of the endometrium, the lining of the uterus. This shedding typically happens over a period of 3–5 days, sometimes extending to 7 days. (Singh et al., 2022) Menstruation is a natural and regular monthly process in healthy adolescent girls and pre-menopausal women. It is a significant factor for both women and men because it plays a vital role in human reproduction and the journey to parenthood. The age at which menstruation begins can vary based on geographical location, race, ethnicity, and other factors and in areas with lower economic status, it starts between the ages of eight and sixteen, with an average age of around thirteen years. (Sumpter and Torondel, 2013)

2.2 Menstrual Hygiene Management

Menstrual hygiene management (MHM) is the management of hygiene during the menstruation process. WHO and UNICEF Joint Monitoring Programme (JMP) defined Menstrual Hygiene Management as: “Women and adolescent girls are using a clean menstrual management material to absorb or collect menstrual blood, that can be changed in privacy as often as necessary for the duration of a menstrual period, using soap and water for washing the body as required, and having access to safe and convenient facilities to dispose of used menstrual management materials”. (UNICEF, 2019) MHM involves more than just managing periods. It also means dealing with what society thinks and believes about it and making sure that girls and women have the right information and help when they get their periods. This is an important part of MHM. (UNICEF, 2019)

Sanitation insecurity is defined by Caruso et al. (2017) as: “Insufficient and uncertain access to socio-cultural and social environments that respect and respond to the sanitation needs of individuals, and to adequate physical spaces and resources for independently, comfortably,

safely, hygienically, and privately urinating, defecating, and managing menses with dignity at any time of day or year as needs arise in a manner that prevents faecal contamination of the environment and promotes health”. Sanitation insecurity can affect women's ability to handle their menstrual hygiene. This includes feeling anxious or distressed about getting water, privately washing and drying menstrual cloths, accessing disposable pads, and discreetly disposing of them. These challenges can lead to stress and unhealthy coping behaviours. (Caruso et al., 2017)

2.2.1 Menstrual Hygiene Management – Global Scenario

Research on menstrual hygiene management in low- and middle-income urban areas has revealed that sanitary pads, cloth, and tissue paper are the most commonly used menstrual hygiene products. (Torondel et al., 2018) Alternative products like homemade pads, cloth, underwear, sponges, and cotton wool have also been used. (Kuhlmann et al., 2017; Sommer et al., 2016) Variations exist in different regions, with studies from Ghana, Nigeria, and Egypt showing a preference for sanitary pads among secondary school girls, while Malawi and Ethiopia report a reliance on cloth or homemade pads and in Asian countries clothes are more commonly used. (Tegegne and Sisay, 2014)

Trials using menstrual cups in Zimbabwe and South Africa indicate that menstrual cups were acceptable but use of insertable menstrual hygiene products like the cups and tampons were restricted by cultural beliefs regarding virginity and fertility. (Beksinska et al., 2015; Ssewanyana and Bitanihirwe, 2019)

While cloth pads have been used traditionally, disposable sanitary pads are often seen as aspirational due to their superior protection against leakage and odour. They are considered comfortable and safe, although affordability remains an issue. The choice between pads and cloth, or other traditional materials, is influenced by factors such as affordability, socio-cultural norms, knowledge, and variations in menstrual flow. For instance, some girls in secondary

schools in Zagazig City, Egypt, use sanitary pads during the first two days of their heavier menstrual flow and switch to cloth for the remaining days. (Elledge et al., 2018)

Birhane et al. (2019) shed light on the challenges faced by adolescent schoolgirls in Ethiopia, revealing low levels of proper MHM practices and emphasizing the importance of creating conducive school environments. In Bangladesh, Das et al.'s study (2019) uncovers wealth-related disparities in menstrual hygiene practices among adolescent girls, emphasizing the need for tailored interventions based on socio-economic conditions and education levels. The situation in Nigeria, as studied by Tomlinson (2022), raises concerns about inadequate MHM among peri-urban schoolgirls, impacting school attendance. Structural and social determinants play a pivotal role, necessitating comprehensive interventions to address water and sanitation facilities, stigma, and self-confidence. Collectively, these studies highlight the multifaceted challenges surrounding MHM, urging a holistic approach to ensure the well-being and dignity of women and adolescent girls in diverse cultural and socio-economic contexts. (Birhane et al., 2019; Das et al., 2019; Tomlinson, 2022)

2.2.2 Menstrual Hygiene Management – Indian Scenario

In the context of menstrual hygiene management in India, Anand et al. (2015) found that cloth was the primary menstrual hygiene product used by females aged 15-49 years. However, urban areas in India exhibited a higher extent of sanitary pad usage, a trend expected to rise in the future and there are variations in menstrual hygiene product preferences. (Anand et al., 2015)

Girls in India preferred to use sanitary pads while at school and cloth at home. (Nair et al., 2012; Thakur et al., 2014) In urban resettlement area of New Delhi, the use of sanitary pads was more common among young women (20-29 years old) and those with better-educated mothers who could provide more information to their daughters. (Elledge et al., 2018)

Commercial pads were more prevalent in urban areas, while cloths were more common in rural areas, with an increasing trend in commercial pad usage over time. Some girls used a

combination of pads and cloths, particularly among schoolgirls. Limited references were found to tampon use, with economic factors playing a significant role in the choice between cloths and pads. Other reasons for cloth use included disposal challenges, lack of awareness about pads, and personal preferences. (van Eijk et al., 2016) A study in Odisha highlighted a higher use of reusable clothes or pads compared to disposable pads, mainly due to economic constraints. (Das et al., 2015) The choice of menstrual absorbents depends on personal preference, cultural acceptability, economic status, and local market availability. Kaur et al. (2018) pointed out that rural women and girls in India tend to prefer reusable cloth pads, while their urban counterparts opt for commercial sanitary pads. (Kaur et al., 2018) Several studies have investigated the landscape of menstrual hygiene management (MHM) among women in India, revealing multifaceted challenges and disparities across various demographic factors. In a rural setting, Geethu C et al. (2016) reported a generally satisfactory level of menstrual hygiene practice among women, but identified areas that require attention such as disposal of used napkins. The common methods of disposal were burning, dumping with domestic wastes, burying in vacant places and throwing away. The practise of throwing used napkins with domestic wates caused clogging of drainages and napkins disposed in open areas might result in a risk of spreading infections to pets and human. The study advocates for a sustained public health awareness program to enhance awareness and improve hygienic practices during menstruation. Additionally, the government's role is crucial in providing affordable sanitary napkins and promoting their universal use to address both hygiene and public health concerns. (Geethu C. et al., 2016) Further insights emerge from Yaliwal et al.'s study (2020), which delves into menstrual morbidities, cultural beliefs, and MHM practices contributing to school absenteeism among adolescent girls in North Karnataka, India. The study highlights the need for counselling, awareness programs, and the inclusion of MHM in the school curriculum, especially for girls from underprivileged backgrounds. Cultural restrictions during

menstruation are prevalent, impacting both rural and urban girls differently. The girls who were menstruating were not allowed to drink water from the well as they believe it will cause impurity to whole water. In both rural and urban areas girls were not allowed to attend cultural or religious ceremonies, have to avoid certain foods, sitting outside house and not allowed to touch other people. Some of the girls were not allowed to sleep with family. Girls from rural areas were made to sit outside the house and were not allowed to play during menstruation compared to urban girls. The findings underscore the necessity for targeted interventions that address cultural nuances and improve hygienic practices, acknowledging the diverse challenges faced by adolescent girls in different settings. (Yaliwal et al., 2020)

Sharma et al. in their systematic review and meta-analysis shed light on the state of MHM in Indian schools. The study found that less than half of the girls were aware of menstruation before menarche and teachers being less common source of information. The availability of separate toilets for girls in schools remains a concern, emphasizing the need for strengthened MHM policies and explicit implementation of guidelines at the systemic level. (Sharma et al., 2020)

2.3 Challenges in Menstrual Hygiene Management in Work places

Globally, over 500 million women and girls lack proper facilities for managing their menstrual hygiene. The absence of adequate water, sanitation, and hygiene (WASH) facilities, especially in public spaces like schools, workplaces, or health centres, presents a significant barrier for women and girls. The lack of private toilets with secure doors, proper means to dispose of used sanitary pads, and access to water for handwashing make it challenging for them to maintain menstrual hygiene in a dignified manner. This issue goes beyond infrastructure; it extends to social norms and beliefs, where menstruating women are often considered impure and excluded from daily activities like education and employment. The associated taboos and stigmas create a culture of silence, limiting information on menstruation and hygiene. This lack of awareness

has serious consequences on the health and dignity of women and girls, leading to school absenteeism and perpetuating gender inequalities. Recognizing these challenges, promoting menstrual hygiene management becomes crucial not only for sanitation but also to uphold the dignity, bodily integrity, and overall life opportunities of women and girls. A World Bank Group study, 'The Rising Tide: A New Look at Water and Gender,' emphasizes how neglecting menstrual hygiene needs reinforces the lower status of women and girls in society. (World Bank, 2018)

Women and girls worldwide face significant challenges in managing their menstrual hygiene, particularly in environments lacking proper support for menstrual health and hygiene (MHH). These challenges can have critical implications for their health, well-being, and economic outcomes, including work attendance, performance, and earnings. Workplace conditions, including the presence and quality of toilet infrastructure, can play a crucial role in attracting and retaining female employees who menstruate by improving employee morale. (Fry et al., 2022) The need to obtain permission to use toilet facilities while on the job, for example, may present difficulties for women in effectively managing their periods, especially if permissions are restricted. (Sommer et al., 2016) The potential menstrual hygiene management barriers faced by adolescent girls and women in workplace environments in low- and middle-income countries has been under addressed in research, programming and policy. Despite global efforts to reduce poverty among women in such contexts, there has been insufficient attention to the water and sanitation related barriers, specifically in relation to managing monthly menstruation, that may hinder girls' and women's contributions to the workplace, and their health and wellbeing. There is an urgent need to document the specific social and environmental barriers they may be facing in relation to menstrual management, to conduct a costing of the implications of inadequate supportive workplace environments for menstrual hygiene management, and to understand the implications for girls' and women's health and wellbeing.

This will provide essential evidence for guiding national policy makers, the private sector, donors and activists focused on advancing girls' and women's rights. (Sommer et al., 2016)

Adolescent girls in low and middle income countries encounter challenges related to effective menstrual hygiene management, including limited access to clean and effective absorbents, inadequate facilities for changing, cleaning, and disposing of absorbents, insufficient access to soap and water, and a lack of privacy and in the absence of suitable and affordable menstrual care products, some women and girls tend to using unhygienic and inappropriate materials such as newspapers, old rags, dried leaves, or socks, to manage menstrual blood. (House et al., 2013)

Studies from various regions highlight these challenges, such as a lack of access to sanitary pads and related health education in East Africa, the use of old cotton fabric among adolescent girls in Mali, and variations in absorbent materials in Ethiopia and Nigeria. (Nnennaya et al., 2021)

Research conducted among market workers, teachers, and healthcare facility workers in Mukono district, Uganda, revealed that women experienced significant consequences for their work, finances, and health due to menstruation. Unsupportive sanitation infrastructure, concerns about soiling, and pain led to work absences. Secrecy, cleanliness, and the financial and time burden of extensive body washing had further implications for health and work. (Hennegan et al., 2020)

2.3.1 Challenges in Menstrual Hygiene Management in Work places - Indian Scenario

In India, women employed in both formal and informal sectors have expressed embarrassment associated with washing menstrual cloths at their work places. This discomfort has led some women to choose to remain at home during their menstrual periods or to wash their menstrual cloths at home after work hours. Conditions for menstrual hygiene management (MHM) are especially problematic for women in the informal sector, where workplace facilities often lack

the privacy and cleanliness required for effective and dignified MHM practices. (Rajaraman et al., 2013)

Monteiro, Noronha, and Govindaraju's study offers a comprehensive exploration of the working conditions in the unorganized labour sector, with a specific focus on sales persons in a Mangalore garment shop. The research significantly contributes to our understanding of the challenges within the informal sector, highlighting issues such as low productivity, inadequate skills and tools, and exploitation by middlemen. Importantly, the study underscores the marked disparities between the informal and modern sectors, emphasizing the limited impact of labour legislation on the former, resulting in weaker bargaining power and deprivation of fair wages. The inclusion of both primary and secondary data from 50 respondents, encompassing both male and female sales personnel, enhances the study's depth and provides valuable insights into the nuanced difficulties faced by unorganized labourers. Overall, this research not only adds to the academic discourse on working conditions but also advocates for targeted interventions and policy changes to improve the circumstances of unorganized labourers in specific contexts like Mangalore's garment sector. (Monteiro et al., 2017)

2.3.2 Challenges in Menstrual Hygiene Management in Work places- Kerala Scenario

In Kerala, women working in the textile sales industry face disadvantaged conditions, as existing laws for worker protection are often inadequately enforced. Social security, welfare, safety regulations and working conditions are usually designed around an employer-employee relationship making it difficult for workers to assert their rights. Fear of unemployment and a lack of alternative employment options further discourage workers from negotiating better conditions. (S, Jayasree, 2020) Textile shops in Kerala have been reported to lack proper toilet facilities for employees and even when facilities exist, employees may require permission from managers to use them during working hours. It is reported that female workers are not allowed

to sit or use the restroom during long working days, sometimes extending to more than ten hours daily. (Anil, 2016)

2.4 Health consequences related to improper menstrual hygiene management

Reproductive Tract Infections (RTIs) pose a significant global public health concern, especially in low-income settings. (Bhatti and Fikree, 2002) Among RTIs, bacterial vaginosis (BV) and vulvovaginal candidiasis (VVC) are particularly relevant to Menstrual Hygiene Management (MHM). These infections are primarily non-sexually transmitted and could potentially be introduced to the reproductive tract through the materials used for absorbing menstrual blood or due to poor personal hygiene during menstruation. BV, in particular, has been associated with an elevated risk of HIV infection, human papilloma virus infection, and adverse pregnancy outcomes, among other health concerns. (Sumpter and Torondel, 2013)

A hospital-based study in Odisha, India conducted by Torondel et al. reported a prevalence of RTIs and sexually transmitted infections (STIs) at 35.2% among women aged 15–44 years. (Torondel et al., 2018) In West Bengal, India, girls from higher socioeconomic backgrounds tended to practice safer MHM and experienced fewer gynaecological problems. (Mishra et al., 2016)

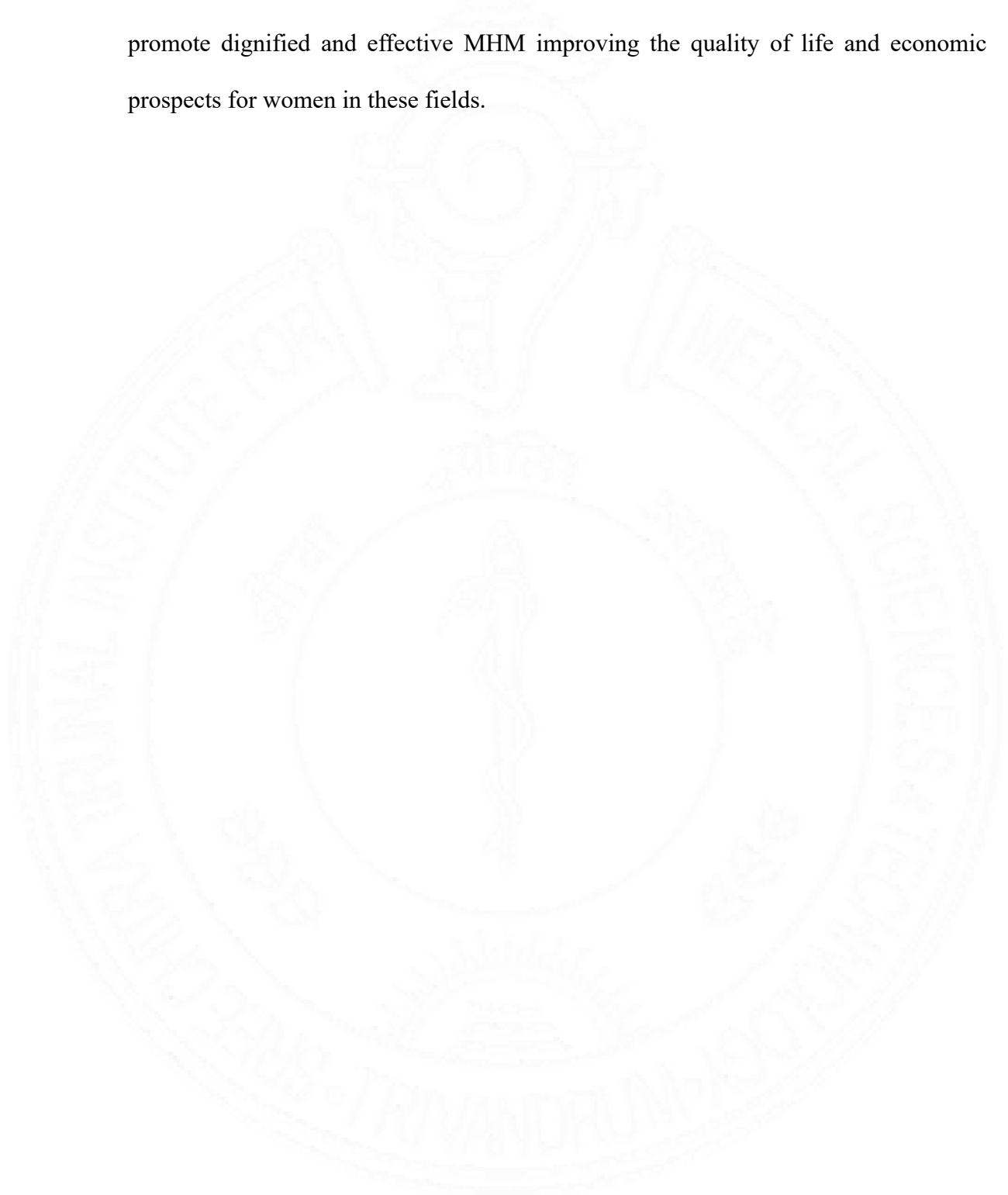
Urinary tract infections (UTIs) are believed to be prevalent among girls and women in their reproductive years, often linked to unsanitary MHM practices. The exact biological mechanisms underlying the connection between unhygienic MHM and BV and UTIs are not entirely clear, but one possibility is that MHM practices create excessively moist conditions in the urogenital area, promoting infections and microbiota imbalances. (Das et al., 2015) When girls and women have access to safe and affordable menstrual products, it reduces their risk of infections, positively impacting overall sexual and reproductive health. This includes lowering the rates of teen pregnancy, improving maternal outcomes, and enhancing fertility. Conversely, poor menstrual hygiene can lead to severe health risks, such as reproductive and urinary tract

infections, with potential consequences for future fertility and childbirth. Neglecting hand hygiene after changing menstrual products can contribute to the spread of infections like hepatitis B and thrush. The absence of proper means for managing menstruation hygienically can cause discomfort and psychological stress. This adds to the feelings of shame and at times, depression that women and girls already experience due to menstruation-related taboos and stigma. (World Bank, 2022) Inadequate MHM has also been associated with negative health outcomes for women, including a higher risk of gender-based violence and increased psychosocial stress. Research suggests that sanitation insecurity can lead to long-lasting mental and physical health consequences for women. (USAID, 2019)

2.5 Key Aspects from Literature Review and gaps identified

- About 500 million women and girls lack proper menstrual hygiene management facilities globally. This has negative impacts on their dignity and health. The challenges to appropriate menstrual hygiene management include unavailability of water, sanitation facilities and social stigma and cultural taboos.
- In low- and middle-income countries like India, workplaces do not support effective menstrual hygiene management, especially in informal sector with regulatory restriction even in using washrooms.
- Poor menstrual hygiene management causes several health issues including urinary tract infections, reproductive tract infections, allergies and other infections.
- There is a lack of research on the specific challenges to MHM that these women face, so this study aims to understand how inadequate facilities, workplace regulations and cultural norms impact women's overall health, quality of life and ability to participate in the economy. By addressing these research gaps, valuable information will be provided to policymakers, employers and activists working towards women's rights and workplace equality. Therefore, this study aims to explore the relationship between

menstrual hygiene management and workplace policies with a specific focus on the challenges faced by women working in the textile sales sector in a district in Kerala. The ultimate objective is to advocate for better workplace conditions and policies that promote dignified and effective MHM improving the quality of life and economic prospects for women in these fields.



CHAPTER 3

METHODOLOGY

3.1 Study design

This study was done using a qualitative research methodology. In depth interview with female sales personnel from various textile shops using an interview guideline was the main tool used for data collection.

