## The Influence of Perception on Behaviour Change: Adoption of Reusable Sanitary Napkins among Rural Women in India

## Abstract

This research paper investigates the influence of perception on behaviour change in the context of menstrual health programming in rural India. Drawing upon data from the Mewat region in Haryana, India, this study highlights the changes in the socio-cultural perceptions surrounding menstruation, and the adoption of reusable sanitary napkins – following a perception-driven behaviour change intervention 'Spot On & Off' in the menstrual health space. Employing a mixed-methods approach, this study demonstrates that perception, socio-cultural influences, awareness, and access significantly shape individuals' decisions regarding the use of eco-friendly menstrual hygiene products. Through an analysis of pre and post intervention data, the research study underscores the necessity of targeted awareness campaigns and education initiatives in promoting sustainable menstruation practices in rural areas, while transforming individual perceptions and leveraging community involvement.

## 1. Introduction

## 1.1 Background

Menstruation is a natural and normal biological process, experienced by adolescent girls and women from menarche to menopause (Ministry of Health and Family Welfare, 2022). Menstruation is a vital sign of female health and development, signifying the onset of the ability to reproduce. Home to over 355 million menstruators, menstrual health in India is shrouded in societal stigma, mysticism, and socio-cultural misconceptions (The Quantum Hub, 2019). Harmful taboos around the 'monthly cycle' affect millions of women who undergo the societal humiliation and exclusion while menstruating.

Further, the lack of awareness around the scientific basis for menstruation – particularly among adolescent girls in rural areas – leads to unsanitary menstrual practices. The silence around MH in India, coupled with the socio-cultural taboos and lack of knowledge around this process, leads to women and girls resorting to unhygienic menstrual health products, which in turn result in future health complications. Further, the availability of menstrual hygiene products remains scarce in rural areas. This could be due to many reasons- one, the sheer cost of each sanitary pad is prohibitive, given low per capita earnings in rural areas. Also, the fact that women have managed without MH products thus far, makes the case for their acceptance and use that much more difficult. Budgeting scarce resources for this seems like a luxury particularly because its uses and benefits cannot be discussed and debated openly in most homes. Notably, the National Family Health Survey in India highlighted that about 50 percent of Indian women use cloth, an unhygienic menstrual product, which reiterates the need to spread awareness on this issue (Institute of Population Studies, 2019-2021).

Given its centrality to the furtherance of humankind, menstrual hygiene practices are a critically important public health issue. Over the last few decades, the Government of India has recognized the significance of menstrual hygiene and developed and implemented several programmes and schemes for menstrual hygiene management (MHM). However, given large-scale ignorance, lack of education, the perpetuation of regressive social practices, and paucity of resources, adolescent females in rural India are often unable to access sound MHM practices, and thus suffer from health issues. It is important to recognise that addressing socio-cultural perceptions is key to unleashing large-scale behaviour

change in the MHM space in India, given that many of the barriers to MHM have their roots in individual and collective perceptions on this issue.

## 1.2 Problem Statement

This research study seeks to develop evidence on the following problem statement:

# Limited adoption of reusable sanitary napkins among rural women due to various socio-cultural factors.

MH challenges in India are deeply rooted in socio-cultural factors. The lack of knowledge around this natural biological process leads to phrases like 'impure', 'unclean', 'do not enter temples', and 'do not wash your hair' being repeated to menstruating women and girls across India. Even those with a more cosmopolitan upbringing are not immune to such stereotypical behaviour arising from the misplaced shame and disgust associated with what is a normal bodily function. This affects girls' self-worth as they associate their bodies and identities with negativity, which prevents them from being forthcoming about any health concerns relating to the menstrual cycle (WaterAid, 2018).

