



Menstruation Shouts Project

Menstruating at the healthcare institutions during COVID-19 pandemic

By: Hadir Barbar

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COVID-19 massively reshaped the functionality of healthcare systems around the globe. Female healthcare workers are among the most affected groups because of the absence of fair policies that preserve their reproductive rights and their safe practices around their menstruation. In this blog, I am Hadir Barbar, the project lead of the Menstruation Shouts Project, reflect on my own learning experience and present a glimpse of real menstrual health challenges faced on a daily-basis by menstruating healthcare workers during the pandemic.

In societies where social and cultural norms and taboos are the directing force of attitudes and practices, women experience obstacles to enjoy healthy menstruation. In healthcare systems that overlook the necessity of policies that respect the menstrual journey, female healthcare workers carry an additional burden to fulfill their job requirements efficiently. Menstruation should be hidden and avoided in public discussions in such communities. Any relevant conversation that tackles menstruation or any reproductive issue contradicts societal morals.

From March-August 2020, I am Hadir Barbar, SRHR consultant and Director of Wejdan organisation, collaborated with Joy Amani Center in Kenya to implement the Menstruation Shouts project. Share-Net International -A Knowledge Platform on Sexual and Reproductive Health and Rights (SRHR)- has funded this project, intending to explore the linkage between COVID-19, SRHR and gender equality. Through the menstruation shouts project, a safe space was created for some healthcare workers in Egypt and Kenya to break the silence and speak up about their daily menstrual struggles during COVID-19 time.

Having provided this introduction, it is fundamental to start with quotes from the interviewed healthcare workers from Egypt and Kenya who took all the courage to tell their menstrual stories in the time of the pandemic.

Dr. O from Egypt:

I am a doctor working at one of the biggest teaching hospitals in Cairo, Egypt. I served many times at the quarantine department. Honestly, it was a traumatic experience that I pray every day not to repeat ever again. In a literal sense, fear of talking about personal menstrual experiences existed among us, even among those who studied medical or para-medical subjects. These societal barriers have never been addressed. I only learnt about the medical part of menstruation but not any other cultural problems. So, it is a topic for bullying rather than for showing support or sympathy. It is not surprising for me, especially after I started working at the hospital. Every female employee, including doctors and nurses, is deprived of their rights that acknowledge their menstruation. This situation worsened during COVID-19 because I had to work for more hours with no breaks to eat, drink or visit the toilet. At the quarantine department, I was risking not only my life but also my health

and safety. I experienced blood leakage and I was liable to catch an infection that could decrease my immunity.

Public Health Officer. D. from Kenya:

I am a fresh graduate from a public health school in Kenya. I serve in Machakos County – a marginalized area – as a public health officer. I work few days from the office, but the rest of the week, I manage fieldwork. The struggle commences on field-day work as I have to take a motorbike for 30 minutes to arrive at my working station. Imagine the level of discomfort and sometimes pain of this uncomfortable means of transportation. Imagine again how it feels on my menstruation days. Do not get shocked if I say this is simply the beginning! I have to be prepared when my menstruation is about to start. I carry my menstrual pads and painkiller in case that I need them. The healthcare institution where I work does not provide menstrual products for us as healthcare workers. In the field, I have no access to a toilet while my regular shift is of 8 hours if it passes with no unforeseen circumstances. It is inhumane and disrespectful for my menstrual needs. During COVID-19 time, there is a shortage of protecting equipment as the facemask, shields, and PPEs. Workers who are treating COVID-19 patients are the most in danger. The community is hugely impoverished; my institution has scarce resources, and the Ministry of Health does not invest in such needy areas. Sometimes, the Non-Governmental Organisations (NGOs), whether local or international, distribute pads or painkillers, but their services are not sustainable. Once they run out of funds, all the benefits stop.

Nurse. H. from Egypt:

I am the head of the nursing department at a prestigious private hospital in Egypt. Throughout my career, I was never allowed to take a day off because of my menstruation. Other colleagues would have regarded it as a lack of commitment, or this is what I conceived. I cannot deny my concern about being discovered on my menstrual days. Otherwise, my colleagues will assume that every move or decision I make is because of my hormones. Yes, menstruation comes with anxiety. On the practical side, all the nurses received adequate training on working in a quarantine department. The staff members and the infection control department exerted enormous effort to ensure that everyone abides by the precautionary measures. I did not notice that the training curriculum lacks information about managing menstruation until the Menstruation Shouts project's team interviewed me. When I was interviewed, there was a question about the menstrual content in these training. I was shaken a little bit because I have never thought of such content in this training or any other one despite its necessity. I took a moment to dig deep and explore the root causes of my way of thinking. I suppose I became part of the ignoring system and I normalized that my reproductive rights do not matter. On another note, the nonexistence of health information impacts the female healthcare workers and their male colleagues.