3.2 Study setting

The study was conducted in various types of textile showrooms in Pathanamthitta district, Kerala. These shops were classified as small, medium and big according to the number of employees it had. The shops which employed less than ten staff belongs to the small shops category, those which has staff between ten and thirty belong to medium type category and if the shop had more than thirty staff it was categorised as belonging to the big category. At first, a list of textile showrooms functioning in urban Pathanamthitta district were made through field visit and online directories. I visited fifteen shops of different categories as mentioned, explained briefly the study purpose to the concerned authorities of the shops and sought for permission and cooperation to conduct the study in their premises. Six shop owners were ready to give written permission and others declined to permit the study in their premises. For attaining the proposed sample size, I had to obtain permission from one more shop later. Hence study participants were selected from these seven textile shops.

3.3 Study participants and sample selection

The study population included female working staff (sales personnel, supervisors or trainees) of reproductive age group in the textile showrooms. They were from diverse backgrounds in terms of age, education, and experiences with menstrual management in the workplace. I

approached the female staff of each shop and explained the purpose of the study. I obtained consent to participate voluntarily, ensuring they understand their rights and the confidentiality of their responses.

The inclusion and exclusion criteria for participant selection are explained below.

Inclusion criteria

- Adult female staff belong to reproductive age group (18-45 years) and who are currently menstruating.
- Female staff (sales personnel, supervisor or trainee) working for at least six months in the same showroom.

Exclusion criteria

- Women who are pregnant or have not had periods for 6 months or more.

The participants who belong to inclusion criteria and were willing to participate voluntarily were selected purposively to include in the study.

3.4 Data collection techniques

Data collection started after getting approval from the Institute Ethics Committee on 11th of January 2024. The data collection period was two months from 12th January till 11th March 2024. The principal investigator approached the informants who gave consent to request them to participate in the study. They were given participant information sheet and consent form in Malayalam. The contact numbers of the informants who signed the consent form were obtained for further contact. Interviews were conducted at places that were convenient and comfortable to them according to their choice. Some interviews were conducted telephonically also as preferred by the informants and audio recorded after obtaining prior consent. The interview guideline contained questions that explored means of managing menstruation at workplace, challenges to proper menstrual hygiene management, and other matters related to menstruation. The interviews were audio recorded using recording device after ensuring privacy and

confidentiality. A field diary was also kept with the investigator for noting down the emotions, gestures or expressions of participants during the in-depth interview process. The surroundings like nature of shop and its infrastructure, houses of participants were also noted in the field diary. The interviews were conducted at shops, the participants' residence, the investigator's residence and some outside places convenient for participants. Some of the interviews took three days to complete as interruptions caused in between. A total of eighteen in depth interviews were conducted including six participants each from the three types of showrooms. The recorded interviews were heard again and each one was transcribed carefully in Malayalam to maintain the authenticity of responses and expressions used by the informants. The Malayalam transcripts were then translated to English. The translation process was done with utmost care to preserve the original meanings. Some words in Malayalam were kept in the translations so as not lose the essential meaning.

3.5 Methods of data analysis

3.5.1 Organizing open codes

In the initial stage after careful review of the transcripts, going through it line by line to pick out and group together different aspects of what the participants shared and make sure any minute detail is not missing. Thus, a total of eighty-seven codes obtained from open coding of all the eighteen interviews which are relevant and addressing the objectives of the study. The codes were organized using qualitative data analysis software Weft QDA version 1.0.1

The category "Long years of experience in the same shop" was developed as most of the informants shared how long they have been doing the present job. This showed how long they had been working in that site and how much experienced they are in their work. Another category was "Physical strain and exhaustion due to long work schedule," came from narrations about the long duration of working time and how it has impact on their physical health.

The category "Managing unexpected periods using cloth bits or buying napkins from the shop" came from participants explaining how they deal with their period starting unexpectedly at work, which highlighted the ways they manage and cope with when there aren't enough supplies for managing menstruation at their workplace.

3.5.2 Generating Axial codes

After generating the primary codes, we moved on to next level of axial coding. This is when we began to see how these initial categories (87 open codes) are interrelated with one another. These codes are then grouped into broader categories, which are called axial codes and generated nineteen of them.

For example, for open codes like "Physical strain and exhaustion due to long work schedule," "Long duration of working time in the shop," shared a common theme related to the physical demands and challenges of the workplace. So, these are grouped together under an axial code "Difficulties faced due to worksite policies".

Another axial code developed was "Regulatory restrictions at worksite that affect ability to comfortably manage periods". It is developed by combining twelve open codes like "Can't sit during work time in case of pain or discomfort", "Writing in register their name and time of using washroom", "Limited time is allowed for using washrooms other than break times", "No separate room for changing clothes or taking rest when necessary", "Wait until the customers are gone to use the toilet", and other open codes which indicated difficulty in managing menstruation at work place due to work place rules and regulations.

The next phase involved condensation coding, where the main concern became that of merging and refining the axial codes into some major themes. This stage was the most analytical one as the we applied the axial codes to pinpoint the main themes which reflect the study data in its most crucial forms. This was done by reading through the axial codes and field notes and reflecting upon the interviews to identify the linkages implied and their meanings. This process

led to the identification of seven major themes: Work and workers, Worksite, Worksite regulations, Managing menstruation: additional burden, Gendered norms, Health issues experienced, and Managing health issues. Each theme here is connected with a network of axial codes, signifying the way how everyday experience and observation line up to provide a wider and fuller meaning.

3.5.3 Process of validation

During the initial phase of coding, data from transcribed interviews were systematically broken down into discrete components, which were tagged with relevant codes based on the content. Each code was then crosschecked with the corresponding segments of the original interviews. This step ensured that the codes accurately represented the participants' responses and that no vital information was lost in the transcription and translation processes.

Axial coding involved re-assembling of the data categorized during primary coding to form a clear association between the categories. Some preliminary codes categorized under a particular axial code were put under another axial code as it fitted under that category better. This phase allowed for the identification of relationships between different codes and facilitated the building of a coherent narrative.

The final stage involved merging the axial codes into broader themes that accurately reflected the overarching insights of the research. Themes were compared with the transcripts again to verify that they truly represented the views and experiences narrated by the informants.

3.6 Ethical considerations

3.6.1 Informed consent

Written informed consent was collected from all the informants who were interviewed before starting the process. The informants' information sheet in Malayalam language were provided to them to understand the nature of the study and their role in the study and how the interview will be done. Sufficient time was given to understand and make decisions about their participation in the study. Their queries were addressed by the principal investigator. One copy of the information sheet and consent form were given to informants and one copy was retained by the principal investigator. Space for auditory privacy was ensured so as to enable the participants to speak freely.

3.6.2 Confidentiality

The informants' identity and shops' identity were kept anonymous. Each informant was given a unique code for later identification. The consent forms, recorded interviews and field notes were kept securely with the principal investigator.

3.7 Positionality

As an Ayurvedic physician with a specific focus on gynaecological practices with one and half years of experience in clinical practice within this specialty, my engagement with the field of women's health through the traditional Ayurvedic medical system has profoundly shaped my approach to research. Transitioning into public health, my aim has been to integrate this traditional knowledge with modern health science, particularly in the context of reproductive and occupational health. Although my Ayurvedic training provided a strong foundation in women's health, stepping into diverse work settings for this research broadened my view beyond clinical interactions. This shift challenged my initial perceptions and enhanced my understanding of the complex social dynamics that influence workplace health management. Thus, I found myself navigating the dual roles of an insider, familiar with the intricacies of

women's health from an Ayurvedic perspective, and an outsider, new to the everyday challenges these women encounter in their workplaces. My experience in workplaces was quite different from the regulations that my women informants were subject to. I tried to gain trust. I did my best to understand experiences. Being understanding was important and I wanted honest insights. My analysis aimed to show the reality of their lived experiences and coping strategies. Being a woman, managing menstruation is an intrinsic part of my life, involving different routines and challenges. As a person who experiences heavy bleeding, I have the fear of menstrual leakage, which can be embarrassing and stressful. So, changing sanitary napkins every two hours, asking my friend to check backside of my clothes while walking was routine for me to ensure leakage problems. The need to maintain hygiene while managing menstrual flow is another significant concern. This involves not just the use of sanitary products but also access to appropriate facilities that enable one to change and dispose of these products safely and hygienically. These personal experiences provided me with an understanding of the anxieties and practical difficulties that the women working in textile showrooms might face. My study informants expressed similar fears and constraints, highlighting issues such as inadequate access to sanitary facilities, limited washroom breaks and other discomfort.

CHAPTER 4

RESULTS

4.1 Introduction

This chapter describes the findings from the qualitative research exercise aimed at describing the menstrual hygiene practices among women working in textile showrooms in Pathanamthitta district, Kerala and also identify the challenges to the management of menstrual hygiene in those contexts. This chapter is based on the analysis of 18 in-depth interviews of women workers in textile retail showrooms in Pathanamthitta district who were selected from across three size classes of retail shops.

These interviews were conducted in Malayalam and later translated and transcribed for analysis using WEFT-QDA (version 1.0.1). The interviews were read and then coded carefully using the principle of constant comparison to maintain parsimony in the number of codes and yet retaining the emerging variations in menstrual hygiene practices. This coding process yielded 87 primary codes and these were again reviewed to generate axial codes, many of which had multiple primary codes that overlapped. The list of primary codes, the code definitions and a selected sample of a typical segment that was coded using this label has been put together as the coding manual for this analysis and is attached to this thesis as Annexure I.

There were 19 axial codes which were generated through a process of identifying family of primary codes that were linked under a common emerging conceptualisation. The axial codes were reviewed through a process of re-reading the interviews to ensure the uniformity and consistency across the emerging conceptualisation. These codes were re-read in the light of the overall understanding of the nature of menstrual hygiene management and challenges to it among the women working in the textile retail sector of Pathanamthitta district. Identifying the linkages across these axial codes, they coalesced conceptually into seven clear themes that explained the means of menstrual management and the challenges experienced. For example,

the axial code for “means of managing menstruation at work”, “adaptations to cope with MHM challenges”, “self-management of physical discomforts during periods” are merged together to form a theme on “managing menstruation: additional burden”, which shows how job guidelines have an impact on personal healthcare practices.

4.2 In-depth interview analysis

4.2.1 Participant Profile

In-depth interviews were conducted with eighteen participants from three different types of textile showrooms that is, small shops, medium type shops and big showrooms. Six participants were selected from each category. The profile of participants is given in Table 4.1.

Most of the participants come from lower socioeconomic backgrounds. They have chosen this job to be able to offer financial support for their families. While some participants were satisfied with their job and others were not. Nevertheless, they continued working in the textile showrooms as there is no alternative for them. One of the participants was the only exception who selected the job to escape from the boredom she felt at home while alone. She was from a middle-class family I could recognise this distinction because I interviewed her in her home and this was a double-storeyed building with all facilities, a big front yard with flower and vegetable garden, indicating a better socio-economic status.

Shylaja: “One neighbour chechi had job there, she told me they were looking for sales girls. I was very bored alone in the house, so I went and attended interview. I got selected. I am very much interested in attending customers. I like that. If we talk to them nicely, they will be happy and so we are. Its about how we deal with customers, even if they don’t want to buy, if we convince them, they will buy something for sure (smile). I requested the management not to put me only in one section like bird in a cage (laughs), I like to walk around with customers.”

Anjali: “It is difficult to take care of family with my husband’s income alone. Salary is less, but I thought something is better than nothing.”

Sahla: “I am going for my family, I completed my degree course, I thought I would get a better job. But got this... anyways with my salary, many good things I could do. My daughter is a nurse. Now she started working. When she also earns, my burden is little reduced.”

Table 4.1. Profile of the selected women informants who were working in the textile retail sector, Pathanamthitta district, Kerala

	Age		Type of shop	Experience in the shop		Regularity of periods		Health discomforts due to periods
	< 35 years	>= 35 years		< 3 years	>= 3 years	regular	irregular	
1	✓		Small		✓	✓		Stomach pain, muscle cramps in calf area
2		✓	Small		✓	✓		Excessive bleeding
3		✓	Small		✓		✓	Stomach pain, back pain, pad allergies
4		✓	Small		✓	✓		Stomach pain, itching
5	✓		Small	✓			✓	excessive bleeding, rashes
6	✓		Small		✓		✓	UTI-always
7		✓	Medium		✓	✓		Itching, stomach pain
8	✓		Medium	✓		✓		White discharge, stomach pain
9		✓	Medium		✓	✓		Stomach pain
10		✓	Medium	✓		✓		Headache, pad allergy(sometimes)
11		✓	Medium		✓	✓		Fungal infection, excessive bleeding
12	✓		Medium		✓	✓		UTI, backpain, stomach pain
13		✓	Big		✓	✓		Itching
14		✓	Big		✓	✓		UTI, white discharge, pad allergy, itching
15		✓	Big		✓	✓		Recurrent UTI, stomach pain and back pain
16		✓	Big		✓		✓	Recurrent UTI, back pain
17		✓	Big	✓		✓		Itching, pad allergy
18	✓		Big		✓	✓		Rashes, itching

4.2.2 Emerging Themes

After sorting out the initial findings into broader categories with axial coding, we moved on to identify the broader themes that enable an understanding of the wholistic picture. It was like taking a step back to see the whole picture we have made from the smaller parts. We worked with the nineteen broader categories and from them we developed seven themes. We did this by seeing how these categories fit together, looking for the broader ideas or issues they all seemed to be hinting at. We reflected upon what these connections mean in a wider sense which helped us pinpoint the main themes. For example, the categories “Self-management of physical discomforts during periods”, “Adaptations to cope with MHM challenges”, “Means of managing menstrual needs at work- additional burden”, Hygiene practices during menstruation” and “Colleagues help to manage menstrual difficulties by buying or lending pads or standing for each other”, were combined to highlight a theme named “Managing menstruation: additional burdens.” This theme showed how the infrastructure and regulations at work affect employees' daily lives, especially when it comes to handling personal hygiene matters like menstruation.

4.2.2.1 Work and workers

In exploring the employment dynamics among female sales personnel, the first theme, "Work and Workers," encapsulates how these women found their jobs and their initial impressions of their work environments. The narratives from the interviews reveal a blend of personal initiative and social networking in securing employment as well as the varied perceptions and experiences of workplace conditions.

Most of the informants interviewed secured their jobs through advertisements, personal recommendations and direct inquiries.

B3: “One neighbour chechi had a job there, she told me they were looking for sales girls”, illustrating the role of social connections in job opportunities.

B4: *“When the shop started, they put advertisements in notices for sales girls. I went there and applied...I didn't have any previous experiences...People who had earlier experience were selected without training”.*

Here, the importance of both formal job advertisements and the additional advantage given to experienced applicants are illustrated.

After being hired, many informants underwent training which varied in nature but generally included customer interaction and sales management. An informant (B4) detailed her training experience:

B4: *“Beginning we had training for 2 months at the shops, another branch. We got training in folding, displaying arranging, dealing with customers etc”.*

This training phase was crucial for those without prior experience, helping them integrate into their roles effectively.

The descriptions of workplace conditions were mixed, with several informants noting satisfactory aspects like proximity to home and decent wages, which added to job satisfaction.

B6: *“It's nearby. Ten minutes walking distance from here...In case of any emergencies, I could come home soon also”.*

This highlights the convenience of workplace location. Additionally, the sense of community and supportive management also emerged as significant factors contributing to their positive work experiences.

B2: *“all the staff are friendly; management is also nice. I am getting decent salary for the work I am doing.”*

However not all experiences were positive, as some informants noted challenges related to workplace dynamics and conditions, which could affect their comfort and job satisfaction.

These aspects were subtly hinted at, but were predominantly overshadowed by the positive feedback about social connections at work and satisfactory employment conditions.

Informants frequently mention the challenge of managing their workload with a reduced number of colleagues. The informant M5 describes an especially demanding situation, stating,

M5: "Today other two ladies were on leave due to some emergencies. So, I had to attend their sections also... today I was running from section to section (laughs)."

This highlights how absenteeism among staff can exacerbate the workload for those present.

Similarly, M6 discusses the complexities of serving multiple customers simultaneously during understaffed situations:

M6: "It's very difficult to manage. We have to attend two three customers at a time. Some customers will be in hurry and without patience, dealing with them is a big problem in the busy times. Sometimes they go back without purchasing, we will get scolded from the owners. But we are helpless, how could we manage three four people at a time."

During peak seasons, the shop management adopts a strategy of hiring additional staff on a daily wage basis.

B3: "Yes, some staffs are appointed on daily wages, they are provided with hostel facility and food."

This indicates that management recognizes the need for more hands during critical times, although these roles are typically limited to logistical support rather than customer interaction.

B4: "Yes, during season times, staff are appointed on daily wages. They are very helpful for us during those times. They help in folding, taking clothes, arranging shelves and tables. They don't attend customers."

This arrangement allows regular staff to concentrate on more critical sales and customer service tasks, but workload will be more for them also.

M5: "It's helpful, but we also have much work load that time. We don't get time to sit for a minute. We feel exhausted."

M1: "At that time, three or four extra people are taken for helping us in folding clothes and arranging shelves, taking customers to billing section etc. It is actually very helpful. They don't attend customers."

4.2.2.2 Worksite

This theme describes the nature of the work site, its infrastructure and facilities for the management of menstrual hygiene. Bigger showrooms have toilet facilities, separate for staff in some and common for staff and customers in others. Medium type showrooms also have

toilet facilities inside the shop, limited in number, one or two and common for staff and customers. The three small textile shops did not have toilet facilities for staff inside the shop. They have to go outside or to a nearby building for using the toilet. The description of shops is provided in Table 4.2

S2: "Toilets are not there in our shop. We have to go the other building (wholesale), one toilet is there for staff here and there. We can go in urgency, but mostly I go during lunch time. Going from one building to other is difficult. Customers will come in between, so I used to that. in case of urgencies, I go there, no problems. We clean the toilet every day in rotation."

S1: "The toilet is outside, behind the shop, we go during lunch time or in urgencies and change pads there."

There is a system in some shops where staff washrooms are assigned to a specific floor or floors. This system involves key management and registration protocols to ensure accessibility and maintenance of the facilities. This structured access aims to streamline usage and maintain cleanliness but may also pose challenges in terms of convenience and timely access. The staff toilets lack certain amenities such as hangers or shelves for personal items like sanitary pads or clothes. This absence can make managing personal hygiene more challenging for the staff especially during long shifts.

B6: "there are three toilets one toilet for two floor staff and one each for other floors. We have keys for the toilet and keep it in a particular place so that everyone can use. before going to toilet, we have to write in the register, where we are going. We get 10-15 minutes to use toilet, when customers are less, otherwise, we run and come back. (laughs)"

B3: "Mm...no hangers or shelves. But there is bucket and mug, hand wash is also there, but sometimes only(laughs) the cleaning chechis usually forget to fill them, when we tell them continuously for many days, they will fill."

The informants said that managing personal hygiene especially during menstruation, is more comfortable at home than at the workplace due to the lack of facilities and the constraints in using them. They shared insights into the difficulties they face, such as limited facilities for changing sanitary products and the necessity to adjust timing around less busy times.

S3: "definitely I feel comfortable at home. actually, I have bleeding for two three days only. It is not much. So, I keep a fresh pad in the morning after bath, before coming to the shop. Then in the lunch break only I need to change. After that I change after going home only. At home I

use cloth. Its soak more easily than pads, so I change whenever needed, at home we can wash clothes and dry, no."

M4: "At home we can change and go to toilets whenever we need, here we have to adjust according to the situations."

Many informants expressed discomfort or reluctance in discussing menstruation-related issues with male supervisors or managers. This gender dynamic appears to play a crucial role in the silence around MHM issues as evident from multiple interviews where informants stated that they *"do not usually talk these matters with men"*. They have not adequately communicated their needs for basic sanitary facilities like bins for pad disposal. In the absence of proper disposal facilities, some informants tear used pads, flush the absorbent material, and burn the rest at home. To avoid disposal issues, multiple pads were used at once to avoid the need for changing them throughout the day. Used pads are often wrapped in newspaper or plastic and carried home for disposal due to the lack of facilities. This is noted as causing discomfort, especially when the same bag is used to carry food and other personal items raising concerns about hygiene and odour.

S1: "it is a problem actually, usually I wash the pads, tear it t and flush the cotton, the outer part I cover with paper or plastic bag, bring back to home and burn it".

M4: "I wrap again in a plastic cover, and keep in bag, because our other things food, water are all in the bag."