Linked to the social stigmatisation of menstruation, period poverty is also an important MH challenge. Period poverty is the lack of access to hygienic menstrual products and the education needed to use them effectively. It is a serious concern given the scale poverty, lack of awareness, and generational stigmatisation; commercial sanitary products are neither accessible nor affordable to multitudes of women. The high costs of disposable pads, poor distribution networks, and lack of awareness regarding alternatives result in increased risks of health issues, leading to fatalities for lack of a well-laid health care infrastructure (Dasra, 2014; Takalkar et al., 2021).

Given the lack of access to disposable pads, reusable pads have emerged as a viable alternative – particularly for rural women and girls in India. The 'Spot On & Off' programme addresses many of the challenges outlined in this section. Spot On & Off's vision is to encourage women of all ages (with a focus on rural India) to embrace menstruation as a normal part of living. The idea is to spread awareness about menstruation and counter related social taboos with knowledge and education.

- The Spot On & Off programme supports the United Nations Sustainable Development Goals (SDG) 3 and 4 of good health, well-being, and quality education. In India, millions of girls drop out of school due to lack of access to sanitary pads, and many lose their lives due to poor menstrual hygiene. By educating young girls about the importance of good hygiene, Spot On & Off aims to create impact in an area where the need is the greatest.
- The Spot On & Off programme also contributes significantly to the UN Sustainable Development Goal 11, aimed at creating sustainable cities and communities. By creating awareness about reusable sanitary pads, the programme contributes towards waste reduction by advocating and promoting biodegradable pads.

As part of Spot On & Off's programme, workshops aimed at the following goals are implemented in rural India:

- Educating girls about menstrual health and helping them confidently navigate this stage of life.
- Educating their mothers and aunts, through a video featuring professionals (gynaecologists), in which they spoke about hygiene and menstrual health and the need to use sanitary pads. The community is also encouraged to to share the video, to spread awareness and foster change.

• Providing the girls with reusable pads, which can last one and a half to two years and help them take the first steps towards a self-sustainable method to maintain good hygiene.

#### 1.3 Purpose of the Study

The purpose of this study is to understand the changes in menstrual behaviour patterns and acceptance of reusable sanitary pads as a hygiene resource by women in rural India. The study looks to understand how changes in individual perceptions around menstrual health can influence behaviour change, particularly around the adoption of re-usable sanitary napkins.

Data from the Spot On & Off programme has been employed for this study. Analysis of data collected through pre, and post engagement with women and adolescent girls in Haryana, India has been used to draw inferences about the impact thus created. Through this, the study seeks to develop further insights on perception-driven behaviour change and implications for designing and implementing sustainable MHM programmes in India.

## 2. Literature Review

## 2.1 Perception and Behaviour Change

Perception is the process through which people interpret and make sense of the sensory data they receive from the external environment. It involves the way sensory data is organized, recognized, and understood by the brain to create a meaningful and coherent representation of the environment. Perception plays a fundamental role in shaping an individual's understanding of the world and influences how they interact with their surroundings (Qiong, 2017).

There are a range of theoretical frameworks related to perception and behaviour. For instance, the Social Cognitive Theory highlights the role of social influences on individual behaviour. This theory posits that learning occurs within a social environment, with a dynamic and reciprocal relationship between the person, the context, and the behaviour (Boston University, 2022). Further, the Theory of Planned Behaviour also highlights the roles of perceptions and beliefs in determining behaviour patterns. This theory suggests that human behaviour is informed by three types of beliefs: behavioural, normative, and control (Bosnjak et al., 2020). Next, the Health Belief Model is linked critically to health behaviour research and highlights the concepts that predict people's behavioural responses to health conditions – these include beliefs and perceptions around susceptibility, seriousness, benefits and barriers to a behaviour, cues to action, and self-efficacy (Champion and Skinner, 2008). In addition, the Diffusion of Innovations Theory highlights how people's perceptions of a new product / philosophy / practice influences the timelines within which they adopt it (Kaminski, 2011). Finally, the Elaboration Likelihood Model highlights the role of persuasion in transforming perceptions and attitudes, and in turn behaviours (O'Keefe, 2013).