Nurse. J. from Kenya:

I consider Machakos County is my hometown, but I was born in Nairobi city of Kenya. I have lived here for my entire life. Now, I am 35 years old, and I live with my husband and two kids. I act as a community health worker (CHW) besides my work as a nurse in the local hospital that does not differ much from the primary healthcare unit. I do my work with love. However, the COVID-19 pandemic has disturbed this peaceful environment and brought

poverty and more debts. My salary got delayed for several months. I never knew when I would receive money again. My husband lost his job because of the lockdown. He got laid off. I was the only source of money, but I could not afford the salary delay. I had to borrow money from family and friends. Our debts increased, so I was embarrassed to go out to the street, worrying about meeting any creditors. We hardly purchased essential food. Purchasing menstrual products was a luxury for me at this point. I stopped using pads and started using old clothes instead. Being a nurse, I understood the accompanying risks, but it was out of my hands. My hospital refused to offer me some pads claiming that pads are the hospital's resources and only granted to patients upon official request. What a dramatic scene, the person who gives you a healthcare service has no access to it. A massive gap within equality!

After reading these touching stories about menstrual challenges and hearing more and more of these experiences, I recognised the institutional, societal and individual oppression against menstruators. Following I explain in detail how this journey taught me:

Initially, I conducted 12 semi-structured interviews with female healthcare workers from Egypt and Kenya. Admittedly as it was a learning experience, it also had an auxiliary influence on me. I got impressed and shocked, but I was triggered to do a more in-depth analysis of each interview. With all the due respect and honor to those women who took a courageous step to speak about their menstrual challenges during the pandemic, these experiences at least described; TRAUMATIC. I have noted the systematic and institutional dereliction to the monthly menstrual experience of each female healthcare worker. Not only that, I discovered how the societal barriers of discrimination and stigma created insecurities among menstruators. Bullying from male healthcare workers against their menstruating colleagues was a genuine dispute.

Through my observations, I concluded that medical or para-medical education does not necessarily have a direct link to the level of knowledge or awareness about the comprehensive menstrual experience and the associated attitudes and behaviors. As an illustration, all the interviewees explicitly reported studying menstruation from a medical, physiological, anatomical, or any other similar perspective. However, these studies lacked the requisite tips on dealing with menstruating individuals, their rights, the serving policies or strategies, or it nevermore discussed the deeply rooted taboos.

Regarding this juncture, I am not surprised. I studied medicine at Cairo University in Egypt, one of the highly ranked universities in Egypt, if not the highest. I did not receive a single piece of information about the social determinants of health of any disease, health problem, or physiological matters like menstruation, pregnancy, or abortion as examples. Fortunately, I joined the Students' Scientific Society. I developed knowledge about different public health issues in this student club, including various SRHR topics from a societal viewpoint and public health lens. It was an exceptional opportunity, but it has a limited outreach capacity.

With reference to other remarks on the interviews, all the healthcare institutions suffer from a shortage of precaution tools as face masks and PPEs regardless of the institution's financial capability. Such dearth does not offer room for changing the PPEs unless it is the end of the shift. The need to pee, change menstrual products, eat or drink is disregarded. Meanwhile, the menstruating workers do not request days when they are greatly tired or in severe during menstruation. They usually workaroud by using other excuses to avoid working these days. None of them attempted to speak up before and tell the exact reason behind their request for a day off. Although, it will be unfair to judge the administration of any healthcare institution. We cannot assert that these institutions resist supporting menstruating healthcare workers. Alternatively, I would claim that these workers do not find the workplace safe to share their menstrual experiences without fear of shame, bullying, stigma and discrimination. In my humble opinion, it is a mutual responsibility between the workers and the healthcare institutions to achieve more commendatory circumstances around menstrual practices. Undoubtedly, there is no action unless someone calls for it!

Other key actors who can significantly improve the menstrual experience of menstruating healthcare workers are the infection control department and the administrative department within the healthcare institutions. The first is responsible for securing the safety of each worker by keeping proper menstrual hygiene, including the disposal and waste management methods. The second is charged to draft and implement the needful policies to guarantee the menstruating healthcare workers an environment to follow the best practices of menstrual health management.

Of course, the Menstruation Shouts project captured a few menstrual experiences, but they were sufficient to give a spectacle of how the situation could be. The menstrual experiences have similarities as well as differences with regard to the existing intersectionality. Thus, as active members of share-net international, we did our best to apply all the lessons learned to the project and from the projects. There were clear advocacy messages for best practices and policies that can put menstruation on the top of SRHR agendas, strategies and policies.

Now, I will leave other stories for you to watch and listen through this link:

https://www.youtube.com/channel/UC5-ahv_RBgFbXcW9E8b2m6g

An interview for the project team: <https://share-netinternational.org/menstruation-shouts/>