B6: Yeah, it was quite uncomfortable. I cover it with newspaper then keep it in a separate pouch with zip, so no smell comes in bag, because my food water and other stuff are also in the same bag, no?"

M5: "its very difficult. For me I have to change two-three times. I wrap them in newspaper, put in a plastic bag and keep it in a corner in the kitchen area. If I keep them in bag, it will start smelling by evening. Before going home, I take the cover, keep inside my shawl and put it in bag. Two days are difficult for me."

B5: "I wash the cup with water, I clean myself. Then I put one new cup after that. I take the used one back home. I use only after cleaning with hot water and soap and dried. I wrap the used cup in paper and cover again with a plastic bag ang keep in my bag and take home."

While discussions with management are lacking, internal communication among female staff about menstrual issues seem prevalent. They discuss various challenges related to MHM, such as pain management, the need to take leave, and the logistics of pad disposal.

S3: *“Discussions... nha, when someone have periods, if there is stomach pain or other difficulties, we tell each other or if their periods are about to come, like they feel angry so they tell ‘my periods is about to come’. About disposing pads also we discuss, it is very uncomfortable to keep pads in bag and take back home. It will stink after some time, no?”*

B6: *“Yeah, we discuss about, mmm ...some people have severe stomach pain, back pain, some have headache, some have heavy bleeding, so many issues are there, no? So, if someone feel discomfort, like someone can't stand for long when they are in periods, so if there is much difficulty, they take live and go home. Someone goes to the hospital and take some injections or tablets and then come back.”*

Table 4.2. Description of the shops included in the research process

Name of showroom (Pseudonym)	Type of showroom	Description
ABC Fabrics	Small	This is a small textile shop located near meeting point of two roads. It has two floors; a big hall like space in ground floor and a very small room space upstairs. Most of the dress materials are arranged in ground floor, and the first floor has kids' materials. There is a billing section near the entrance where the owners use to sit. Cctv cameras are installed in four corners of the room in both floors. There are only three lady staff in sales. One staff is working for 11 years and other two staff joined recently. There are three or four plastic stools placed behind the display table where the staff use to sit at free times. The staff eat lunch at the upstairs. There are no washrooms inside the shop. One toilet is there outside (behind) the shop which is constructed separately. The washroom is small, with Indian toilet, tap, bucket and mug and led bulb. No other facilities.
SF Textiles	Small	Small type of showroom with one floor. Located at one side of the main road in a line of various kinds of shops. Only three staff in total. All were ladies. The billing section was near the entrance and owner sits there. No Cctv cameras are installed. Staff have been working there for more than two years. Two plastic stools were placed at

		a corner of the shop. Staff were standing when I visited. No sign board or doors seen for toilet.
BBC Syndicate		This is a single storeyed building near a small-town bus station. Four sales staff are employed; three ladies and one man. There is one male staff at billing also. There is a small office room where the owners sit. The shop was double storeyed earlier before covid and had more staff, now only a few are there. I visited there twice and it was almost crowded with people. There are some plastic chairs and stools here and there. There is no toilet in the showroom. The shop has a wholesale section also in another building. One toilet is there for staff of both the shops. Could not observe it as permission to do so could not be obtained.
RN Textiles	Medium	This is a three storeyed building near central junction of a town. There are about thirty staff all together working there. There is a billing counter and cash counter at both sides of the entrance. Owner is sitting at cash counter. The shop had lot of customers at the three floors while I visited. I could not see any chairs or stools for staff. Only one or two chairs were available at customer side in a floor. One toilet is there at ground floor, somewhere inside, but I could not find any sign boards where it was.
F.S. Fabrics	Medium	This was a double storeyed building. Cash counter and billing section are separate. About 15 staff work there in total. There were three female staff. There was a separate cabin as office room. There were two Cctv cameras in the ground floor. The first floor could not be observed as all three-lady staff were at ground floor. Plastic stools are there for staff to sit. Not much crowded. Toilet is said to be in the underground area, mostly used by staff only. A kitchen space is also there as informed by the participant.
KKR Gallery	Big	Multi storeyed building about 500m from xyz town. Parking area is available in the front of the shop. At the entrance there is material delivery area, next to it billing and cash counter as separate spaces. At one end, located outside there is an office room where owners are watching Cctv footage on screen. The ground floor has many partitions for different sections of clothes. Other floors are for sarees, wedding section, kids', men's section etc. there are more than 100 staff, mostly ladies. They have a

		particular dress code each day. Male staff also have dress codes. There are chairs for customers near display tables but could hardly find one or two plastic stools at some corners of floor, and these too were occupied by customers. Toilets are there in one floor for ladies and one for gents in another floor. The lady's toilet could be viewed. it has limited toilet space (European style), tap, bucket and mug. Good lighting is there. No shelves or hangers.
MS Silks	Big	This was a multi-storeyed building at xyz town area. Parking area is behind the building. At the ground floor there are some material sections, there is stair at one side. Other floors have many sections, ladies, gents, kids, ladies' stationary and fancy sections. Each floor has separate billing section and cash counters. No sitting arrangements are seen for customers also in most of the floors. Only the wedding section has chairs for customers. Toilets for customers are there in one floor, separate for gents and ladies. Staff are said to have separate toilets at terrace area.

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One of the shops have addressed employee needs to improve working conditions by installing incinerator for sanitary napkin disposal in toilet area after facing many issues related to that and many repeated discussions. Another shop keeps waste bins for disposing pads.

B3: "Earlier we used to flush pads in the toilets, it became a big issue due to blockage of toilets. So the management put a new burning machine there."

B1: "Now there is a pad burning machine installed, so disposal is now not a big problem."

B5: "Yes, waste bins are kept in the toilet, we can put in that."

4.2.2.3 Worksite Regulations

The theme of worksite regulations within the retail sector encompasses a broad spectrum of policies that directly affect the daily lives of employees. These regulations while intended to streamline operations and ensure customer satisfaction, often place significant constraints on the personal well-being of the workforce.

Informants across the various shops report long daily work schedules, typically starting in the early morning and extending into the evening. The standard shift spans from 9 or 9:30 am to as late as 8:30 pm, with some variations depending on the establishment. The long hours often standing, result in physical discomfort and health issues such as knee pain and backaches. Informants felt exhausted with the challenges of managing personal health, particularly during menstrual periods, within the constraints of their work schedules.

B1: "My shift is from morning 9 o'clock to 7:30 in the evening. I will be too much tired by that time, and my low back and legs feel too much pain and discomfort."

B5: "I have duty till 7 pm. We don't get time to sit for a minute. We feel exhausted."

The informants mentioned that they could use washrooms usually at breaktimes. In situations where there was an emergency, they could use the rest rooms, but very limited time is allowed. When customers are there to attend, even if there was an urgent need to use the rest room, they could not go to the washrooms. Due to the prevailing gendered norms, informants were not able to explain their menstrual hygiene needs and difficulties to male supervisors or managers. In some shops there are provisions to sit during free time when customers are not there, some others do not offer this option to the women. In one of the shops, the participants said that they are required to register their names and time of use if they used the toilet. The usual 'allowed duration' for such use was ten minutes, and when this duration lapsed, the supervisors will be checking for them and they will get scolded if they were delayed.

M5: "Usually at tea time from 10:30 am we get 10-15 minutes break and half hour during lunch time also. In between if we are free, we can sit. But today I couldn't sit for a bit rather than the lunch time. I didn't get time for toilet also. From morning to lunch time, I was waiting to use the toilet, customers were coming one by one."

B5: "Usually we use during the break-times only. In urgency we use. But mostly break-times, for 10 minutes (sighs), it's the usual toilet interval time. All the time there will be customers."

B6: "If there is any urgency or difficulty we can use toilets, no restrictions in that. But we have to write in a register where we are going and time. In those case, we have to come back in ten minutes, otherwise supervisors will check for us."

Due to the time constraints and because customers are the priority there were instances where the women could not use the washrooms when required. This resulted in staining of their clothes with blood. The colleagues help each other during urgencies by attending customers, but when everyone is busy, such accidents do happen.

M5: "Once, the pad was soaked in blood and my under garment also got stained. I was wearing a churidar, by time I went to the toilet, my pants also got stained. It was very embarrassing. One of my friends bought a new undergarment from the shop and gave to me."

The informants report that they are not allowed to sit for some time or very limited time is allowed to sit in case of any pain or discomfort during menstruation. Even if time is allowed for a respite, it will be for a very limited duration like ten or fifteen minutes. They have to manage by taking painkillers or any other measures. In very difficult situations, the participants take leave and go home; they do not discuss with the managers or supervisors as to their difficulties. In case if the participants have to change their dresses or take rest in difficulties, there are no separate rooms for that. For changing they have to use the trial rooms and rest in the eating area usually, but that is not a private space. The small shops do not even have trial rooms too.

M2: "I have back pain issues and varicose veins. The pain become worse on days I couldn't be able to sit. Today was such a day."

B1: 'Oh..., no no, our shop is always crowded, I am in churidar and wedding section. If wedding party comes in the morning, they leave by evening only, all the time I have to stand.'

B4: "If there is much difficulty, we have to take leave and go home. But most of us don't discuss these things with the supervisors, all supervisors are men."

M3: "There are dressing rooms. in case we need, we can use them. no separate room. The other space is where we use to drink tea and coffee. It is common for all staff; we can't change dress there. "

Employees are required to store their personal belongings in designated areas, limiting access to personal items and communication devices during work hours. This causes difficulties in taking sanitary products or any personal items from bags without others notice.

M1: "We keep our bags at the ground floor when we reach the shop, there is a shelf. So, at times, when we need, we go there take pads and wrap in paper and goes to toilet."

B6: “actually, we have to keep our bag in a shelf provided near the owners cabin and phone also. we can take our purse with us.”

The presence of CCTV cameras, some with audio recording capabilities, adds another layer of vigilance required from employees. This constant monitoring can create an environment where employees feel the need to be cautious about their conversations and movements throughout the day.

B4: “Moreover, all place has cameras no, (laugh) they can even hear what we are talking... (some cameras have voice recorders also)”

One informant suggests improvement in the provision of sanitary facilities, such as the free provision of sanitary pads and maintaining water availability without fail. The present system which relies on manual water pumping, is often unreliable and can cause significant inconvenience. Another informant suggested the need of separate toilets for customers to reduce wait times and ensure that employees can attend to personal needs without undue delay.

B1: “There should be free provision for sanitary pads. We work for them all these years no... if the security forgets to pump, we have to tell supervisor; he calls security, then water pumped to one tank, from there again to other, so it takes lot of time.”

B5: “If we have separate toilets, it will be very useful. We have to wait if customers are there and we usually go in urgency, it is very difficult.”

4.2.2.4 Managing menstruation: additional burdens

Menstruation in the workplace can present significant challenges for women, particularly in environments where there are inadequate facilities or societal stigmas. The necessity to manage menstruation discreetly and effectively while at work adds an extra layer of burden for women employees. This section explores the strategies and experiences of women managing menstruation in the workplace.

The informants use sanitary napkins for menstrual management. An alternative to this is cloth and menstrual cup. Some informants used cloth and pad at same time for extra protection and fear of staining as a precaution against staining if they are unable to change at time when

needed. The informants carry sanitary napkins and other sanitary products in their bags to work place nearing their period dates or as a precaution. They have to keep their bags in particular spaces provided for that and they manage to take sanitary napkins and keeping back the used ones in bags by hiding it within their dupatta or saree. They have adapted to the situations with long years of experience.

B4: "If we have pads, we take from the bags and go to toilet. If we don't, we buy from the counter in the lady's section. There all sanitary products are available. We have to bill it and buy. In emergencies our colleagues also help. We go to toilet, clean, freshen up and come back."

B1: "I use cloth inside and pad outside, because changing will be difficult." "Yes, the first two days its difficult, if there is more bleeding than usual, I stick one more pad over the cloth."

M6: "We keep bags in a space provided near the owner's room. No one will be usually there. I cover in newspaper, keep inside saree pallu and go to bathroom. No one notices. toilets are also in the ground floor."

M4: "Sometimes, I had to wait. In an emergency, I somehow managed to go to the toilet asking help from my colleagues. After one such situation I use to keep cotton cloth inside panties nearing my date, if something happens unexpectedly, I could manage for some time."

Unexpected menstrual cycles are a common occurrence, and the women interviewed shared their strategies for handling such situations. The options range from borrowing sanitary napkins from colleagues to purchasing them at workplace shops designated for female staff. These facts underscore the lack of systemic support for female health needs in many work environments. The availability of products directly at the workplace as said by several informants does provide a layer of support, yet it also reflects the expectation that women should handle these needs without additional accommodations or disruptions to their work.

B1: "If it happens unexpectedly, I use the cotton bits that are left over there or buy pads from the shop."

M5: "If you forget to bring pads or your periods come unexpectedly, I will ask my friends...if not I will buy from the next shop."

B4: "If we don't have pads, we buy from the counter in the lady's section... We have to bill it and buy."

Women in some shops are able to sit in the eating area or space in case of physical discomfort during menstruation. Most often they manage to sit down only during break times. They use ointments or pain killers for managing the pain or itching or go to hospital or home. For maintaining menstrual hygiene these working conditions women take bath twice a day, washing private parts with soap, dettol and hot water etcetera.

M1: "If there is no rush, I could sit there in the kitchen area or floor itself. There are stools. If pain is severe, I take paracetamol or meftal."

M6: "Always be neat and clean. Wash at times when needed. I use to wash in warm water and soap or dettol at morning and evening while taking bath."

Colleagues help each other to manage menstruation at workplace by buying or lending pads when needed. They also help by attending to customers if they are free and other person has an urgency. The fact that women count on their colleagues for support and provisions during unexpected menstruation highlights the collaborative coping mechanisms which are built in reaction to gendered workplace environment.

B1: "Yes, we all help each other in all matters. If I have stomach pain or back pain or any difficulty, my friend will go to the shop and buy, in case of medicines also."

B4: "In very urgency, if other staff are free, I ask them to handle for few minutes, I quickly go to toilet, change and come."

M5: "Yes, sure. One of the staff, when she came in the morning she got periods, she didn't have pad, so I gave mine and took her to my home in the afternoon as she felt very sick. She took medicine and rest at my home and came back. We asked the owner's permission also."

4.2.2.5 Gendered norms

Gender dynamics within the workplace play a significant role in how menstrual hygiene management is approached and handled. Testimonies from informants highlight the difficulties and discomforts associated with discussing menstrual needs with predominantly male supervisors or management. This reluctance is largely due to gendered norms that deem such topics inappropriate or uncomfortable for discussion between men and women, impacting the effectiveness of MHM practices at work.

There is shyness and also fear about discussing these as cultural and societal taboos restrict discussions about their menstrual needs.

B5: "No one will be ready for talking. If all are together, we could discuss. Mostly all are shy to speak about these with men. That's why it is not happening. May be later it will be done."

B2: "Our floor managers are gents. So, we don't discuss anything with them. We discuss among ourselves only."

M2: "We don't face much difficulties. Even if there, the owner is a male, we don't discuss such things with them. We discuss with each other only (lady staff). Nothing else."

Women were unable to advocate for better MHM facilities or accommodations unless there is collective action. The fear of standing out or being the sole voice on such matters discourages many from raising their concerns individually.

B4: "If others are also willing, we will talk, I can't go and talk alone."

B5: "No one will be ready for talking. If all are together, we could discuss."

A practical issue highlighted by the inability to discuss menstruation with male supervisors is the lack of adequate disposal facilities for menstrual products. This leads to situations where women have to carry used products home, a practice that is uncomfortable and could easily be remedied with proper facilities.

M2: "Moreover, there is no cleaning staff also. So if we put pads in there, who will clean?"

M4: "We bring back pads to home, it a bit difficult, if any solution for that come, it will be very helpful."

The lack of facilities to manage menstruation like private restrooms or disposal options for sanitary napkins, speaks to the wider gender norms that do not allow any public discussions about menstruation or menstrual hygiene needs. Gender norms dictate not only the physical infrastructure of workplaces but also the social environment where it is deemed unprofessional to discuss topics such as periods and reproductive health.

4.2.2.6 Health issues experienced

Informants whose work involves long duration of standing and inadequate sanitary facilities frequently report a variety of health issues. These issues range from musculoskeletal pain to infections and allergies related to menstruation management. Some of them report health issues like itching, sanitary napkin related allergy, fungal infections due to not changing pads till evening or due to sweating and bleeding. Rashes in the inner thigh was also a major problem.

Some informants have heavy bleeding and others have reported menstrual irregularities.

B5: "Earlier, when I was working in the other shop, I couldn't change pads till evening due to lack of facilities there. So, I had itching and allergies. Other staff also faced these issues. We didn't have toilet there; we have to go to another building nearby for that."

M5: "Yes, I have got fungal infection many times, due to sweating and bleeding. Even if I change at times, always there will some moisture over there. I consulted doctor for that and she gave ointment. So, whenever it happens, I use the ointment."

B6: "Earlier days, when I joined, that time I had more bleeding. I used to change more times. Sometime, when I didn't get time to change till lunch time, it caused rashes on my inner thighs and itching. So, after reaching home I take bath and wash with dettol and hot water and dry with the cotton clothes."

S3: "Yes, earlier I had irregular periods. Some months periods come twice, sometimes after 2 months only I get period. So, those time I need to check every day whether I got periods or not because I don't have so much symptoms like heavy stomach pain or back pain."

Some informants reported frequent urinary infections, a common issue that appears to be somewhat linked to their menstrual cycle or aggravated by workplace conditions such as high temperatures and insufficient water intake. One of the informants shared experience of recurrent infections requiring hospital visits suggests a significant impact on her well-being and work attendance. Another informant reported frequent infections, occurring as often as once every two weeks, particularly during hot seasons and sometimes post-menstruation, managed by hospital visits and injections.

B4: "Oh...yes, I often have that (UTI) (laughs). No particular timing, it happens often, like once in two weeks. especially during hot seasons. After periods also it happens, if water intake is less. Every time I go to hospital a take injection, then only it will go. Now a days its little better, not coming very often."

M6: "I had pus in urine and it caused some infections in the inner side. I felt severe back pain and painful urination, and burning like feeling. I consulted again for that took so many medicines for a month, now I drink more water during hot seasons."

Informants also reported issues related to vaginal infections, specifically mentioning symptoms like white discharge, often accompanied by a burning sensation. The condition appears exacerbated by environmental factors such as the hot season and personal constraints like insufficient hydration and delayed meals due to work site regulations.

M2: "I have white discharge quite often. It's a lot, like flowing. Before periods it will be more than usual. And in hot seasons also. I didn't consult doctor. Last summer it was a lot. I even used pads because my panties would get wet otherwise."

S1: "I have white discharge, but not too much, it increases during hot seasons."

Physical discomfort during menstruation is a common issue discussed across several interviews. Common symptoms include stomach and back pain, which many manage with over-the-counter pain relievers like paracetamol. B4 mentioned occasionally needing to go home due to severe pain, indicating some days the discomfort is beyond simple management strategies. Some of them seek medical assistance for the problems and some managed with self-treatment and home remedies.

M5: "Back pain and calf muscle pain will be there for first days. If I stand for long the pain will be more severe. I have varicose problem also."

M2: "I always have stomach pain and back pain during periods. I think almost all women have that. (smile) sometime, there will not be any pain or other signs, only after periods came, I knew. Sometimes pain will be severe also."

B1: "yes, a lot, knee pain, backpain, allergy, everything is there(laughs), I am having shoulder pain for the past two days. What to do."

Women have described cases of suffering from diseases and pain due to the fact that their places of work lacked appropriate amenities and were not giving enough break time to enable them to manage their periods.

4.2.2.7 Managing health issues

Employees in demanding work environments particularly those requiring long hours of standing or physical exertion, often face a range of health challenges.

Women do manage to deal with their pain and distress due to inadequate management of hygiene during menstruation. They ease the pain using simple procedures such as wearing knee caps or applying coconut oil for rashes. They choose to sit for some time, take some pills, or occasionally find time to rest all day when customers are few. When they were not able to manage the health issues themselves, they consulted medical professionals for better management.

M6: "I have knee pain, both legs. Very difficult. I consulted ortho doctor and taking medicines also. All doctors advice to take rest. How could we take rest. This is the source of my earning. I use knee cap and bandage from morning to evening for a support. See (showed both her legs)."

B6: "No, I usually apply coconut oil at night time after cleaning then I sleep. By morning it (rashes) will be ok, I don't go to any doctor for that."

M5: "If there is no rush, I could sit there in the kitchen area or floor itself. There are stools. If pain is severe, I take paracetamol or meftal."