#### 2.2 Reusable Sanitary Napkins: Benefits and Barriers

Reusable sanitary napkins, also known as cloth pads or menstrual cloth, are eco-friendly and costeffective alternatives to disposable sanitary pads. A reusable sanitary napkin can be used repeatedly after washing, over several menstrual cycles. Progress on the adoption of reusable pads has been slow in India – notably, 0.3 percent of Indian females in the age group of 15-24 years use reusable menstrual products (Babbar and Garikipati, 2023). A literature review on the benefits and barriers of using reusable menstrual pads in India highlights the potential advantages of these eco-friendly and cost-effective alternatives, along with the challenges that individuals may encounter.

#### 2.2.1 Benefits

- Environmental benefits: Since reusable pads can be used over several menstrual cycles, they reduce the possibilities of frequent waste disposal, and reduce the generation of non-biodegradable wastes. Further, many organizations that produce reusable sanitary napkins in India prioritize sustainable and ethical manufacturing practices, such as using eco-friendly dyes and materials, which contributes to overall environmental benefits (UNESCO, 2018).
- Economic benefits: In the long term, reusable pads are more cost-effective alternatives since they can be used over an extended period of time with proper hygiene and care. For women and girls vulnerable to period poverty, the economic benefits and cost savings associated with using reusable pads is particularly relevant. Further, the manufacturing of reusable pads has also been associated with the creation of employment opportunities for local communities thereby ensuring economic benefits for the producer side as well (WSSCC, 2013).
- Health benefits: Reusable pads are often made of natural fibres and 'breathable materials' like cotton. This reduces the risk of skin irritations and allergies, while ensuring sound MH practices for a wider section of the population (WSSCC, 2013).

#### 2.2.2 Barriers

- Lack of Awareness and Education: There is lack of awareness on the ways to access and utilise reusable pads, and their overall benefits (Bachloo et al., 2016). In fact, much of the MHM programming in India – by the government and other development partners – has focussed on disposable sanitary products, which may have contributed to this knowledge gap regarding reusable pads (WaterAid, 2018).
- Socio-cultural taboos and stigma: Cultural practices and stigma often term reusable menstrual products as 'unclean' or 'impure'. This is because the reusable cloth pads are used over multiple menstrual cycles, and therefore seen as becoming progressively and cumulatively dirty (even though they are cleaned after each menstrual cycle). Such cultural perceptions may deter Indian women and girls from using reusable pads (Jalan et al., 2020)
- Access to Cleaning Facilities: Cleaning reusable pads effectively requires access to clean water and soap, which may be limited, particularly in rural or underserved areas. Further, the proper drying of reusable pads can be challenging, particularly in areas with high humidity or during monsoon seasons. In turn, insufficient drying can lead to hygiene issues (Bachloo et al., 2016; WSSCC, 2013)
- Privacy and Storage: Reusable pads need to be cleaned, stored, and dried properly to be ready for the next use and to avoid infections. However, many women may lack the privacy and space to do this – particularly when living in communal arrangements or in crowded areas (UNICEF, 2017).

## 3. Methodology

#### 3.1 Participants

This research study uses the data collected as part of the Spot On & Off programme from women and girls belonging to the Muslim-Rajput ethnic community in Haryana's Mewat region located in northwest India. The educational and awareness raising activities of the Spot On & Off programme were centred on Mewat because the region is considered to be one of the most socio-economically backward regions in India – particularly when seen from the lens of literacy rates, employment opportunities, access to internet connections etc. Further, initiating the Spot On & Off programme activities in this complex environment would bolster execution capabilities, and help create wider change going forward.

#### 3.2 Data Collection

Data Collection activities spanned four phases:

- Focus Group Discussions (FGDs): We conducted a focus group discussion with 12 girls in Mewat to understand their MH challenges, and possible solutions which could potentially change their health prospects and lives for the better.
- Pre-Camp Survey 1: The first survey was conducted in October 2020. It was a preliminary one aimed at understanding the community we would be working with in Mewat for the Spot On & Off activities. The sample size was 306 women and girls from the two villages of Kherla and Rewason in Mewat. To gain a clearer picture of the MH challenges faced, this survey asked questions on their perceptions on the menstruation process, levels of awareness concerning the usage of pads versus cloth, the barriers preventing usage of pads (awareness, price, resistance from older women at home/ social context, others), and willingness to try reusable pads. The quantitative survey employed a mix of dichotomous, multiple choice, and Likert Scale questions (full questionnaire provided in *Annex 1*).
- Post-Camp Survey 1: This survey was designed as a post-workshop evaluation and was administered in March 2021, i.e., three months after our first MHM workshop in December 2020. The questions were posed to the same sample as the pre-camp survey, and the questions were similar to those employed in the pre-camp survey so that we could make a comparison. The objective of the exercise was to ascertain the progress made with regard to menstrual hygiene and awareness by the concerned group (full questionnaire provided in *Annex 2*).
- Post-Camp Survey 2: This survey was another post-workshop evaluation survey for another menstrual hygiene session conducted in Mewat in March 2022. The sample size was 506 women and girls from the four villages of Nangli, Sonkh, Ghasera, and Badwa. This survey was sent out three months later in June 2022. It asked similar questions to the one in the previous post workshop survey and sought to ascertain the impact of our MHM workshop conducted three months ago (full questionnaire provided in *Annex 3*).

The age and area composition for the three surveys is highlighted below in Table 1:

Age Group	Pre-Camp Survey (Oct	Post-Camp Survey 1 (Mar	Post Camp Survey 2 (June
	2020)	2021)	2022)
8-15 years	54	54	14
16-35 years	187	187	312
36-60 years	65	65	180
Sample Total	306	306	506
Villages Sampled	Kherla and Rewason	Kherla and Rewason	Nangli, Sonkh, Ghasera,
			and Badwa

Table 1: Sample Size and Distribution

All surveys were conducted in a controlled environment, wherein a local representative in Mewat organised it. The survey participants completed the surveys on their personal devices. For the first survey, opportunity sampling was used as the sampling criteria required the participants to be girls or women from Mewat. For the following two surveys, the sampling criteria required the participants to have attended the MHM workshops conducted by the Spot On & Off programme. The surveys were all in the local vernacular, Hindi so that it was easy to understand for the participants. The results were then translated into English to facilitate analysis.

#### 3.3 Data Analysis

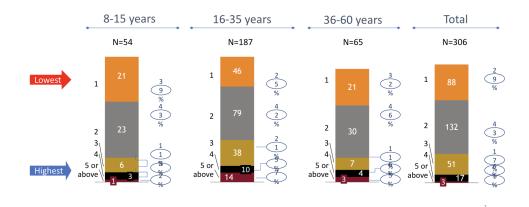
This research study adopted a mixed-methods approach for data analysis. The quantitative data collected from the FGDs, and surveys was cleaned – by checking for missing responses, removing duplicates, and ensuring that the data was in a suitable format for analysis. Next, a preliminary exploration of the data collected was conducted – by preparing frequency distributions for the survey responses and visualising the data in the form of graphs and charts. Further, descriptive statistics like means and proportions were used to analyse the data and develop findings along various themes related to our MHM workshop's intended results. The qualitative data from the FGDs was analysed to identify recurring themes and patterns related to MHM. The qualitative data was used to supplement the findings of the quantitative data, thereby triangulating results to generate robust conclusions and recommendations.

## 4. Results

#### 4.1 Perception and Awareness

Analysis of the pre-camp survey data revealed significant gaps in awareness regarding menstruation, particularly among women and girls in the 16-35 age group. On being asked to rate their awareness of menstruation on a 10-point scale, 72 percent participants rated 1 or 2 (as shown in *Figure 1*). Further, 74 percent participants did not have access to their own cell phone and were unable to access awareness raising videos through mobile phone platforms.