M6: "I had pus in urine and it caused some infections in the inner side. I felt severe back pain and painful urination, and burning like feeling. I consulted again for that took so many medicines for a month, now I drink more water during hot seasons."

Women manage these health issues through a process of self-management and if the problem gets severe, they seek help of health care providers as mentioned.

4.3 Summary

Women in the sales force of textile retail sector in urban Pathanamthitta work long hours in shops. Their work involves organising the clothes, selling them and managing the customers and ensuring a sale. This work involves long hours of standing with limited options to get off their feet.

Menstruation is also managed in these contexts with limited facilities across most work sites.

Some work sites have mechanisms for disposal of sanitary napkins, while most shops do not.

Worksite regulations about the use of the wash rooms and duration of use also hamper women's ability to manage their menstrual periods in an appropriate manner.

Women are unable to negotiate the needs in these settings because of the gendered norms that do not allow discussions regarding menstruation with male colleagues and or supervisors. The resultant silence surrounding the issue of menstruation in these worksites leaves women to fend for themselves and work to support each other when in need. This results in health care issues like frequent UTIs, fungal infections, itching and knee and back pain and often these are self-managed until they can no longer be managed and then women seek assistance from formal health systems.

CHAPTER 5

DISCUSSION

5.1 Introduction

This study explores the barriers to menstrual hygiene management among adult female sales personnel in textile showrooms of urban Pathanamthitta district, Kerala. The study used a qualitative approach to identify these barriers using in-depth interviews with 18 women working in different retail textile showrooms in Pathanamthitta district. The thematic analysis using an inductive coding strategy yielded seven key themes: Work and Workers, Worksite, Worksite regulations, Managing Menstruation: Additional Burdens, Gendered Norms, Health Issues Experienced, and Managing Health Issues. Each theme was carefully selected to explore the workplace dynamics of textile retail industry and their influence on the unique challenges faced by women employees in effective menstrual hygiene management.

This qualitative approach based on in-depth interviews provides a nuanced understanding of the experiences of these women highlighting the often-overlooked convergence of occupational health and gender-specific needs. The research uncovers a spectrum of health issues directly linked to workplace conditions ranging from musculoskeletal pain due to prolonged standing, infections and allergies which are aggravated by inadequate facilities to manage menstrual hygiene in the workplace. These findings point to the lack of supportive infrastructure and policies that take into account the unique health requirements of women employees. Women's strategies for coping with these challenges through self-care measures or seeking medical assistance underscore the resilience and resourcefulness they employ to maintain their health and livelihoods. Moreover, the study reveals the social dynamics indicative of gendered norms and cultural taboos that create barriers to open discussions about menstrual health which further complicates the pursuit of better workplace conditions. The reluctance to engage in conversations with male supervisors about such matters not only

reflects societal taboos but also impacts the effectiveness of menstrual hygiene management practices within these work settings.

As we move into the discussion of these themes, we will explore the linkages between individual coping strategies and the broader implications for workplace policies. We will examine the limitations of the current study and how they inform the conclusions drawn. Finally, we will discuss the policy implications emphasizing the need for workplace reforms that prioritize the health and well-being of all employees, with a particular focus on the reproductive health of women.

5.2 Summary of Results

5.2.1 Work and the Workers

The theme “Work and Workers” describes the dynamics of employment among female sales personnel. The job acquisition process was predominantly through advertisements, personal recommendations or direct inquiries. For employees without prior experience, training was an essential criterion for encompassing skills from customer interaction to sales management. For many informants, proximity to shop, getting decent wages and cooperative and supportive colleagues are the factors contributing to job satisfaction. Nevertheless, the stress and strain of attending many customers at a time and managing increased work load due to staff scarcity or absenteeism were the challenges noted. The employment of additional staff during peak seasons suggests a recognition by management of the need for increased support, despite the fact, that is primarily for logistical tasks. Their work is demanding and often require long hours with minimal break times. The emotional aspect of their work also surfaced with many expressing a sense of duty despite the hardships. As stated by Bakotic and Babic, working conditions significantly influence overall job satisfaction, particularly for employees in challenging environments. (Bakotić and Babić, 2013)

5.2.2 Worksite

The “Worksite” theme explored the infrastructure and facilities available for managing menstrual hygiene at the workplace. The bigger showrooms mostly provide common or separate toilet facilities for customers and staff, medium shops also provide common toilet facilities. Small shops usually lack toilets inside the facility and hence staff use outside or neighbourhood facilities. The informants from bigger showrooms have to sign in a register for using washrooms and there is a time limit allowed for that. This form of regulation limits the convenience for maintaining hygiene related factors. Even though washrooms are provided, they lack amenities like hangers or shelves that could be used to keep sanitary products needed to manage the periods. Similar to findings from this study, Fry et al. also stated that women and girls globally face difficulties in handling menstruation particularly in workplaces that lack support for menstrual hygiene management. For employed women, these challenges significantly impact their well-being, attendance, job performance and earnings. The quality of toilet facilities even influences self-confidence of employees which affects retention and overall worksite satisfaction. (Fry et al., 2022) Due to the lack of proper disposal facilities, the informants adopted various strategies like tearing and flushing napkins, wrapping in newspapers or covers or plastic bags and carrying the soiled napkins back home for disposal. But these factors highlight significant discomfort and hygiene concerns as shared by the informants. Discussions among female staff about MHM issues are common, but no such conversations with management or supervisors were possible as they are men. A study conducted by Hennegan et al. among women workers in school, market and health care facility revealed the fact that most of the women keep menstruation secret or did not discuss such matters with owners or supervisors as many women reported that their supervisors were not supportive or do not allow them to take leave on menstruating days. (Hennegan et al., 2019)

From the present study, informants shared a feeling of relief as some shops have taken steps to improve facilities by installing incinerators or providing waste bins for pad disposal.

5.2.3 Worksite Regulations

The theme of “Worksite Regulations” explains how the policies and regulations of the shops affect the daily lives of the informants. These regulations include long working hours which lead to physical discomforts. The women reported feeling exhausted by the long shifts without adequate breaks which results in health issues like knee pain, backpain and cramps, which aggravates during menstruation. The restricted break times for using washrooms also highlight challenges in managing menstrual hygiene of these women, reflects broader issues of gender norms and workplace facilities. Studies done in similar settings also report that the women suffer from back pain, joint disorders due to prolonged work hours up to 12 hours and not being able to sit in between. (Anil, 2016; S, Jayasree, 2020) The rules to keep their personal belongings at specific provided spaces makes it difficult for women’s access to sanitary products when needed. Poor sanitary facilities and inadequate safety measures can compromise health and job satisfaction and this is also reiterated by the literature. (Sommer et al., 2016) The presence of CCTV cameras also inhibits them from discussing health concerns or private conversations and free movement.

5.2.4 Managing menstruation: Additional burdens

The inadequate facilities and societal stigma and taboos pose additional burdens in managing menstruation at workplaces. Informants commonly use sanitary napkins; some rely on a combination of napkins and cloth. Due to lack of disposal facilities some informants changed from sanitary napkins to menstrual cups. Others used innovative mechanisms like using multiple pads at a time, using pads and cloth, keeping cotton cloth in panties nearing their periods as a precaution due to fear of staining. Carrying sanitary napkins in bags and taking them out and keeping back napkins without others notice is a practised strategy. Unexpected

periods were managed by borrowing napkins from colleagues or buying from the shop or nearby shops. The lack of private rest areas or changing rooms also poses a problem in dealing with menstrual discomfort. The study highlights distinct challenges faced by female workers, especially regarding menstrual health management. The absence of proper means for managing menstruation hygienically can cause physical distress and psychological stress. This adds to the feelings of shame and at times, depression that women and girls already experience due to menstruation-related taboos and stigma. (*World Bank, 2022*)

5.2.5 Gendered Norms

This theme demonstrates the significant role of gender dynamics in workplaces especially in menstrual hygiene management. Statements from informants demonstrate the discomfort and difficulties in discussing menstrual hygiene needs or necessities with the management or supervisors as most of them are men. This hesitation comes from societal and cultural taboos that makes these subject unsuitable for discussion with males. The lack of open communication results in inadequate workplace facilities for menstrual management such as disposal facilities or private rest rooms or changing rooms. This forces women to adopt cumbersome practises which adversely affect their health too.

5.2.6 Health Issues Experienced

The lack of adequate menstrual hygiene management facilities at workplaces and coping mechanism adopted by the informants by long years of experience adversely affected their health. Due to the inability to change sanitary napkins as required, several informants reported that they experienced itching, rashes, fungal infection and allergies. Urinary tract infections (UTI) were reported as a more common issue by informants with two informants experience UTI frequently as once in two weeks. Some informants have irregular menstrual cycles, which could be influenced by stress and physical strain. Literature substantiates these findings. (*Das et al., 2015; Mishra et al., 2016; Sumpter and Torondel, 2013; Torondel et al., 2018*)

5.2.7 Managing Health Issues

The informants who are involved in long hours of standing and physical exertion experienced various health issues. Informants despite the inadequate menstrual hygiene management facilities, do self-management for these health issues such as taking pain killers, sitting for short times, applying coconut oil for rashes, wearing knee caps or bandages to relieve pain. When these self-management strategies offer no relief, they seek professional medical care.

5.3 Linkages and Implications

The findings reveal the challenges in menstrual hygiene management among women working in textile showrooms. Gender norms play a crucial role in shaping workplace cultures. Women often feel uncomfortable discussing menstrual needs with male supervisors or management due to societal norms that consider such discussions inappropriate or taboo. This situation creates an environment where women cannot speak up about their specific needs related to menstrual hygiene management. The reluctance to speak about such matters has serious implications on health and well-being of women employees. Many informants shared their sufferings including infections, allergies and physical discomfort due to inadequate sanitary facilities and break times. This affects this physical health as well as mental well-being and job satisfaction. Another fact revealed from the reports of informants was they prefer for collective action than individual arguments. Women fear standing out or facing negative consequences when asking for better MHM facilities on their own, which discourages them from voicing their concerns. Although this collective mindset indicates a potential for change, it also shows the difficulty in initiating such group actions without supportive workplace policies. There is also a notable lack of necessary infrastructure, such as private restrooms or suitable disposal facilities for menstrual products. This deficiency reflects deeper structural and policy failures that do not meet the basic needs of female employees. Addressing these issues requires more than just

minor changes; it necessitates a comprehensive re-evaluation of workplace policies to incorporate gender-specific needs into the standard workplace design and management.

5.4 Strengths and Limitations of the study

5.4.1 Strengths

The in-depth interviews of the study allow for deep insight into personal experiences and perceptions of the informants. This approach helps in understanding intricacies of gendered norms and its influences in workplaces.

This study focuses on a specific and often overlooked aspect of work place health and gender equality by highlighting challenges faced by women in proper menstrual hygiene management at work place. By direct interactions with person who are affected by the issues, there is authenticity and urgency for change in workplace policies.

The research links personal experiences to broader issues in systems and culture, showing that the problem is not just about individuals but also about institutions that need comprehensive solutions.

5.4.2 Limitations

There is a potential for non-response bias as women who are more affected or with long time experience and comfortable to speak about menstrual hygiene management issues might have been more likely to participate. The data is self-reported experiences which might be exaggerated or under reported because of the sensitive nature of the issue. The findings from a specific group of informants may not be directly generalizable to all workplace conditions or demographic groups.

5.5 Transferability

Most of the issues revealed such as inadequate sanitary facilities, lack of privacy are common in different types of workplace settings globally. Organizations across different sectors and geographies might find the insights relevant when considering improvements to workplace facilities and policies that support female employees. The cultural barriers to discussing menstrual hygiene openly are not unique to any one setting. Many workplaces around the world deal with similar challenges due to prevailing gender norms and taboos as evident from literatures. The findings could thus inform strategies in diverse cultural contexts where gender norms influence workplace practices. This aspect is particularly transferable as organizations strive to enhance employee well-being and productivity.

5.6 Conclusion

This research highlights the significant challenges and health issues faced by women due to inadequate menstrual hygiene management in workplaces. The findings reveal a critical need for better facilities and policies to support the reproductive health of women in the workplace which in turn impact their overall health and well-being, particularly menstrual health. The reluctance to discuss menstrual management difficulties openly intensified by gendered norms at workplace and the lack of appropriate facilities underlines a broader public health and occupational health issue. The impacts are not only limited to physical health including infections and discomfort, but also affect mental health and job satisfaction which can diminish overall productivity and workplace morale.

5.7 Policy Implications

- Governments and regulatory bodies should develop and enforce regulations mandating the provision of adequate MHM facilities in all workplaces. These regulations should include the availability of sanitary products, access to clean and private restrooms and

proper facilities for disposal of menstrual products. Organizations should be encouraged to create and implement MHM policies that address the specific needs of female employees. These policies should also include guidelines for managers on how to respectfully handle MHM related matters.

- Implement regular training sessions for all employees regardless of gender to foster a more inclusive and supportive environment. These sessions should aim to normalize the conversation around menstruation and MHM, reduce stigma, and educate employees about the biological and health aspects of menstruation.
- Invest in necessary infrastructure upgrades to ensure all workplace facilities are equipped with the means to support MHM. This includes providing sanitary bins, ensuring a consistent supply of water and maintaining clean and functional washrooms.
- Establish a feedback system for employees to anonymously report their experiences and suggestions related to MHM ensuring continuous improvement and adaptation of policies.

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ANNEXURE I

The list of primary codes, the code definitions and a selected sample of a typical segment

Sl. No.	Code Label	Code Definition	Example of typical code
1	Long years of experience in the same shop	The staff is working in the shop for many years (more than three years)	<p>how long have you been working in this shop?</p> <p>M2: for seven years, I joined the shop since it was open.</p> <p>I am working there for 15years,</p>
2	Obtained present job through response to call	The participant got the job through interview	<p>how did you get this job?</p> <p>A: there was advertisement for sales girl job from the shop, I went there, there was interview, a lot of people were there for interview, I thought I won't get the job</p>
3	Working in the same section for long years in the shop	Indicated the participant is experienced/expertise in handling the section she is assigned to	I like to work in my section, for years am in the same section
4	Being vigilant at work place because of cctv cameras with audio visual recording facility	Staff are cautious about their action and talks as some cctv cameras record audio also	<p>Oh, they can hear you also? Mostly the cameras record visuals only</p> <p>A: yeah, hmm... there some cameras record voice also, so we are very careful while talking each other also (sighs).</p> <p>yes, we can sit, but most of the time there will be customers. We sit at tea time and lunch time usually, but if customers are not here, there are some small stools, we sit. But all places have cameras, so we don't usually sit.</p>

5	Local proximity as a factor for job selection	The participant thinks that staying near to the shop is a factor for getting the job	I got selected, may be because I live in nearby place.
6	Long duration of working time	The working time of staff is more (nine to ten hours)	My work day starts at 9:30 in the morning and ends at 7:30 at night. my time is from 9:30 am to 8:30 pm.
7	Physical strain and exhaustion due to long work schedule	The difficulties they experienced physically due to long hours of work	I will be too much tired by that time, and my low back and legs feel too much pain and discomfort (kazhachupottunnappole thonnum).
8	Can't sit during work time in case of pain or discomfort	Staff cannot sit in the shop during work time even if they have any pain or discomfort	I have back pain issues and varicose vein. The pain become worse on days I couldn't be able to sit. Today was such a day. will you be able to sit in the shop if u feel pain or discomfort? A: oh..., no no, our shop is always crowded, I am in churidar and wedding section, so if a wedding party comes in the morning, they leave by evening only, all the time I have to stand,
9	More work strain due to reduction in staff	There will more work strain when other staff are on leave	we are 13, three lady staff and rest are men. Today other two ladies were on leave due to some emergencies. So, I had to attend their sections also. I work I saree section, the other two in kids' section and inner wear section. Kids section others could also manage, but in the inner wears, the customers prefer lady staff only, no? today I was running from section to section (laughs).
10	Carrying pads or cloth in bags for managing menstruation at workplace	The staff carry pads or other sanitary products in their bags for managing periods	My periods come two three days earlier to previous date, so I keep pad in bag near to the date. Mostly I carry a pad in bag every time

		if it starts during the work time	
11	Managing unexpected periods using cloth bits or buying pads from the shop	Manage periods with cloth bits left over in the shop or buying from the shop if participants don't have any sanitary products with them	<p>If it happens unexpectedly, I use the cotton bits that are left over there or buy pads from the shop by paying. There is a store for these things.</p> <p>In case if your periods start unexpectedly and you don't have pads with you, how will you manage? M4: usually I have. If not, other staff will give, if they don't have, we buy from the shop next to our shop</p>
12	Writing in register name and time of using washroom	The participants have to write in a register their name and time for using toilets	<p>are you allowed to use washrooms at your convenience? A: we can go at times we need, but there is a register, we have to write in that where we are going and the time .</p>
13	Limited time is allowed for using washrooms other than the break times.	Only ten or fifteen minutes is allowed for participants to use washrooms other than usual break times	<p>I felt difficulty in using the toilet due to lack of time.</p> <p>for using toilets 10 minutes maximum is allowed, otherwise they start searching for us. The floor managers keep a register of those who are present that day.</p>
14	Using pad and cloth at the same time due to difficulty in washing and long-time management	Participant uses cloth and pad at same time as there is no facility for washing, hence to manage till evening	I use cloth inside and pad outside, because changing will be difficult.
15	Availability of incinerator for disposal of pads	Incinerator is installed in the shop for pad disposal	Now there is a pad burning machine installed, so disposal is now not a big problem
16	Taking back home the used pads when disposal facilities are not there	Participants take the used pads back to home as there are no disposal facilities	<p>so, what do you do with the used pads in the shop? M5: we take back the used pads to home. There is no waste disposal facilities.</p>

			<p>Ok that's good. What do you do with the used pads at shop? Are there facilities for disposal?</p> <p>S3: No, there are waste bin, but we don't put in that. they are for food and plastic. So we wrap the pads in paper, and keep in our bags.</p>
17	Managing with extra pads during days of over bleeding	Participants use extra pads on days which they have over bleeding especially on first two days	<p>how could you manage from morning till night? Its difficult no?</p> <p>A: yes,,at the first wo days its difficult, if there is more bleeding than usual, I stick one more pad over the cloth.</p> <p>how do you manage when your period starts here at work?</p> <p>M4: for the first two days, I stick two pads together</p>
18	Physical discomforts experienced by not changing or washing the cloth till evening	The participant experiences physical discomforts like itching when the pads are not changed for long time	<p>did you have any such problems?</p> <p>S3: I had pad allergies earlier.</p> <p>I feel very discomfort with sweat and bleeding, sometimes itching also occur</p>
19	Different washrooms for customers and staff	There are separate washrooms available in shop for staff and customers	<p>are there washrooms separate for staff and customers? How do you manage during periods?</p> <p>A: yes, we have separate washrooms.</p>
20	Separate washrooms assigned for staff on each floor	Separate washrooms are given for the staff of each floor in the shop	there are 4 washrooms assigned for each floor staff. It's on the terrace area
21	Space for eating lunch and tea in the terrace area	The participant eats their lunch and have tea in a space provided in the terrace area	we eat lunch and tea also in a corridor in that area.
22	Discomforts in bringing back used pads in bags where food and	The participants feel very discomfort in bringing back the used pads in their bags to home as food	<p>how do you manage to take back the soaked pads and keep in bag?</p> <p>M5: its very difficult. For me I have to change two-three times. I wrap them in newspaper, put in a plastic bag and</p>

	other things are kept	and other things are also carried in the same bag	keep it in a corner in the kitchen area. If I keep them in bag, it will start smelling by evening. Before going home, I take the cover, keep inside my shawl and put it in bag. Two days are difficult for me.
23	Discussion with management for pad disposal facilities	Discussions happened in management level for pad disposal facilities	do you ask the owner to keep a dustbin in the toilet, so that you can dispose the pads, no? M5: we don't usually talk these matters with men. A lot of discussion and meetings happened on this issue and now that machine is put.
24	Discussion among colleagues about difficulty in pad disposal	The staff discuss among themselves about their difficulties in pad disposal	Okay, so what are the discussions that happened among your colleagues and you about maintaining menstrual hygiene here in the workplace? S3: discussions... nha, when someone have periods, they share about like if they have stomach pain or other difficulties, we tell each other or if their periods are about to come, like they feel angry so that tell my periods is about to come like that. and about disposing pads also we discuss, is very uncomfortable to keep pads in bag and take back home. it will stink some time, no?
25	Getting scolded by supervisors when pads were flushed in the toilets	When pads are flushed in the toilets, the cleaners complain to supervisors and staff get scolded by them	If pads were seen in a toilet, the staff on the particular floor whom the toilet is assigned get scolded by the supervisors.
26	Using other toilets in urgencies when assigned toilets are not usable	The participant uses other toilets in case of urgencies, if the assigned toilet is	So, you can only use the toilets assigned to you? A: it is the rule actually, but at times we use others also in urgencies.