#### Figure 1: Awareness of menstruation - rated on 1 to 10 (pre-camp survey data)



Results from the post-camp surveys 1 and 2 highlighted significant improvements in awareness levels. Notably, the mean score on 'understanding of menstruation' increased from 2.19 (recorded in the precamp survey) to 5.54 out of 10 (recorded in the first post-camp survey). Further, the second post-camp survey highlighted that the awareness levels on menstruation had increased after the workshops, with a mean score of 'understanding of menstruation' at 7.6 (as shown in *Figure 2*).

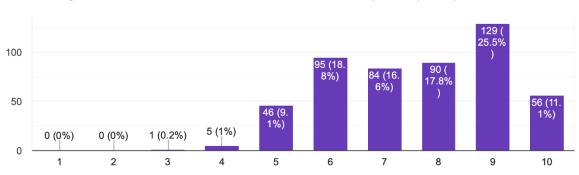
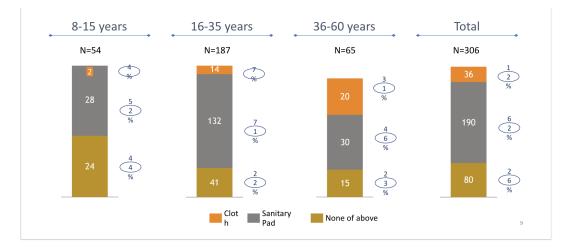


Figure 2: Awareness of menstruation – rated on 1 to 10 (second post-camp survey data)

## 4.2 Attitudes around Reusable Sanitary Napkins

The pre-camp survey revealed that a large number of adolescent girls live with very unhygienic options for menstruation, driven by lack of awareness, price of disposable pads, and the stigma surrounding the problem. Notably, 38 percent of adolescent girls were found to be using cloth as menstrual products, or nothing at all (as shown in *Figure 3*).



#### Figure 3: Menstrual products used (pre-camp survey data)

On being probed further, the participants highlighted several reasons for not using pads (as shown in *Figure 4*). While 15 percent of the participants cited the price of sanitary being a prohibitive factor, 15 percent cited lack of awareness, and the balance highlighted their socio-cultural context (wherein pads were not part of their family's ethos; factors reinforcing shame around periods). It was found that the availability of pads was not a challenge (60 percent of participants confirmed buying pads from their village or the medical store, while the rest confirmed not using pads). This could be on account of the distribution networks of large companies aided by the very long shelf-life of the product.

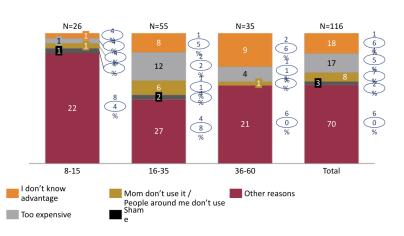
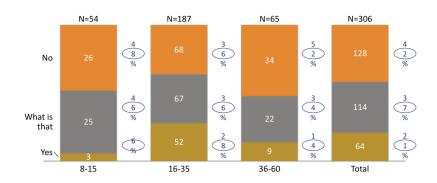


Figure 4: Reasons behind not using sanitary pads (pre-camp survey data)

The pre-camp survey results also highlighted a fairly high level of acceptance for reusable pads. While 37 percent participants confirmed being interested in exploring more about the reusable pads, 21 percent agreed to try them (as shown in *Figure 5*).

Figure 5: Acceptance of re-usable pads (pre-camp survey data)



#### 4.3 Influence of Social Networks and Family Perception

The surveys and FGDs highlight different ways through which social networks and family perceptions influence MH outcomes and related behaviour change. During the FGDs, participants spoke about their experiences at the start of puberty – traditionally considered a complex and confusing time for girls – even for those coming from more liberal backgrounds. They spoke about their family environment – one that was neither willing to address any misconceptions, nor provide any sanitary products to deal with the 'problem'. It emerged that their mothers and aunts did not have any better understanding of the cycle than them, and shared that some use cloth, others nothing at all. Many could not justify the monthly expenditure on pads.