		occupied by other staff	
27	No separate room for changing clothes and taking rest when necessary	There are no separate room or resting place available for female staff for changing clothes or taking rest when necessary	<p>do you have any changing room or resting space in case you need to change the dress n all? M5: no, we can change in toilet, the toilet is much big and clean.</p> <p>ok... Are there any facilities for changing clothes if necessary or taking rest? S3: no, we have to change in the washroom only and if we want to take rest, we go and sit in that eating area.</p> <p>is there any specific space for you to take rest for few minutes in case of any difficulty or changing room if you need to change dress? M4: for changing dress, trails rooms are there, no other specific places for us. If we need to sit, we use the stools and sit in some corner</p>
28	Limited time allowed for taking rest in case of physical discomforts	Only ten or fifteen minutes are allowed for the staff to take rest when they feel physical discomforts	<p>are you allowed to take rest if you face any discomforts or pain during periods? A: for 10 minutes (sighs), it's the usual toilet interval time., not more than that.</p>
29	Taking leave and going back home in very difficult times	The participant takes leave and go back home if they felt very difficult to continue work	if there is much difficulty, we have to take leave and go home.
30	No discussion about menstrual discomforts with supervisors as most of them are men	The staff do not discuss with male supervisors about the menstrual discomforts	But most of us don't discuss these things with the supervisors, all supervisors are men,
31	No particular difficulties in managing periods like	The participants didn't feel any difficult situation like unavailability of	do you ever feel any particular difficulties in managing periods like unavailability of water or pads,

	unavailability of water or pads	water or pads during menstruation at workplace	washroom restrictions, anything like that? A: no no
32	No facilities like hangers or shelves in toilet for keeping pad or cloth	There are no hangers or shelves in the toilet for hanging clothes or keeping pads	do the wash rooms have facility to hold things, hangers or shelves to keep the pads, soap etc? A: Mmm...no, its only a room space with toilet, tap, bucket and mug
33	Colleagues help in buying pads from the shop in unexpected periods	During unexpected periods, the colleagues help in buying pads from the shop	if u have unexpected periods and you don't have pad with you, will your colleagues help? A: yes, if they have, they will give or they go to store and buy ...we help each other
34	Wait until the customers are gone to use the toilet	During busy times, the staff have to wait until the customers are gone to use the washroom	f you couldn't manage periods according to the way that you feel is hygienic, do you think any health issues will be there? M4: if customers all more, we cannot change at times we need, it will be discomfort and cause irritations., like if we cannot change and all.
35	Colleagues help each other in attending customers in urgencies	If a staff have urgency in using toilet, the colleagues will manage to attend the customers	at the peak times when customers are crowded and you are in your period, what do you do if you need to use the washroom urgently? A: in that case , we check for other staff who are free and ask them to handle the customers for a while.
36	Employing extra staff during season times in the shop	Temporary staff are employed in the shop during festival seasons	:do the management employ more staff during season times? A: yes,, some staffs are appointed on daily wages, they are provided with hostel facility and food
37	Staff can't take bag or personal belongings with	The staff are not allowed to take their	do you keeps your bags with yourselves or is there any particular space for that?

	them at work time	bags with them during work time	A: we keep the bags in shelves provided near manager rooms, when we enter the floor we have to keep the bags and phones there., so if needed, we can use the landline
38	Manage to take pads from bag without others notice	The participants manage to take pads from the bags without being noticed by others	no? if you are in periods, how do you take pads from bag and go to the other building without others noticing? S3: (laughs) Oh that's not a problem. I take from the bag and keep in shawl or inside the churidar and we come back. nobody notices if we behave like normal how do you manage to take pads from bags without others noticing? M4: we do it normally, usually no one notices, we take and keep in side shawl or saree and go to toilet(laugh)
39	Separate toilet for gents on another floor	There is a separate toilet for gents in another floor of the shop	what about gent's toilet? Is it same at the terrace area? A: no, they have toilets in another floor
40	No difficulty in travelling during periods to workplace	The participant has no difficulty in travelling during periods	do you feel any difficulty in travelling by bus during periods? A: I don't feel any difficulty like that
41	Sitting in eating area for some time in case of stomach pain and other discomforts	When the participant feels stomach pain or other discomfort, she takes rest in the eating area for sometime	M5: if there is no rush, I could sit there in the kitchen area or floor itself. There are stools. If pain is severe, I take paracetamol or meftal. how do you manage when you have headache or stomach pain? M4: when I have headache, I take paracetamol, sit for some time , like that
42	Get call from supervisors if staff is not present after	The staff will be called by supervisors if they are not present after allowed break time	So we will get call from floors or someone come in search of us.

	allowed break time		
43	Going back home or hospital in case of much difficulties	The participant go back home or go to hospital in case of severe difficulties during menstruation	If we feel too much difficulty we are allowed to go home also or if needed we go to hospital
44	No infection and health problem related to menstruation	The participant didn't have any infection or health problem related to menstruation	do you ever had any infections or health problems related to menstrual cycle? A: no, no, nothing like that
45	Pad allergies experienced due to long standing and not changing pads	The participant had pad allergies due to not changing pads for long hours	Do you ever experience any allergies or infections related to periods, like pad allergy, fungal infections? M5: yes, I have got fungal infection many times, due to sweating and bleeding. Even if I change at times, always there will some moisture (nanavu) over there. I consulted doctor for that also. she gave ointment. So, whenever it happens, I use the ointment
46	Discussion with management on pad disposal facilities	The discussions happened with management about pad disposal facilities	were there any discussions happened with management about your difficulties to manage periods during work? A: yes, earlier some people used to change pads in the godowns where there is no camera, and put used pads there, it became an issue. So, discussions happened, and after that the burning machine is installed.
47	Shyness in discussing with management about MHM problems	The staff are shy to discuss menstrual hygiene management problems with management	: do you ask the owner to keep a dustbin in the toilet, so that you can dispose the pads, no? M5: we don't usually talk these matters with men.
48	Taking bath twice while menstruating for maintaining hygiene	For maintaining hygiene during menstruation, the participant takes bath twice daily	We have to maintain our body clean, bath two times always maintain hygiene during periods, even if it is older time or now, hygiene is important. Personal hygiene

			should be maintained. I use to take bath morning and evening during periods.
49	Health issues experienced due to long standing and working environment	The participants had health issues because of long standing and the working atmosphere in the shop	do you have any health issues due to this long standing? M5: I have back pain issues and varicose vein. The pain become worse on days I couldn't be able to sit. Today was such a day do you experience any other health issues? A: yes, a lot, knee pain, backpain, allergy, everything is there(laughs), I am having shoulder pain for the past two days. What to do,
50	Suggesting free provision of sanitary pads and maintaining water availability without fail	The participants have a suggestion for providing a free provision of sanitary pads as lot of lady staff are working in the shop	they have to provide free sanitary pads. we work for them all these years no. (smile). And other issue is that water is pumped from ground floor well to a tank, from that tank a motor is connected to fill water in other tank for our toilets. So, if the security forgets to pump, we have to tell supervisor, he calls security, then water pumped to one tank, from there again to other, so it takes lot of time.so if a staff come from far pace and she need to use the washrooms urgently, it's difficult to manage in the allowed 10 minutes
51	Using extra-large pads on days of over bleeding	For managing over bleeding, extra-large pads are used	its very difficult for me to manage in the first two days. I have heavy bleeding. I use extra-large pads,
52	Staining of clothes because of inability to change pads at time	The clothes are stained with blood, when the participant was unable to change the pad when needed	one time, the pad was soaked in blood and my under garment also got stained. I was wearing a churidar, by time I went to the toilet, my pants also got stained. It was very embarrassing. One of my friends bought a new undergarment from the shop and gave to me.
53	Common toilet for staff and customers	The toilet in the shop is common for staff and customers	chechi, are the toilets same for staff and customers? M4: yes, it's the same. two toilets are there

54	Hangers available in toilets	Steel bar hangers are available in toilet for hanging clothes	is there hangers or handles for hanging clothes while you change? M5: there is a steel bar, where we can hang the clothes. We can take bath also. it's a good washroom.
55	Helping colleagues during difficulty in managing periods	The colleagues help each other during difficulties in managing menstruation	yes, sure. One of the staff, when she came in the morning she got periods, she didn't have pad, so I gave mine and took her to my home in the afternoon as she felt very sick. She took medicine and rest at my home and came back. We asked the owners permission also. Q: did the owner allow you?
56	Getting decent salary as a factor for continuing the job	The participant is satisfied in the job because she gets decent salary	I get decent salary for my work; I like this job
57	Seek medical consultation for over bleeding issues	Participant have to seek medical consultation for over bleeding issues	did you consulted doctor for the over bleeding issues? M5: yes, I consulted before many years, the doctor told bleeding varies in person and if the bleeding persists for more than 5 days like the first days, then only I have to worry. For me from the third days bleeding will be very less only.
58	Obtained present job through recommendation	The participant obtained present job through recommendation	ok... how did you get the job here? S3: I had stopped my studies in between, so I joined the shop. The shop was near by our home. My father asked the owner, and got job here. Now his sons are looking after the shop. They are younger to me. known persons.
59	More comfortable at home in managing periods	The participant feels more comfortable in managing periods at home rather than the shop	at home sometimes I use cloth also, at evenings, for me bleeding is there for three days only. After that I burn the pads together. At home we can change and go to toilets whenever we need,

			here we have to adjust according to the situations, no
60	No toilet provided inside the shop when the number of women staff are lesser in number	There are no toilets inside the shop as the number of female staff are lesser in number	<p>how is the toilet facilities in the showroom?</p> <p>S3: mm... there is toilet in the wholesale building nearby. We go there at break times or when we are in need.</p> <p>R: is there any particular timing in using the washrooms?</p> <p>S3: no no, if we need, we can use there is no problem in that.</p> <p>R: how many washrooms are there for you staff?</p> <p>S3: there is only one toilet in the wholesale building near to this shop</p> <p>R: So, you both, like the staff here and the wholesale building use hat one toilet only, no?</p>
61		When water is not available in the toilets, participant have to take water in bucket to the toilet which is upstairs in another building	<p>There will be water all the time. sometime during the summer season or if the road constructions are going on, there will be shortage of water and that time we suffered a lot. we have to take water from the well from the nearby house and we have to take to the toilet. It is on the upstairs the ground floor it is the wholesale building, on the upstairs is our eating area and the toilet area. so we had to take water from other places and we have to take in buckets to the toilets. That was difficult. Now a days, if water is not there, the owners buy water and fill in tanks.</p>
62	Menstrual irregularities experienced	Experiencing menstrual irregularities by the participant	<p>Do you have any periods related issues like change in date, spotting, white discharge or heavy bleeding, anything?</p> <p>S3: Yes, earlier I had irregular periods. Some months periods come twice, sometimes after 2 months only I am getting period. so that time I need to check every day whether I got periods or not because I don't have so much</p>

			symptoms like heavy stomach pain or back pain.
63	Not changing pads in the absence of disposal facilities	The participants are not changing the pads due to absence of disposal facilities	ok...how often do you change pads those days? M4: I usually don't need to change, I stick two pads no, it will be enough for me till evening.
64	Not changing pads in the absence of disposal facilities	The used pads are wrapped in newspaper and again wrap in plastic bag to take back home	oh... good... mmm..., if there is a need to change due to leakage or over bleeding, hoe many times you change and how do wrap the used pads and bring back? M4: mmm...either in old newspaper or we use the paper covers that are torn or wasted, used here. The same way in shawl or saree we bring back also. during tea break and lunch time , I will be changing in that case.
65	Ever experienced urinary infection	Whether the participant experienced urinary infection ever, especially during the work duration	M4: no, at hot seasons, if we don't drink adequate sometimes, I feel back pain and stomach pain, then I know, it's because to less water intake, I drink warm water a lot, now no such difficulties.
66	Physical discomforts experienced during menstruation	The physical discomforts experienced by participant during menstruation	do you have any discomforts related to periods? M4: sometimes, I have stomach pain, one day only. No other
67	Managing pain with knee cap and bandage during work	Managing knee pain by putting knee cap and bandage during long standing working time	M6: I have knee pain, both legs. Very difficult. I consulted ortho doctor and taking medicines also. all doctors advice to take rest. How could we take rest. This is the source of my earning. I use knee cap and bandage from morning to evening for a support. See (showed both her legs).
68	Using toilet limited time only due to difficulty in sitting in	Using toilet very few times(once or twice) as there is difficulty in sitting in Indian toilet	I have knee pain due to the long standing, its bit difficult to use the toilet also. Q: that's sad, how do you manage then?

	Indian type of toilet		<p>M6: I use in urgency or one time at lunch break, so I manage.</p> <p>Q: is this because of this knee pain you use the toilet very limited times?</p> <p>M6: mainly that is the reason. Even if I have urge to urinate, I hod as much as I can till lunch time. In very urgencies only, I used more than one time.</p>
69	Changed from pads to menstrual cup for more convenience and difficulty in disposing pads	Started using menstrual cups due to more convenience and difficulty in disposing pads at workplace	<p>I am using menstrual cup. So I can wash during the break time.</p> <p>Q: so you wash and put the same cup?</p> <p>M6: yes, I do so. It is very convenient for me.</p> <p>Q: how long have you been using the cup?</p> <p>M6: its about two years. Earlier I used pads. It was very difficult in changing. Ther is no provision for disposing pads.</p>
70	Keeping cotton cloth inside panties nearing the date as a precaution and fear of staining due to lack of time for using toilet	Cotton cloth piece is kept in panties when menstruation dates are near as a precaution, and fear of not getting time to use toilet for checking	<p>Q: during rush hours, you said no you don't get time to go to toilet? How do you manage when periods start that time and you didn't have any precautions?</p> <p>M6: sometimes, I had to wait, in very urgencies, I some how managed to go to the toilet asking help from my colleagues. After one such situation I use to keep cotton cloth inside panties nearing my date, if something happens unexpectedly, I could manage for some time.</p>
71	Could sit during free time when there is no customer	The staff could sit in the shop during free times when there are no customers	<p>R: are you able to sit in between if customers are not there?</p> <p>S2: yes, yes, we can sit, there are stools for us. When we are free, we can sit and talk.no problem in that. but most of the time customers will be there (laughs)</p>

72	Tearing pad and flushing the cotton in toilet due to lack of disposal facilities	Used to tear pads and flush the cotton in toilet in the absence of pad disposal facilities at the shop	how do you dispose the used pads? Is any facility for disposal available here? A: it is a problem actually, usually I wash the pads, tear it t and flush the cotton, the outer part I cover with paper or plastic bag, bring back to home and burn it
73	Experienced white discharge during hot seasons	The staff had white discharge more during hot season	do you have any difficulties related to menstruation like overbleeding, white discharge ... B2: yea... at times I have white discharge, it happens mostly, very difficult in hot seasons, because if we don't drink enough water or urinate, it happens no.. and when there is lot of customers, I won't be able to have food on time also, that times I felt giddiness and fatigue. I felt all difficulties. (smile) : ok ok... do you have any conditions like irregular or over bleeding, white discharge or any other infections? M2: I have white discharge quite often. It's a lot, like flowing. Q: oh... when is it became excess? Did you consult doctor for that? M2: before periods it will be more than usual. And in hot seasons also. I didn't consult doctor. Q: do you felt any colour change or unusual smell in the discharge? M2: no , nothing like that. I drink lot of water now, so it is normal. Last summer it was a lot. I even used pads because my panties would get wet otherwise.
74	Using cloth for sanitary protection	Cloth is used as means for sanitary protection	what sanitary product do you use during periods?

			<p>B2: actually, I use clothes. I use pads also when having over bleeding or travelling long distances</p> <p>Q: at the shop, what do you use?</p> <p>B2: mostly cloth only,</p>
75	Separate room for sitting for staff in case of difficulties	There is separate room available for staff to sit during difficulties	<p>there is a small room , If some one have much difficulty, they go to that room and take rest for some time.</p> <p>Q: is there such a room in all floors? Is that for the staff only?</p> <p>B2: no, in one of the floors, if anyone have difficulties, not only periods, if there is fever etc, we can talk to the supervisors and take rest for some time there.</p>
76	Few years of experience in the same shop	The staff is working in the shop for less than three years	<p>Q: ok... chechi, how long have you been working in the shop?</p> <p>B5: its almost 2 years. Earlier I was working in a small textile shop at our place. After covid there was no sale and the shop closed. Then I joined here.</p>
77	Done surgical removal of ovarian tumour	Emergency surgical removal of right ovarian tumour is done	<p>Q: do you have any difficulty during periods, like nausea, vomiting, headache etc?</p> <p>A: not much, but earlier I had a tumour in my right ovary and it is surgically removed.</p>
78	Changed from cloth to pads for sanitary protection as latter is more user friendly	Changed to pads from clothes for more convenience in using	<p>Q: do you use pads at home also?</p> <p>B4: yes, it is comfortable. Earlier I used clothes also, but for last 5-6 years am using pads only. It is comfortable and easy. My daughters when they grow up told me to use pads rather than clothes(smile)</p>
79	No faucets available in toilet and flush are not working	Hand faucets are not available in toilets and flush in some toilets are not working properly	<p>Q:do the toilets have all the facilities like taps, hand faucet, bucket like that?</p> <p>B4: water is always there, bucket and cup is there. But no hand shower. But I feel if hand faucet is there, it will be more helpful. The toilets are European type. Washing with cups is difficult with that toilet. We have to squat on floor and wash. Then we pour lotion</p>

			and water on floor, because other also need to use. But there are people who cannot squat because of knee pain or other health issues, there case is more difficult. It is difficult, but we can't say anything
80	Use menstrual cups on first two days of menstruation due to over bleeding	The staff uses menstrual cups for the first two days of menstruation because of over bleeding	Q: what type of sanitary product are you using during periods? B5: I use pads and menstrual cup. For the first two days I use cup while at shop. For first two days , I preferably use menstrual cup, because I have bleeding more those days.
81	Less frequency of using toilet while using menstrual cup	The participant uses toilet less frequently while using menstrual cups because of its more holding capacity	Q: ok, how do you change and clean the cup during work time? B5: during periods, when I use cup, I change at lunch break only. It can hold more time than pads. Like that
82	Take back the used menstrual cup for better cleaning and putting fresh cup	For better cleaning and drying before re using, the used cups are taken back home	Q:so so, how do you clean the cup? B5: I wash it with water, I clean myself. Then I put one new cup after that. I take the used one back home. I use only after cleaning with hot water and soap and dried.
83	Manage to take back used cup to home in bag	Covering cups in paper or plastic bags and taking back home in bags	Q: how do you take the cups back home? B5: I wrap in paper and cover again with a plastic bag ang keep in my bag and take home.
84	Waste bins are kept in toilet for disposing pads	In some shops, waste bins are kept for disposing pads	Q: while using pads, is there provisions for disposal and all? B5: yes, wate bins are kept in the toilet, we can put in that. Q: then, how the bins are cleaned and all? How the pads are disposed? B5: cleaners are there for that. they take the pads; I don't know what they do with the pads. I have seen big lorries come to take wastes, may be all wastes are sent in that.

			<p>Q: while using pads, if u need to change, how do you manage? Is there provisions for disposal and all?</p> <p>B2: yes, there is provisions in the toilets. Bins are kept.</p>
85	Suggestion for separate toilet for customers	Participant suggest separate toilet for customers for better working environment	<p>Q: do you have any suggestions for a better workplace environment?</p> <p>B5: if we have separate toilets, it will b every useful. We have wait if customers are there and we usually go in urgency, it is very difficult</p>
86	Using washrooms mostly at breaktimes	Most of the participants use washrooms during the break times (tea and lunch break)	<p>how often do you use washroom while at work?</p> <p>B5: usually during the breaktimes only. In urgency we use. Mostly breaktime only. All time there will be customers</p> <p>M5: usually at tea time from 10:30 am we get 10-15 minutes break and half hour during lunch time also. in between if we are free, we can sit. But today I couldn't sit for a bit rather than the lunch time. I didn't get time for toilet also. from morning to lunch time, I was waiting to use the toilet, customers were coming one by on</p>
87	Applied coconut oil or baby powder for rashes	For rashes in inner thighs, participant applied coconut oil and baby powder	<p>Q: Did you consult any doctors for the allergy and rashes?</p> <p>B6: no, I usually apply coconut oil at night time after cleaning then I sleep. By morning it will be ok, I don't go to any doctor for that.</p>

AXIAL CODES	PRELIMINARY CODES
1. Years of experience in the same shop	<ul style="list-style-type: none"> • Long years of experience in the same shop • Working in the same section for long years in the shop • Few years of experience in the same shop
2. Variation in work strain in off season and season	<ul style="list-style-type: none"> • Employing extra staff during season times in the shop • More work strain due to reduction in staff
3. Colleagues help to manage menstrual difficulties by buying /lending pads or standing for each other	<ul style="list-style-type: none"> • Using other toilets in urgencies when assigned toilets are not usable • Colleagues help in buying pads from the shop in unexpected periods • Colleagues help each other in attending customers in urgencies • Helping colleagues during difficulty in managing periods
4. Means of managing menstrual needs at work – additional burden	<ul style="list-style-type: none"> • Carrying pads or cloth in bags for managing menstruation at workplace • Managing unexpected periods using cloth bits or buying pads from the shop

	<ul style="list-style-type: none"> • Using pad and cloth at the same time due to difficulty in washing and long-time management • Managing with extra pads during days of over bleeding • Manage to take pads from bag without others notice • Keeping cotton cloth inside panties nearing the date as a precaution and fear of staining due to lack of time for using toilet • Using cloth for sanitary protection • Done surgical removal of ovarian tumour
5. Difficulties faced due to worksite policies	<ul style="list-style-type: none"> • Long duration of working time • Physical strain and exhaustion due to long work schedule
6. Limited facilities in toilet available to the women working in shops	<ul style="list-style-type: none"> • No faucets available in toilet and flush are not working • No toilet provided inside the shop when the number of women staff are lesser in number

	<ul style="list-style-type: none"> • More comfortable at home in managing periods • Common toilet for staff and customers • No facilities like hangers or shelves in toilet for keeping pad or cloth • Separate washrooms assigned for staff on each floor • Different washrooms for customers and staff
<p>7. Regulatory restrictions at worksite that affect ability to comfortably manage menstruation</p>	<ul style="list-style-type: none"> • Can't sit during work time in case of pain or discomfort • Writing in register name and time of using washroom • Limited time is allowed for using washrooms other than the break times. • No separate room for changing clothes and taking rest when necessary • Limited time allowed for taking rest in case of physical discomforts • Taking leave and going back home in very difficult times • Wait until the customers are gone to use the toilet

	<ul style="list-style-type: none"> • Staff can't take bag or personal belongings with them at work time • Using washrooms mostly at breaktimes
8. Advantages of this job as sales person	<ul style="list-style-type: none"> • No difficulty in travelling during periods to workplace • Getting decent salary as a factor for continuing the job • Obtained present job through recommendation • Obtained present job through response to call • Local proximity as a factor for job selection
9. Self-management of physical discomfort during periods	<ul style="list-style-type: none"> • Sitting in eating area for some time in case of stomach pain and other discomforts
10. Self-treatment for adverse health consequences due to poor menstrual management and other health problems	<ul style="list-style-type: none"> • Managing pain with knee cap and bandage during work • Applied coconut oil or baby powder for rashes
11. Gender norms preventing from discussing MHM challenges	<ul style="list-style-type: none"> • Shyness in discussing with management about MHM problems

	<ul style="list-style-type: none"> • No discussion about menstrual discomforts with supervisors as most of them are men
<p>12. Difficulties due to non-availability of disposal facilities pads at work place</p>	<ul style="list-style-type: none"> • Taking back home the used pads when disposal facilities are not there • Discomforts in bringing back used pads in bags where food and other things are kept • Getting scolded by supervisors when pads were flushed in the toilets • Have to take water in bucket to upstairs toilet when water is not available in toilet • Not changing pads in the absence of disposal facilities • Tearing pad and flushing the cotton in toilet due to lack of disposal facilities • Take back the used menstrual cup for better cleaning and putting fresh cup • Manage to take back used cup to home in bag
<p>13. Health issues related to menstruation due to the limited facilities</p>	<ul style="list-style-type: none"> • No infection and health problem related to menstruation

	<ul style="list-style-type: none"> • Pad allergies experienced due to long standing and not changing pads • Health issues experienced due to long standing and working environment • Seek medical consultation for over bleeding issues • Menstrual irregularities experienced • Ever experienced urinary infection • Physical discomforts experienced during menstruation • Using toilet limited time only due to difficulty in sitting in Indian type of toilet • Experienced white discharge during hot seasons • Physical discomforts experienced by not changing or washing the cloth till evening
14. Hygiene practices during menstruation	<ul style="list-style-type: none"> • Taking bath twice while menstruating for maintaining hygiene
15. Discussion with management and colleagues about MHM difficulties	<ul style="list-style-type: none"> • Discussion with management for pad disposal facilities

	<ul style="list-style-type: none"> • Discussion among colleagues about difficulty in pad disposal • No discussion about menstrual discomforts with supervisors as most of them are men • Shyness in discussing with management about MHM problems
<p>16.Favourable worksite facilities and infrastructure</p>	<ul style="list-style-type: none"> • Hangers available in toilets • Could sit during free time when there is no customer • Separate room for sitting for staff in case of difficulties • Waste bins are kept in toilet for disposing pads • Separate toilet for gents on another floor • No particular difficulties in managing periods like unavailability of water or pads • Space for eating lunch and tea in the terrace area • Availability of incinerator for disposal of pads

<p>17. Suggestions for better facilities</p>	<ul style="list-style-type: none"> • Suggestion for separate toilet for customers • Suggesting free provision of sanitary pads and maintaining water availability without fail
<p>18. Adaptations to cope with present MHM challenges</p>	<ul style="list-style-type: none"> • Using extra-large pads on days of over bleeding • Changed from pads to menstrual cup for more convenience and difficulty in disposing pads • Changed from cloth to pads for sanitary protection as latter is more user friendly • Use menstrual cups on first two days of menstruation due to over bleeding • Less frequency of using toilet while using menstrual cup
<p>19. Restriction on any discussion regarding health hazards due to fear of Cctv on worksite</p>	<ul style="list-style-type: none"> • Being vigilant at work place because of cctv cameras with audio visual recording facility

ANNEXURE II

Themes and corresponding Axial codes

THEMES	AXIAL CODES
1. Work and the workers	<ul style="list-style-type: none"> • Years of experience in the same shop • Variation in work strain in off season and season • Advantages of this job as sales person
2. Worksite	<ul style="list-style-type: none"> • Limited facilities in toilet available to the women working in shops • Difficulties due to non-availability of disposal facilities pads at work place • Discussion with management and colleagues about MHM difficulties • Favourable worksite facilities and infrastructure
3. Worksite regulations	<ul style="list-style-type: none"> • Difficulties faced due to worksite policies • Regulatory restrictions at worksite that affect ability to comfortably manage menstruation • Suggestions for better facilities • Restriction on any discussion regarding health hazards due to fear of Cctv on worksite
4. Menstrual management: additional burdens	<ul style="list-style-type: none"> • Colleagues help to manage menstrual difficulties by buying /lending pads or standing for each other

	<ul style="list-style-type: none"> • Means of managing menstrual needs at work – additional burden • Self-management of physical discomfort during periods • Hygiene practices during menstruation • Adaptations to cope with present MHM challenges
5.Gendered norms	<ul style="list-style-type: none"> • Gender norms preventing from discussing MHM challenges
6.Health issues experienced	<ul style="list-style-type: none"> • Health issues related to menstruation due to the limited facilities
7.Managing health issues	<ul style="list-style-type: none"> • Self-management of physical discomfort during periods • Self-treatment for adverse health consequences due to poor menstrual management and other health problems

ANNEXURE III

INFORMANT INFORMATION SHEET

Study Title: Challenges to menstrual hygiene management among adult female sales personnel in textile showrooms of urban Pathanamthitta District, Kerala

Researcher: Dr. Shamila Beegum

Affiliation: Achutha Menon Centre for Health Sciences Studies, Sree Chitra Tirunal Institute for Medical Sciences and Technology, Thiruvananthapuram

Greetings,

I am Dr. Shamila Beegum, pursuing my Master of Public Health degree at Achutha Menon Centre for Health Sciences Studies. As part of my academic research, I am conducting a study titled "Challenges to menstrual hygiene management among adult female sales personnel in textile showrooms of urban Pathanamthitta District, Kerala", focused on understanding the experiences and challenges to maintenance of menstrual hygiene among of female sales personnel working in textile showrooms in urban Pathanamthitta district, Kerala.

Study Objective

The primary objective of this study is to gain insights into the experiences, challenges, and strategies employed by female sales personnel in managing menstrual hygiene within their workplace.

Why This Study is Conducted

Menstruation is a natural biological process which is often recognized as a period of change from adolescence to womanhood. It is the monthly shedding of the functional layer of the uterine endometrial lining that occurs when ovulation is not followed by fertilization. It occurs approximately every 28 days, ranging from every 21 to 45 days. Menstrual hygiene management is an essential aspect of women's health and well-being, and it can have a significant impact on their workplace experiences. Female sales personnel might often encounter certain barriers or difficulties related to menstrual hygiene in their workplace, and this study seeks to address those concerns.

How the Study Will Be Conducted

I have chosen to conduct this study in various textile showrooms within urban Pathanamthitta district, Kerala. From the showrooms, the female sales personnel who are willing to share information will be selected to be interviewed to understand their experiences managing their periods in the work place. The interviews will be audio recorded for further study purpose. The

interviews will be confidential and conducted in a private setting to ensure your comfort and privacy.

Requesting to take part in the study

I am inviting you to be part of this study. To ensure that the study is relevant to your current situation, I may need to ask whether you are currently menstruating or not. Before you participate in this, you are free to discuss about this study to any one of your concerns. This information sheet may contain the words that you would feel difficult to understand. If you find anything difficult to understand, you may stop me in between, and I would take time to clarify your doubts before moving ahead. If you have any questions later, you may ask me or contact me. The interview may take about 35-45 minutes and may have to contact in future for any clarifications.

Voluntary Participation

Your participation in this study is entirely voluntary. It is your choice whether to participate in the study or not. The choice that you make is in no way going to affect you in any manner. You are free to decide whether or not to answer specific questions during the interview. If there are questions that you do not wish to answer, you are not obligated to do so. If you feel like quitting the study in the middle of the survey, you are free to do so. You are free to withdraw at any point during the interview without any consequences. Your decision will not impact your current or future employment. The permission for this study is obtained from your employer. No incentives will be provided for taking part in the study.

Confidentiality

Your anonymity is most important. I will not use your name or any personally identifiable information in any reports or publications. Your responses will be used for research purposes only and will be stored securely by myself to ensure that they are not accessed by anyone else.

Risks

There are no known risks associated with participating in this study.

Benefits

While there may not be immediate direct benefits to you, your participation will contribute to a better understanding of menstrual hygiene management in the workplace.

Funding

I am doing this research at my own expense.

Contact Information

If you have any questions, concerns, or require further information about the study, please feel free to contact me and for any queries on the authentication of this study, you can get the Member Secretary, Institutional Review Board (IRB) of SCTIMST

Principal Investigator

Dr. Shamila Beegum

MPH Student

AMCHSS, SCTIMST,

Medical college (PO), Thiruvananthapuram-11

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IRB Member Secretary

Dr. Srinivas G

Member Secretary

Institutional Review Board, SCTIMST, Trivandrum

Contact Number: 04712524689 (office)

Email id: iec.mem.sec@sctimst.ac.in

Thank you for considering participation in this study.

Sincerely,

Dr. Shamila Beegum

പങ്കെടുക്കുന്നവർക്കുള്ള വിഷയവിവര ഷീറ്റ്

പഠനത്തിന്റെ തലക്കെട്ട് : കേരളത്തിലെ പത്തനംതിട്ട ജില്ലയിലെ നഗരങ്ങളിലെ ടെക്സ്റ്റൈൽ ഷോറൂമുകളിൽ പ്രായപൂർത്തിയായ സ്ത്രീ സെയിൽസ് ഉദ്യോഗസ്ഥർക്കിടയിൽ ആർത്തവ ശുചിത്വ പരിപാലനത്തിനുള്ള വെല്ലുവിളികൾ

ഗവേഷക: ഡോ. ഷാമിലാ ബീഗം

അഫിലിയേഷൻ: അച്യുതമേനോൻ സെന്റർ ഫോർ ഹെൽത്ത് സയൻസസ് സ്റ്റഡീസ്, ശ്രീചിത്ര തിരുനാൾ ഇൻസ്റ്റിറ്റ്യൂട്ട് ഫോർ മെഡിക്കൽ സയൻസസ് ആൻഡ് ടെക്നോളജി, തിരുവനന്തപുരം

നമസ്കാരം ,

ഞാൻ അച്യുതമേനോൻ സെന്റർ ഫോർ ഹെൽത്ത് സയൻസസിൽ പബ്ലിക് ഹെൽത്ത് ബിരുദാനന്തര ബിരുദം നേടുന്ന ഡോ. ഷാമിലാ ബീഗമാണ്. എന്റെ അക്കാദമിക് ഗവേഷണത്തിന്റെ ഭാഗമായി, കേരളത്തിലെ പത്തനംതിട്ട ജില്ലയിലെ ടെക്സ്റ്റൈൽ ഷോറൂമുകളിൽ പ്രായപൂർത്തിയായ സ്ത്രീ സെയിൽസ് ഉദ്യോഗസ്ഥർക്കിടയിൽ ആർത്തവ ശുചിത്വ പരിപാലനത്തിനുള്ള വെല്ലുവിളികൾ എന്ന തലക്കെട്ടിൽ ഞാൻ ഒരു പഠനം നടത്തുന്നു.

പഠന ലക്ഷ്യം

ഈ പഠനത്തിന്റെ പ്രാഥമിക ലക്ഷ്യം ജോലിസ്ഥലത്ത് ആർത്തവ ശുചിത്വം കൈകാര്യം ചെയ്യുന്നതിൽ സ്ത്രീ സെയിൽസ് ഉദ്യോഗസ്ഥർ ഉപയോഗിക്കുന്ന അനുഭവങ്ങൾ, വെല്ലുവിളികൾ, എന്നിവയെക്കുറിച്ചുള്ള ഉൾക്കാഴ്ചകൾ നേടുക എന്നതാണ്.

എന്തുകൊണ്ടാണ് ഈ പഠനം നടത്തുന്നത്

ആർത്തവം ഒരു സ്വാഭാവിക ജൈവ പ്രക്രിയയാണ്, അത് പലപ്പോഴും കൗമാരത്തിൽ നിന്ന് സ്ത്രീത്വത്തിലേക്കുള്ള മാറ്റത്തിന്റെ കാലഘട്ടമായി അംഗീകരിക്കപ്പെടുന്നു. ബീജസങ്കലനത്തിനു ശേഷം അണ്ഡാത്പാദനം നടക്കാത്തപ്പോൾ സംഭവിക്കുന്ന ഗർഭാശയ എൻഡോമെട്രിയൽ ലൈനിംഗിന്റെ പ്രവർത്തന പാളിയുടെ പ്രതിമാസ ഷെഡ്ഡിംഗാണ് ഇത്. ഇത് ഏകദേശം 28 ദിവസത്തിലൊരിക്കൽ സംഭവിക്കുന്നു, ഓരോ 21 മുതൽ 45 ദിവസങ്ങളിലും. സ്ത്രീകളുടെ ആരോഗ്യത്തിന്റെയും ക്ഷേമത്തിന്റെയും ഒരു പ്രധാന വശമാണ് ആർത്തവ ശുചിത്വ പരിപാലനം, ഇത് അവരുടെ ജോലിസ്ഥലത്തെ അനുഭവങ്ങളിൽ കാര്യമായ സ്വാധീനം ചെലുത്തും. സ്ത്രീ

സെയിൽസ് ഉദ്യോഗസ്ഥർക്ക് അവരുടെ ജോലിസ്ഥലത്ത് ആർത്തവ ശുചിത്വവുമായി ബന്ധപ്പെട്ട ചില തടസ്സങ്ങളോ ബുദ്ധിമുട്ടുകളോ പലപ്പോഴും നേരിടേണ്ടി വന്നേക്കാം, ഈ പഠനം ആ ആശങ്കകൾ പരിഹരിക്കാൻ ശ്രമിക്കുന്നു.

പഠനം എങ്ങനെ നടത്തും

കേരളത്തിലെ പത്തനംതിട്ട ജില്ലയിലെ നഗരങ്ങളിലെ വിവിധ ടെക്സ്റ്റൈൽ ഷോറൂമുകളിൽ ഈ പഠനം നടത്താൻ ഞാൻ തിരഞ്ഞെടുത്തു. ഷോറൂമുകളിൽ നിന്ന്, വിവരങ്ങൾ പങ്കിടാൻ തയ്യാറുള്ള വനിതാ സെയിൽസ് ജീവനക്കാരെ ജോലിസ്ഥലത്ത് അവരുടെ കാലയളവ് കൈകാര്യം ചെയ്യുന്ന അനുഭവങ്ങൾ മനസ്സിലാക്കാൻ അഭിമുഖത്തിന് തിരഞ്ഞെടുക്കും. കൂടുതൽ പഠന ആവശ്യങ്ങൾക്കായി അഭിമുഖങ്ങൾ ഓഡിയോ റെക്കോർഡ് ചെയ്യും. അഭിമുഖങ്ങൾ രഹസ്യാത്മകവും നിങ്ങളുടെ സൗകര്യവും സ്വകാര്യതയും ഉറപ്പാക്കാൻ ഒരു സ്വകാര്യ ക്രമീകരണത്തിൽ നടത്തുന്നതുമാണ്.

പഠനത്തിൽ പങ്കെടുക്കാനുള്ള അഭ്യർത്ഥന

ഈ പഠനത്തിന് റെ ഭാഗമാകാൻ ഞാൻ നിങ്ങളെ ക്ഷണിക്കുന്നു. നിങ്ങളുടെ നിലവിലെ സാഹചര്യവുമായി പഠനം പ്രസക്തമാണെന്ന് ഉറപ്പാക്കാൻ, നിങ്ങൾക്ക് നിലവിൽ ആർത്തവമുണ്ടോ ഇല്ലയോ എന്ന് ഞാൻ ചോദിക്കേണ്ടതായി വന്നേക്കാം. നിങ്ങൾ ഇതിൽ പങ്കെടുക്കുന്നതിന് മുമ്പ്, ഈ പഠനത്തെക്കുറിച്ച് നിങ്ങളുടെ ഏതെങ്കിലും ഒരു ആശങ്കയുമായി ചർച്ച ചെയ്യാൻ നിങ്ങൾക്ക് സ്വാതന്ത്ര്യമുണ്ട്. ഈ വിവര ഷീറ്റിൽ നിങ്ങൾക്ക് മനസ്സിലാക്കാൻ ബുദ്ധിമുട്ട് തോന്നുന്ന വാക്കുകൾ അടങ്ങിയിരിക്കാം. നിങ്ങൾക്ക് മനസ്സിലാക്കാൻ ബുദ്ധിമുട്ടുള്ള എന്തെങ്കിലും തോന്നുകയാണെങ്കിൽ, നിങ്ങൾ എന്നെ ഇടയ്ക്ക് നിർത്തി, മുന്നോട്ട് പോകുന്നതിന് മുമ്പ് നിങ്ങളുടെ സംശയങ്ങൾ വ്യക്തമാക്കാൻ ഞാൻ സമയമെടുക്കും. നിങ്ങൾക്ക് പിന്നീട് എന്തെങ്കിലും ചോദ്യങ്ങളുണ്ടെങ്കിൽ, നിങ്ങൾക്ക് എന്നോട് ചോദിക്കാം, അല്ലെങ്കിൽ എന്നെ ബന്ധപ്പെടാം. അഭിമുഖത്തിന് ഏകദേശം 35-45 മിനിറ്റ് എടുത്തേക്കാം, എന്തെങ്കിലും വ്യക്തതകൾക്കായി ഭാവിയിൽ ബന്ധപ്പെടേണ്ടി വന്നേക്കാം.