The pre-camp survey data highlighted the stigma and social taboos surrounding menstruation. 97 percent of the participants shared that they were not allowed to visit a temple during their menstrual cycle. Other restrictions included not being able to go to school, and not being allowed to eat with their families (as shown in *Figure 6*). At the same time, access to hygienic toilets in schools did not emerge as a systemic or societal barrier to attending school during menstruation, with 94 percent adolescent girls confirming that their school had a hygienic toilet. This reinforces the fact that girls not attending school during their menstrual cycle is more a function of socio-cultural factors (including self-exclusion based on self-perceptions around being dirty or unclean) and less a function of inadequate school infrastructure.

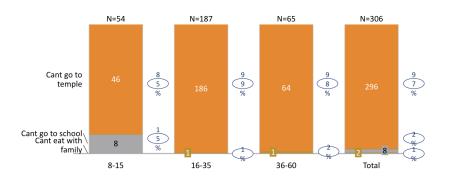


Figure 6: Restrictions imposed during menstrual cycle (pre-camp survey data)

Evidence from the surveys highlighted that the MHM workshops have been effective in spreading awareness on healthy menstrual practices – not only among the participants but also among their family

members, as a cascading effect. During the pre-camp survey, 12 percent of the participants confirmed being willing to help raise MH awareness within their families and communities (as shown in *Figure 7*).

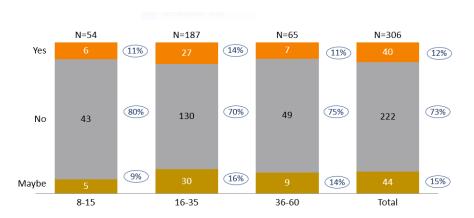
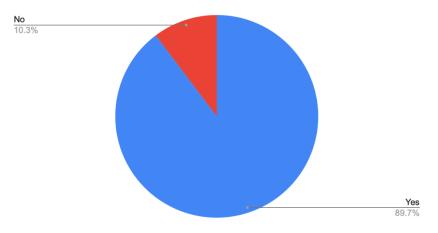


Figure 7: Willingness to help raise awareness regarding MH (second post-camp survey data)

In the second post-camp survey, 90 percent of the participants confirmed that there had been a positive change in their family's perception regarding menstrual health, on account of the activities of the Spot On & Off programme, and their awareness raising activities (shown in *Figure 8*).

Figure 8: Changes in family perceptions and behaviours regarding MH (second post-camp survey data)



At the same time, the second post-camp survey highlighted that even after attending the workshops, young adolescent girls still do not attend school during their menstrual cycle. Notably, of the 157 school going girls, 146 confirmed not attending school while menstruating (as shown in *Figure 9*). This poses a risk to their learning outcomes, particularly in contexts wherein they end up missing up to 45 school days a year.

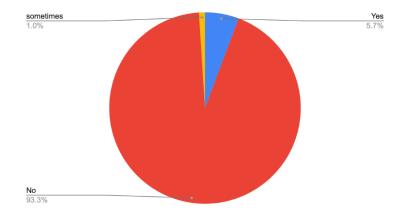


Figure 9: School attendance during menstrual cycle (second post-camp survey data)

#### 4.4 Behaviour Change and Adoption

Following the distribution of re-usable pads as part of Spot On & Off's activities, the post-camp surveys found very positive attitudes around re-usable pads. In the first post-camp survey, 91 percent of the participants confirmed using reusable pads. Further, reusable pads received an average desirability score of 3.51 out of 5. The second post-camp survey also echoed these findings: in that survey, 504 out of 506 participants confirmed using the reusable pads (as shown in *Figure 10*).