സന്നദ്ധ പങ്കാളിത്തം

ഈ പഠനത്തിൽ നിങ്ങളുടെ പങ്കാളിത്തം പൂർണ്ണമായും സ്വമേധയാ ഉള്ളതാണ്. പഠനത്തിൽ പങ്കെടുക്കണോ വേണ്ടയോ എന്നത് നിങ്ങളുടെ ഇഷ്ടമാണ്. നിങ്ങൾ എടുക്കുന്ന തിരഞ്ഞെടുപ്പ് ഒരു തരത്തിലും നിങ്ങളെ ബാധിക്കാൻ പോകുന്നില്ല. അഭിമുഖത്തിൽ നിർദ്ദിഷ്ട ചോദ്യങ്ങൾക്ക് ഉത്തരം നൽകണോ വേണ്ടയോ എന്ന് തീരുമാനിക്കാൻ നിങ്ങൾക്ക് സ്വാതന്ത്ര്യമുണ്ട്. നിങ്ങൾക്ക് ഉത്തരം നൽകാൻ ആഗ്രഹിക്കാത്ത ചോദ്യങ്ങളുണ്ടെങ്കിൽ, അത് ചെയ്യാൻ നിങ്ങൾ ബാധ്യസ്ഥരല്ല. സർവ്വേയുടെ മധ്യത്തിൽ പഠനം ഉപേക്ഷിക്കാൻ നിങ്ങൾക്ക് തോന്നുന്നുവെങ്കിൽ, അത് ചെയ്യാൻ നിങ്ങൾക്ക് സ്വാതന്ത്ര്യമുണ്ട്. ഇന്റർവ്യൂ സമയത്ത് ഏത് സമയത്തും അനന്തരഫലങ്ങളില്ലാതെ പിൻവലിക്കാൻ നിങ്ങൾക്ക് സ്വാതന്ത്ര്യമുണ്ട്.

നിങ്ങളുടെ തീരുമാനം നിങ്ങളുടെ നിലവിലുള്ള അല്ലെങ്കിൽ ഭാവി ജോലിയെ ബാധിക്കില്ല. ഈ പഠനത്തിനുള്ള അനുമതി നിങ്ങളുടെ തൊഴിലുടമയിൽ നിന്ന് ലഭിച്ചതാണ്. പഠനത്തിൽ പങ്കെടുക്കുന്നതിന് പാരിതോഷികങ്ങൾ നൽകുന്നതല്ല.

രഹസ്യത്വം

നിങ്ങളുടെ സ്വകാര്യത ഏറ്റവും പ്രധാനമാണ്. ഏതെങ്കിലും റിപ്പോർട്ടുകളിലോ പ്രസിദ്ധീകരണങ്ങളിലോ ഞാൻ നിങ്ങളുടെ പേരോ വ്യക്തിപരമായി തിരിച്ചറിയാവുന്ന വിവരങ്ങളോ ഉപയോഗിക്കില്ല. നിങ്ങളുടെ പ്രതികരണങ്ങൾ ഗവേഷണ ആവശ്യങ്ങൾക്കായി മാത്രം ഉപയോഗിക്കുകയും മറ്റാരും അവ ആക്സസ് ചെയ്യുന്നില്ലെന്ന് ഉറപ്പാക്കാൻ ഞാൻ തന്നെ സുരക്ഷിതമായി സൂക്ഷിക്കുകയും ചെയ്യും

അപകടസാധ്യതകൾ

ഈ പഠനത്തിൽ പങ്കെടുക്കുന്നതുമായി ബന്ധപ്പെട്ട് അപകടസാധ്യതകളൊന്നും തന്നെയില്ല

ആനുകൂല്യങ്ങൾ

നിങ്ങൾക്ക് ഉടൻതന്നെ നേരിട്ടുള്ള ആനുകൂല്യങ്ങൾ ലഭിക്കില്ലെങ്കിലും, നിങ്ങളുടെ പങ്കാളിത്തം ജോലിസ്ഥലത്തെ ആർത്തവ ശുചിത്വ മാനേജ്മെന്റിനെക്കുറിച്ച് നന്നായി മനസ്സിലാക്കാൻ സഹായിക്കും.

ധനസഹായം

ഞാൻ എന്റെ സ്വന്തം ചിലവിലാണ് ഈ ഗവേഷണം നടത്തുന്നത്.

ബന്ധപ്പെടാനുള്ള വിവരങ്ങൾ

നിങ്ങൾക്ക് പഠനത്തെക്കുറിച്ച് എന്തെങ്കിലും ചോദ്യങ്ങളോ ആശങ്കകളോ അല്ലെങ്കിൽ കൂടുതൽ വിവരങ്ങൾ ആവശ്യമോ ഉണ്ടെങ്കിൽ, ദയവായി എന്നെ ബന്ധപ്പെടാൻ മടിക്കേണ്ടതില്ല, കൂടാതെ ഈ പഠനത്തിന്റെ ആധികാരികതയെക്കുറിച്ചുള്ള എന്തെങ്കിലും ചോദ്യങ്ങൾക്ക്, നിങ്ങൾക്ക് SCTIMST-യുടെ സ്ഥാപന റിവ്യൂ ബോർഡ് (IRB) മെമ്പർ സെക്രട്ടറിയെ ലഭിക്കും.

പ്രധാന അന്വേഷകൻ

ഡോ.ഷാമിലാ ബീഗം

എംപിഎച്ച് വിദ്യാർത്ഥിനി

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ഐആർബി മെമ്പർ സെക്രട്ടറി

ഡോ. ശ്രീനിവാസ് ജി

മെമ്പർ സെക്രട്ടറി

ഇൻസ്റ്റിറ്റ്യൂഷണൽ റിവ്യൂ ബോർഡ്, SCTIMST, തിരുവനന്തപുരം

ബന്ധപ്പെടേണ്ട നമ്പർ: 04712524689 (ഓഫീസ്)

ഇമെയിൽ ഐഡി: iec.mem.sec@sctimst.ac.in

ഈ പഠനത്തിലെ പങ്കാളിത്തം പരിഗണിച്ചതിന് നന്ദി.

ആത്മാർത്ഥതയോടെ,

ഡോ.ഷാമിലാ ബീഗം

ANNEXURE IV

INFORMANT CONSENT FORM

I ----- have read/ heard and understood all the information provided in the research information sheet. I understand that my participation in this study is entirely voluntary. By signing/ giving thumb impression, I confirm my voluntary participation in this study. I understand that I can withdraw my participation at any time during the interview without any explanation and I also understand that my identity and personal information will be kept confidential. I have been informed whom should be contacted for further clarification. I agree to take part in this study.

I am giving permission for this interview to be recorded for research purposes.

Yes:

No:

Name of the Participant:

Signature of the Participant/ Thumb impression

Date:

For Researcher's Records:

I confirm that the participant was provided with a copy of the participant information sheet and this informed consent form, and their questions were answered to their satisfaction.

Researcher's Name: Dr. Shamila Beegum

Researcher's Signature:

Date:

സമ്മതപത്രം

ഞാൻ ----- ഗവേഷണ വിവര ഷീറ്റിൽ നൽകിയിരിക്കുന്ന എല്ലാ വിവരങ്ങളും വായിക്കുകയും / കേൾക്കുകയും മനസ്സിലാക്കുകയും ചെയ്തിട്ടുണ്ട്. ഈ പഠനത്തിൽ എന്റെ പങ്കാളിത്തം പൂർണ്ണമായും സ്വമേധയാ ഉള്ളതാണെന്ന് ഞാൻ മനസ്സിലാക്കുന്നു. ഒപ്പിടുന്നതിലൂടെ/ തള്ളവിരലിന്റെ മുദ്ര നൽകുന്നതിലൂടെ, ഈ പഠനത്തിൽ എന്റെ സ്വമേധയാ ഉള്ള പങ്കാളിത്തം ഞാൻ സ്ഥിരീകരിക്കുന്നു. അഭിമുഖത്തിനിടയിൽ എപ്പോൾ വേണമെങ്കിലും ഒരു വിശദീകരണവുമില്ലാതെ എന്റെ പങ്കാളിത്തം പിൻവലിക്കാമെന്നും എന്റെ ഐഡൻറിറ്റിയും വ്യക്തിഗത വിവരങ്ങളും രഹസ്യമായി സൂക്ഷിക്കുമെന്നും ഞാൻ മനസ്സിലാക്കുന്നു. കൂടുതൽ വ്യക്തതയ്ക്കായി ആരെയാണ് ബന്ധപ്പെടേണ്ടതെന്ന് എന്നെ അറിയിച്ചിട്ടുണ്ട്. ഈ പഠനത്തിൽ പങ്കെടുക്കാൻ ഞാൻ സമ്മതിക്കുന്നു.

ഗവേഷണ ആവശ്യങ്ങൾക്കായി ഈ അഭിമുഖം രേഖപ്പെടുത്താൻ ഞാൻ അനുमതി നൽകുന്നു.

അതെ:

ഇല്ല:

പങ്കെടുക്കുന്നയാളുടെ പേര്:

പങ്കെടുക്കുന്നയാളുടെ ഒപ്പ്/ തള്ളവിരലിന്റെ മുദ്ര:

തീയതി:

ഗവേഷകയുടെ രേഖകൾക്കായി:

പങ്കെടുക്കുന്നയാൾക്ക് അവരുടെ വിവര ഷീറ്റിന്റെ ഒരു പകർപ്പും ഈ സമ്മതപത്ര ഫോമും നൽകിയിട്ടുണ്ടെന്നും അവരുടെ ചോദ്യങ്ങൾക്ക് അവർ സംതൃപ്തരാകുന്ന തരത്തിൽ ഉത്തരം നൽകിയിട്ടുണ്ടെന്നും ഞാൻ സ്ഥിരീകരിക്കുന്നു.

ഗവേഷകയുടെ പേര്: ഡോ. ഷാമിലാ ബീഗം

ഒപ്പ്:

തീയതി:

ANNEXURE V

In Depth Interview Guidelines

[Check if permission for recording has been obtained and proceed accordingly.]

Self-Introduction

Good (morning/afternoon/evening), (Participant's Name). My name is Dr. Shamila Beegum, and I am a public health student from Achutha Menon Centre for Health Science Studies, SCTIMST, Thiruvananthapuram. I thank you for your time and participation in the interview. The purpose of this interview is to better understand the experiences and challenges faced by female sales personnel like yourself in managing periods while working in showrooms. I am particularly interested in hearing your perspective on this topic.

Before we begin, I want to assure you that your participation is entirely voluntary, and your responses will be kept confidential. I will not use your name in any reports or publications to protect your privacy. Also, if at any point during the interview you feel uncomfortable or wish to stop, please let me know, and we can pause or conclude the interview.

“Do you have any questions or concerns before we proceed?”

Introductory and Rapport-Building Questions

Can you please introduce yourself and tell me a bit about your role in the textile showroom?

How long have you been working in this showroom, and how did you get this job?

How far is your home from the showroom? How you travel (public transport/ other means)?

Could you describe a typical day at work in the showroom?

What are some aspects of your job that you find satisfying or interesting?

Menstrual hygiene management: perceptions and practice

I would like to discuss your experiences with managing periods while working here. Would you be comfortable to talk about your ideas and experiences in this regard?

When did you last have your periods? What do you do to manage the flow when your periods start while at work?

What type of sanitary product are you using? How often you change and wash?

How do you manage to ensure required hygiene practices during menstruation here in the workplace? How does it affect your health? Or do you prefer any other alternative practices? What are those?

How do you manage periods at home?

How different is the way you manage periods here in the shop different from the way you manage it at home? Is it more comfortable to manage here or at home? Why is it so?

Are the washrooms different for customers and workers? If they are the same, how is priority determined here in the workplace?

What kind of waste (sanitary) disposal means do you have here? How adequate is it? What do you and your colleagues do when the bins are full?

What are the discussions that happen among your colleagues and you about maintaining menstrual hygiene here in the workplace?

Menstrual hygiene management in work place and expected consequences

When you are not able to manage your periods in the way you want to for any reason, what do you think that will happen to your health? Did you experience any health problems due to that?

What do you think anyone should do, by that I mean women like you who get periods, to manage it in a safe and healthy way?

Are there any specific obstacles you have faced in maintaining menstrual hygiene while at work? Like lack of water, shortage of sanitary pads, limited disposal space, small and limited number of wash rooms etc.

What are the rules about using washrooms during the work time? What are the break times you get? How do your colleagues help you to manage your period related needs during that time?

When are the peak times when many people come to the shop? How do you manage your periods during these times? What are the problems you and your other colleagues face managing your periods at these times?

How does the shop management help at these times? Do they provide additional employees, more breaks, etc?

In Kerala there are certain rules about how women should deal with their periods. For instance, some people hesitate to discuss sanitary protections with men. Some people follow these rules and some don't. What are all the rules that you follow during periods, that are told to you by your family and relatives? How have these rules affected your ability to manage periods comfortably in the workplace?

Notions of appropriate menstrual management and available infrastructure

What kind of facilities are available to women workers here, to keep sanitary napkins or for changing clothes if necessary? How do you manage these without others seeing or hearing you?

How do you manage crowded washrooms during peak hours, and are there any separate facilities available?

On an average month, how much does the sanitary pads etc cost you? Is there a difference in this cost because of your work place facilities? What kind of arrangements does the shop management have for women with periods?

You have said that you have to travel to your workplace. What do you do if you are having your periods? How different is your commute to work during periods?

Experiences of gynaecological morbidity

Do you have any menstruation related conditions like irregular periods, spotting, white discharge, heavy bleeding etc?

Have you experienced any discomfort or health conditions such as abdominal pain, cramps, nausea, or headaches during your menstrual periods while at work? What do you do when this happens?

Have you experienced any health problems or infections during your menstrual cycle?

Can you share your experiences with the quality of the sanitary products you have used? Have you faced any issues with the way sanitary napkins were used?

How did you manage any discomfort, infections or health issues you encountered?

Have you ever sought medical treatment or consultation related to menstrual health issues? Can you describe what were the issues you had and what treatment you received, whether it helped?

To solve some of the problems relating to menstruation, have any of you discussed within yourself and management to find some solutions? If so, what were the results of that?

Concluding section

Is there anything else you would like to share about your experiences or thoughts on menstrual hygiene management in the workplace?

Do you have any recommendations or suggestions for improving menstrual hygiene support in the showroom or similar settings?

Thank you very much for answering my questions patiently. In case I have any doubts while writing down all your answers, can I call you to clarify?

If yes, what is a good time to call?

If yes, can you share the number that I should call? My number is given in the consent form that I am leaving with you. But can you save it under the name Shamila (9497327753) so that you can recognize me when I call?

Thanks



അഭിമുഖത്തിന്റെ മാർഗ്ഗനിർദ്ദേശങ്ങൾ

[നെക്കോർഡിംഗിനുള്ള അനുമതി ലഭിച്ചിട്ടുണ്ടോയെന്ന് പരിശോധിച്ച് അതനുസരിച്ച് തുടരുക.]

ആമുഖം

നമസ്കാരം ,----- (പങ്കെടുക്കുന്നയാളുടെ പേര്).

എന്റെ പേര് ഡോ. ഷാമിലാ ബീഗം, ഞാൻ അച്ഛൻ മേനോൻ സെന്റർ ഫോർ ഹെൽത്ത് സയൻസ് സ്റ്റഡീസ്, SCTIMST, തിരുവനന്തപുരത്തെ പബ്ലിക് ഹെൽത്ത് വിദ്യാർത്ഥിയാണ്. നിങ്ങളുടെ സമയത്തിനും അഭിമുഖത്തിൽ പങ്കെടുത്തതിനും ഞാൻ നന്ദി പറയുന്നു. ഷോറൂമുകളിൽ ജോലി ചെയ്യുമ്പോൾ പിരീഡുകൾ കൈകാര്യം ചെയ്യുന്നതിൽ നിങ്ങളെപ്പോലുള്ള വനിതാ സെയിൽസ് ഉദ്യോഗസ്ഥർ നേരിടുന്ന അനുഭവങ്ങളും വെല്ലുവിളികളും നന്നായി മനസ്സിലാക്കുക എന്നതാണ് ഈ അഭിമുഖത്തിന്റെ ലക്ഷ്യം. ഈ വിഷയത്തെക്കുറിച്ചുള്ള നിങ്ങളുടെ വീക്ഷണം കേൾക്കാൻ എനിക്ക് പ്രത്യേക താൽപ്പര്യമുണ്ട്.

നമ്മൾ ആരംഭിക്കുന്നതിന് മുമ്പ്, നിങ്ങളുടെ പങ്കാളിത്തം പൂർണ്ണമായും സ്വമേധയാ ഉള്ളതാണെന്നും നിങ്ങളുടെ പ്രതികരണങ്ങൾ രഹസ്യമായി സൂക്ഷിക്കുമെന്നും ഞാൻ നിങ്ങൾക്ക് ഉറപ്പ് നൽകുന്നു . നിങ്ങളുടെ സ്വകാര്യത സംരക്ഷിക്കുന്നതിനായി ഒരു റിപ്പോർട്ടിലും പ്രസിദ്ധീകരണങ്ങളിലും ഞാൻ നിങ്ങളുടെ പേര് ഉപയോഗിക്കില്ല. കൂടാതെ, അഭിമുഖത്തിനിടെ ഏതെങ്കിലും ഘട്ടത്തിൽ നിങ്ങൾക്ക് ബുദ്ധിമുട്ട് അനുഭവപ്പെടുകയോ നിർത്താൻ ആഗ്രഹിക്കുകയോ ചെയ്താൽ, ദയവായി എന്നെ അറിയിക്കൂ, നമ്മൾ അഭിമുഖം താൽക്കാലികമായി നിർത്തുകയോ അവസാനിപ്പിക്കുകയോ ചെയ്യാം.

"നമ്മൾ മുന്നോട്ട് പോകുന്നതിന് മുമ്പ് നിങ്ങൾക്ക് എന്തെങ്കിലും ചോദ്യങ്ങളോ ആശങ്കകളോ ഉണ്ടോ?"

ആമുഖവും ബന്ധം വളർത്തുന്നതുമായ ചോദ്യങ്ങൾ

താങ്കൾ സ്വയം പരിചയപ്പെടുത്തി ടെക്സ്റ്റിൽ ഷോറൂമിലെ നിങ്ങളുടെ ജോലിയെ കുറിച്ച് എന്തോട് പറയാമോ?

നിങ്ങൾ ഈ ഷോറൂമിൽ എത്ര നാളായി ജോലി ചെയ്യുന്നു, എങ്ങനെയാണ് നിങ്ങൾക്ക് ഈ ജോലി ലഭിച്ചത്?

ഷോറൂമിൽ നിന്ന് നിങ്ങളുടെ വീട് എത്ര ദൂരെയാണ്? നിങ്ങൾ എങ്ങനെയാണ് യാത്ര ചെയ്യുന്നത് (പൊതു ഗതാഗതം/മറ്റ് മാർഗങ്ങൾ)?

ഷോറൂമിൽ ജോലി ചെയ്യുന്ന ഒരു സാധാരണ ദിവസം വിവരിക്കാമോ?

നിങ്ങളുടെ ജോലിയിൽ നിങ്ങൾക്ക് തൃപ്തികരമായ ചില വശങ്ങൾ ഏതൊക്കെയാണ്?

ആർത്തവ ശുചിത്വ മാനേജ്മെന്റ്: ധാരണകളും പരിശീലനവും

ഇവിടെ ജോലി ചെയ്യുമ്പോൾ പീരിയഡ് / മാസമുറ കൈകാര്യം ചെയ്യുന്നതിലെ നിങ്ങളുടെ അനുഭവങ്ങൾ ചർച്ച ചെയ്യാൻ ഞാൻ ആഗ്രഹിക്കുന്നു. ഇക്കാര്യത്തിൽ നിങ്ങളുടെ ആശയങ്ങളെയും അനുഭവങ്ങളെയും കുറിച്ച് സംസാരിക്കാൻ നിങ്ങൾക്ക് സമ്മതമാണോ ?

എപ്പോഴാണ് നിങ്ങൾക്ക് അവസാനമായി ആർത്തവമുണ്ടായത്? ജോലിസ്ഥലത്ത് നിങ്ങളുടെ ആർത്തവം ആരംഭിക്കുമ്പോൾ എങ്ങനെയാണ് മാനേജ് ചെയ്യുന്നത്?

ഏത് തരത്തിലുള്ള സാനിറ്ററി ഉൽപ്പന്നമാണ് നിങ്ങൾ ഉപയോഗിക്കുന്നത്? നിങ്ങൾ എത്ര തവണ മാറ്റുകയും കഴുകുകയും ചെയ്യുന്നു?

ഇവിടെ ജോലിസ്ഥലത്ത് ആർത്തവ സമയത്ത് ആവശ്യമായ ശുചിത്വ സമ്പ്രദായങ്ങൾ എങ്ങനെ ഉറപ്പാക്കാം? അത് നിങ്ങളുടെ ആരോഗ്യത്തെ എങ്ങനെ ബാധിക്കുന്നു? അതോ മറ്റേതെങ്കിലും ഇതര രീതികളാണോ നിങ്ങൾ ഇഷ്ടപ്പെടുന്നത്? അവ എന്തൊക്കെയാണ്?

ആർത്തവമുള്ളപ്പോൾ വീട്ടിൽ എങ്ങനെയാണു മാനേജ് ചെയ്യുന്നത് ??

കടയിൽ നിങ്ങൾ പിരീഡുകൾ മാനേജ് ചെയ്യുന്ന രീതിയും വീട്ടിൽ നിങ്ങൾ കൈകാര്യം ചെയ്യുന്ന രീതിയും വ്യത്യസ്തമാണോ? എവിടെയാണ് കൂടുതൽ സൗകര്യപ്രദമായി തോന്നിയിട്ടുള്ളത് ? എന്തുകൊണ്ടാണ് ?

ഉപഭോക്താക്കൾക്കും തൊഴിലാളികൾക്കും ശുചിമുറികൾ വ്യത്യസ്തമാണോ? അവ ഒന്നുതന്നെയാണെങ്കിൽ, ജോലിസ്ഥലത്ത് ഇവിടെ മുൻഗണന നിശ്ചയിക്കുന്നത് എങ്ങനെയാണ്?

എന്ത് തരം മാലിന്യം (സാനിറ്ററി) നിർമാർജ്ജനം ആണ് നിങ്ങൾക്ക് ഇവിടെ ഉള്ളത്? അത് എത്രത്തോളം പര്യാപ്തമാണ്? ബിന്നുകൾ നിറയുമ്പോൾ നിങ്ങളും നിങ്ങളുടെ സഹപ്രവർത്തകരും എന്താണ് ചെയ്യുന്നത്?

ജോലിസ്ഥലത്ത് ആർത്തവ ശുചിത്വം പാലിക്കുന്നതിനെക്കുറിച്ച് നിങ്ങളുടെ സഹപ്രവർത്തകർക്കും നിങ്ങൾക്കും ഇടയിൽ നടക്കുന്ന ചർച്ചകൾ എന്തൊക്കെയാണ്?

ജോലിസ്ഥലത്ത് ആർത്തവ ശുചിത്വ പരിപാലനവും പ്രതീക്ഷിക്കുന്ന ബുദ്ധിമുട്ടുകളും

എന്തെങ്കിലും കാരണവശാൽ നിങ്ങൾക്ക് ആവശ്യമുള്ള രീതിയിൽ ആർത്തവ ശുചിത്വം പാലിക്കാൻ കഴിയാതെ വരുമ്പോൾ, നിങ്ങളുടെ ആരോഗ്യത്തിന് എന്ത് സംഭവിക്കുമെന്ന് നിങ്ങൾ കരുതുന്നു? അതുമൂലം നിങ്ങൾക്ക് എന്തെങ്കിലും ആരോഗ്യപ്രശ്നങ്ങൾ ഉണ്ടായിട്ടുണ്ടോ?

മാസമുറ ഉള്ള നിങ്ങളെപ്പോലുള്ള സ്ത്രീകൾക്ക് സുരക്ഷിതവും ആരോഗ്യകരവുമായ രീതിയിൽ അതു കൈകാര്യം ചെയ്യാൻ എന്താണ് ചെയ്യേണ്ടതെന്ന് നിങ്ങൾ കരുതുന്നു?

ജോലിയിലായിരിക്കുമ്പോൾ ആർത്തവ ശുചിത്വം പാലിക്കുന്നതിൽ എന്തെങ്കിലും പ്രത്യേക തടസ്സങ്ങൾ നിങ്ങൾ നേരിട്ടിട്ടുണ്ടോ? വെള്ളത്തിന്റെ അഭാവം, സാനിറ്ററി പാഡുകളുടെ കുറവ്, പരിമിതമായ ഡിസ്പോസൽ സ്ഥലം, ചെറുതും പരിമിതവുമായവാഷ് റൂമുകൾ തുടങ്ങിയവ ?

ജോലി സമയത്ത് ശുചിമുറികൾ ഉപയോഗിക്കുന്നതിനുള്ള നിയമങ്ങൾ എന്തൊക്കെയാണ്? നിങ്ങൾക്ക് ലഭിക്കുന്ന ഇടവേള സമയങ്ങൾ എന്തൊക്കെയാണ്? ആ സമയത്ത് നിങ്ങളുടെ ആർത്തവവുമായി ബന്ധപ്പെട്ട ആവശ്യങ്ങൾ കൈകാര്യം ചെയ്യാൻ നിങ്ങളുടെ സഹപ്രവർത്തകർ നിങ്ങളെ എങ്ങനെ സഹായിക്കുന്നു?

നിരവധി ആളുകൾ കടയിൽ വരുന്ന തിരക്കേറിയ സമയങ്ങൾ എപ്പോഴാണ്? ഈ സമയങ്ങളിൽ നിങ്ങൾ എങ്ങനെയാണ് നിങ്ങളുടെ ആർത്തവം നിയന്ത്രിക്കുന്നത്? ഈ സമയങ്ങളിൽ നിങ്ങളുടെ ആർത്തവം നിയന്ത്രിക്കുന്നതിൽ നിങ്ങളും നിങ്ങളുടെ മറ്റ് സഹപ്രവർത്തകരും നേരിടുന്ന പ്രശ്നങ്ങൾ എന്തൊക്കെയാണ്?

ഈ സമയങ്ങളിൽ ഷോപ്പ് മാനേജ്മെന്റ് എങ്ങനെയാണ് സഹായിക്കുന്നത്? അവർ അധിക ജീവനക്കാർ, കൂടുതൽ ഇടവേളകൾ മുതലായവ നൽകുന്നുണ്ടോ?

സ്ത്രീകൾ ആർത്തവത്തെ എങ്ങനെ കൈകാര്യം ചെയ്യണം എന്നതിന് കേരളത്തിൽ ചില കീഴ്വഴക്കങ്ങളുണ്ട് . ഉദാഹരണത്തിന്, ചില ആളുകൾ പുരുഷന്മാരുമായി സാനിറ്ററി സംരക്ഷണത്തെക്കുറിച്ച് ചർച്ച ചെയ്യാൻ മടിക്കുന്നു. ചിലർ ഈ നിയമങ്ങൾ പാലിക്കുന്നു, ചിലർ പാലിക്കുന്നില്ല . നിങ്ങളുടെ വീട്ടുകാരോ ബന്ധുക്കളോ പറഞ്ഞുതന്നിട്ടുള്ള എന്തെങ്കിലും കീഴ്വഴക്കങ്ങളോ നിയമങ്ങളോ ആർത്തവസമയത്തു നിങ്ങൾ പാലിക്കാറുണ്ടോ? അത് ജോലിസ്ഥലത്തു എത്രമാത്രം ബുദ്ധിമുട്ടുണ്ടാക്കുന്നുണ്ട് ?

ഉചിതമായ ആർത്തവ മാനേജ്മെന്റിന്റെയും ലഭ്യമായ അടിസ്ഥാന സൗകര്യങ്ങളുടെയും ആശയങ്ങൾ

ഇവിടെ സ്ത്രീ തൊഴിലാളികൾക്ക് സാനിറ്ററി നാപ്കിനുകൾ സൂക്ഷിക്കുന്നതിനോ ആവശ്യമെങ്കിൽ വസ്ത്രം മാറുന്നതിനോ ഉള്ള സൗകര്യങ്ങൾ എന്തൊക്കെയാണ്?

മറ്റുള്ളവർ നിങ്ങളെ കാണാതെയും കേൾക്കാതെയും നിങ്ങൾ എങ്ങനെയാണ് ഇവ കൈകാര്യം ചെയ്യുന്നത്?

തിരക്കേറിയ സമയങ്ങളിൽ നിങ്ങൾ എങ്ങനെയാണ് ശുചിമുറികൾ നിയന്ത്രിക്കുന്നത്, പ്രത്യേക സൗകര്യങ്ങൾ ലഭ്യമാണോ?

ഒരു മാസത്തിൽ, ശരാശരി സാനിറ്ററി പാഡുകൾക്കും മറ്റും നിങ്ങളുടെ ചിലവ് എത്രയാണ്? നിങ്ങളുടെ ജോലി സ്ഥല സൗകര്യങ്ങൾ കാരണം ഈ ചെലവിൽ വ്യത്യാസമുണ്ടോ? ആർത്തവമുള്ള സ്ത്രീകൾക്കായി ഷോപ്പ് മാനേജ്മെന്റ് എന്ത് ക്രമീകരണങ്ങളാണ് ഒരുക്കിയിരിക്കുന്നത്?

നിങ്ങളുടെ ജോലിസ്ഥലത്തേക്ക് യാത്ര ചെയ്യണമെന്ന് നിങ്ങൾ പറഞ്ഞു. നിങ്ങൾക്ക് ആർത്തവമുണ്ടെങ്കിൽ എന്തുചെയ്യും? പിരീഡ് സമയത്ത് ജോലിസ്ഥലത്തേക്കുള്ള നിങ്ങളുടെ യാത്ര എത്ര വ്യത്യസ്തമാണ്?

ഗൈനക്കോളജിക്കൽ രോഗാവസ്ഥയുടെ അനുഭവങ്ങൾ

ക്രമരഹിതമായ ആർത്തവം, വെള്ളപ്പോക്ക്, അമിത രക്തസ്രാവം തുടങ്ങിയ എന്തെങ്കിലും ആർത്തവവുമായി ബന്ധപ്പെട്ട അവസ്ഥകൾ നിങ്ങൾക്കുണ്ടോ?

ജോലിസ്ഥലത്ത് നിങ്ങളുടെ ആർത്തവ സമയത്ത് വയറുവേദന, മലബന്ധം, ഓക്കാനം അല്ലെങ്കിൽ തലവേദന തുടങ്ങിയ എന്തെങ്കിലും അസ്വസ്ഥതകളോ ആരോഗ്യപ്രശ്നങ്ങളോ നിങ്ങൾ അനുഭവിച്ചിട്ടുണ്ടോ? ഇത് സംഭവിക്കുമ്പോൾ നിങ്ങൾ എന്തു ചെയ്യും?

നിങ്ങളുടെ ആർത്തവചക്രവുമായി ബന്ധപ്പെട്ട് എന്തെങ്കിലും ആരോഗ്യപ്രശ്നങ്ങളോ അനുബന്ധകളോ അനുഭവപ്പെട്ടിട്ടുണ്ടോ?

നിങ്ങൾ ഉപയോഗിച്ച സാനിറ്ററി ഉൽപ്പന്നങ്ങളുടെ ഗുണനിലവാരത്തെക്കുറിച്ചു അനുഭവങ്ങൾ പങ്കിടാമോ? സാനിറ്ററി നാപ്കിനുകൾ ഉപയോഗിക്കുന്ന രീതിയിൽ എന്തെങ്കിലും പ്രശ്നങ്ങൾ നേരിട്ടിട്ടുണ്ടോ?

നിങ്ങൾ നേരിട്ട അസ്വാസ്ഥ്യങ്ങൾ, അനുബന്ധകൾ അല്ലെങ്കിൽ ആരോഗ്യ പ്രശ്നങ്ങൾ എന്നിവ എങ്ങനെ കൈകാര്യം ചെയ്തു?

ആർത്തവ സംബന്ധമായ ആരോഗ്യപ്രശ്നങ്ങളുമായി ബന്ധപ്പെട്ട് നിങ്ങൾ എപ്പോഴെങ്കിലും വൈദ്യചികിത്സയോ കൺസൾട്ടേഷനോ തേടിയിട്ടുണ്ടോ?

നിങ്ങൾക്ക് ഉണ്ടായ പ്രശ്നങ്ങൾ എന്തൊക്കെയാണെന്നും നിങ്ങൾക്ക് എന്ത് ചികിത്സയാണ് ലഭിച്ചത്, അത് സഹായിച്ചിട്ടുണ്ടോ എന്ന് വിശദീകരിക്കാമോ?

ആർത്തവവുമായി ബന്ധപ്പെട്ട ചില പ്രശ്നങ്ങൾ പരിഹരിക്കുന്നതിന്, ചില പരിഹാരങ്ങൾ കണ്ടെത്താൻ നിങ്ങളിൽ ആരെങ്കിലും നിങ്ങളോടും മാനേജ്മെന്റിനോടും ചർച്ച നടത്തിയിട്ടുണ്ടോ? അങ്ങനെയെങ്കിൽ, അതിന്റെ ഫലങ്ങൾ എന്തായിരുന്നു?

സമാപന വിഭാഗം

ജോലിസ്ഥലത്തെ ആർത്തവ ശുചിത്വ പരിപാലനത്തെക്കുറിച്ചുള്ള നിങ്ങളുടെ അനുഭവങ്ങളെക്കുറിച്ചോ ചിന്തകളെക്കുറിച്ചോ മറ്റൊന്നെങ്കിലും പങ്കിടാൻ നിങ്ങൾ ആഗ്രഹിക്കുന്നുണ്ടോ?

ഷോറൂമിലോ സമാനമായ ക്രമീകരണങ്ങളിലോ ആർത്തവ ശുചിത്വ പിന്തുണ മെച്ചപ്പെടുത്തുന്നതിന് നിങ്ങൾക്ക് എന്തെങ്കിലും ശുപാർശകളോ നിർദ്ദേശങ്ങളോ ഉണ്ടോ?

എന്റെ ചോദ്യങ്ങൾക്ക് ക്ഷമയോടെ ഉത്തരം നൽകിയതിന് വളരെ നന്ദി. നിങ്ങളുടെ എല്ലാ ഉത്തരങ്ങളും എഴുതുമ്പോൾ എനിക്ക് എന്തെങ്കിലും സംശയമുണ്ടെങ്കിൽ, വ്യക്തമാക്കാൻ ഞാൻ നിങ്ങളെ വിളിക്കാമോ?

ഉണ്ടെങ്കിൽ, വിളിക്കാൻ പറ്റിയ സമയം ഏതാണ്?

ഉണ്ടെങ്കിൽ, ഞാൻ വിളിക്കേണ്ട നമ്പർ നിങ്ങൾക്ക് പങ്കിടാമോ? ഞാൻ നിങ്ങൾക്ക് തന്നിട്ടുള്ള വിവര ഷീറ്റ്ലാണ് എന്റെ നമ്പർ നൽകിയിരിക്കുന്നത്. ഞാൻ വിളിക്കുമ്പോൾ നിങ്ങൾക്ക് എന്നെ തിരിച്ചറിയാൻ കഴിയുന്ന തരത്തിൽ നിങ്ങൾക്ക് ഇത് ഷാമില (9497327753) എന്ന പേരിൽ സേവ് ചെയ്യാമോ?

നന്ദി

ANNEXURE VI

IEC Approval Letter



श्री चित्रा तिरुनाल आयुर्विज्ञान और प्रौद्योगिकी संस्थान, त्रिवेन्द्रम
तिरुवनन्तपुरम - ६९५०११, केरल, इंडिया
SREE CHITRA TIRUNAL INSTITUTE FOR MEDICAL SCIENCES AND TECHNOLOGY, TRIVANDRUM
Thiruvananthapuram - 695 011, Kerala, India
(An Institute of National Importance under Govt. of India)

Grams : Chitramet, Phone : +91-471-2443152, Fax : +91-471-2550728 / 2446433, E-mail : sct@sctimst.ac.in, Website : www.sctimst.ac.in

Institutional Ethics Committee

CDSO Registration No: ECR/189/Inst/KL/2013/RR-21
DHR Registration No: EC/NEW/INST/2022/2775

SCT/IEC/2179/DECEMBER/2023

09.01.2024

Dr. Shamila Beegum
MPH Student, AMCHSS
SCTIMST, Thiruvananthapuram

Dear Dr. Shamila Beegum,

The Institutional Ethics Committee held on 30th December, 2023, reviewed and discussed your application to conduct the study titled "CHALLENGES TO MENSTRUAL HYGIENE MANAGEMENT AMONG ADULT FEMALE SALES PERSONNEL IN TEXTILE SHOWROOMS OF URBAN PATHANAMTHITTA DISTRICT, KERALA" (IEC /2179) "

Principal Investigator	Dr Shamila Beegum, MPH Student, AMCHSS, SCTIMST
Co-Principal Investigator(s)	Dr Mala Ramanathan, Professor, AMCHSS, SCTIMST
Duration of the study	6 months

The following members of the Ethics Committee were present at the meeting held on 30th December, 2023

SL. No.	Member Name	Highest Degree	Gender	Scientific /Non Scientific	Affiliation with Institution(s)
1.	Smt. Sathi Nair	MA (English Literature)	Female	Lay Person	No
2.	Dr. Kala Kesavan P	MBBS,MD	Female	Basic Medical Scientist	No
3.	Adv. Priya Kaimal	LLM, MBL	Female	Legal Expert	No
4.	Dr. P. Manickam	BSMS, MSc (Epid),PhD	Male	Health Science Expert/ Social Scientist	No
5.	Dr. Christina George	MD Psychiatry	Female	Clinician	No
6.	Dr. Narayanan Namboodiri. K K	MBBS,MD,DM	Male	Clinician	Yes
7.	Dr. Biju Soman	MBBS,MD, DPH, MSc, DLSHTM	Male	Basic Medical Scientist	Yes

The following documents were reviewed:

1. Checklist Form
2. Covering letter addressed to the Chairman, IEC, SCTIMST dated 30.11.2023
3. Responses/Amendments made based on the Reviewer's comments
4. IEC Application Form
5. Declaration Form
6. Research Proposal
7. Interview guidelines in English and Malayalam
8. Participant Information Sheet and Consent Form in English and Malayalam
9. CV of Principal Investigator and Co-PI
10. Permission letters from textile shops
11. SRC Recommendation Letter

IEC Decision

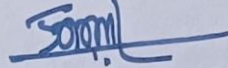
The IEC approved the conduct of the study in the present form.

Remarks:

The Institutional Ethics Committee expects to be informed about the progress of the study, any SAE occurring in the course of the study, any changes in the protocol and patient information/informed consent and asks to be provided a copy of the final report.

There was no member of the study team / Guide who participated in voting / decision making process. The ethics committee is organized and operated according to the requirements of Good Clinical Practice and the requirements of the Indian Council of Medical Research (ICMR).

Sincerely,



Dr. G. Srinivas
Member Secretary, IEC

MEMBER SECRETARY
INSTITUTIONAL ETHICS COMMITTEE (IEC)
SCTIMST, THIRUVANANTHAPURAM



ANNEXURE VII

PLAGIARISM CHECK CERTIFICATE



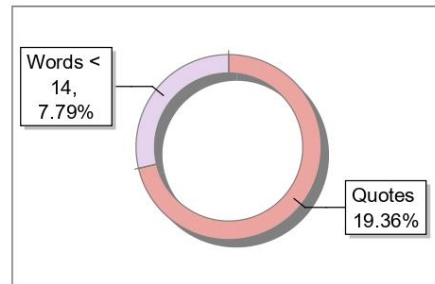
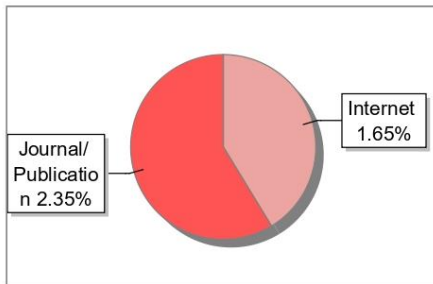
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Author Name	Shamila
Title	Compiled five chapters
Paper/Submission ID	1706220
Submitted by	mala@sctimst.ac.in
Submission Date	2024-04-27 16:08:59
Total Pages	58
Document type	Thesis

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A-Satisfactory (0-10%)
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LOCATION	MATCHED DOMAIN	%	SOURCE TYPE
1	biomedcentral.com	1	Internet Data
2	gh.bmj.com	<1	Internet Data
3	Menstrual Hygiene Management and School Absenteeism among Adolescents in Ghana by Mohammed-2020	<1	Publication
5	dspace.sctimst.ac.in	<1	Publication
6	bmcwomenshealth.biomedcentral.com	<1	Publication
7	www.susana.org	<1	Publication
8	www.inspirajournals.com	<1	Publication
9	Menstrual health management and schooling experience amongst female learners in by Crankshaw-2020	<1	Publication
10	Thesis Submitted to Shodhganga Repository	<1	Publication
11	uir.unisa.ac.za	<1	Publication
12	dspace.nwu.ac.za	<1	Publication
13	docplayer.net	<1	Internet Data
14	moam.info	<1	Internet Data