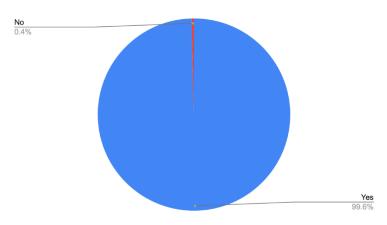


Figure 10: Use of reusable pads (second post-camp survey data)

The behaviour change and adoption of reusable pads is rooted in the environmental benefits and costsavings for rural women and girls in India.

## 5. Discussion

#### 5.1 Role of Perception in Behaviour Change

Data from the Spot On & Off programme highlighted that the way in which women and girls perceive menstruation, MH practices, and the MH products available strongly influences their behaviours. This was evident in a number of ways. First, the participants registered an improvement in awareness levels regarding MH practices across the pre and post camp surveys. This contributed to changing perceptions regarding menstruation – from being a process shrouded in myth and mystery, to a process that was natural and normal. Second, a significant proportion of the participants were previously using unhygienic cloth pads or no menstrual product at all, during their menstrual cycle. However, the programme's educational workshops and distribution of reusable pads contributed to changing their

perceptions on what a hygienic menstrual product was, and what the risks of using unsanitary products could be. The widespread adoption of reusable pads in the post-camp surveys underscores the role of this changed perception on sanitary products in ensuring large-scale behaviour change. However, a gap that continues to persist is that several school-going girls are still not attending school during their menstrual cycle (in spite of having hygienic toilet facilities in schools), and future interventions should look to address this gap, by addressing its behavioural and socio-cultural roots.

#### 5.2 Tailoring Interventions for Rural Communities

This research study has generated a lot of learnings for tailoring interventions to the needs of rural communities. Designing interventions that address socio-cultural perceptions and influence behaviour change for rural communities require a careful examination of various factors to ensure effectiveness – as highlighted through the Spot On & Off programme's data. For one, the FGDs and pre-camp survey helped generate preliminary insights on the overall socio-cultural landscape, including on the needs of menstruating women and girls, and the MH barriers which they faced. These initial interactions helped understand local customs, traditions, and beliefs. These cultural nuances were reflected in the subsequent MH workshops, which helped ensure that the content in the sessions was relevant, while being culturally sensitive. In addition, behaviour change interventions should also consider the medium through which the intervention is being delivered- the pre-camp survey data generated valuable insights about the majority of participants *not* having access to a mobile phone, which in turn compelled the programme to develop newer modes of spreading awareness among the participants (such as through in-person workshops etc.). Going forward, interventions tailored towards rural communities should be delivered in ways that are compatible with the local resources available and the level of technological advancement of the community in question.

#### 5.3 Community Engagement and Empowerment

Data from the Spot On & Off programme highlighted the role of community engagement and empowerment in transforming perceptions and generating long-term behaviour change. The programme engaged with not only adolescent girls, but also their mothers, aunts and the broader community. Further, the participants who engaged in the Spot On & Off workshops also showed the awareness raising videos to their family members back home and helped spread well-researched information on MH to their communities. Community involvement helped build trust and foster greater behaviour change at the individual and community levels, which in turn ensured higher adoption of reusable pads across households. The FGDs and pre-camp survey results had highlighted socio-cultural taboos and family perceptions, which often viewed menstruation as being 'unclean' or 'dirty'. However, through the awareness raising activities of the Spot On & Off programme, the participants confirmed positive changes in their families' perception of periods – which in turn contributed to positive behavioural changes towards women and girls during their menstrual cycles. In essence, the cascading model of perception change helped influence behaviour change at a wider scale – with the individual adoption of MH outcomes reinforcing each other.

## 6. Conclusion

## 6.1 Summary of Findings

This research study has generated several valuable findings. For one, awareness of menstruation was found to be limited among rural women and girls in Mewat, particularly in the 16-35 years age group.

However, the Spot On & Off programme's activities were effective in raising awareness about menstruation, changing perceptions on the process, and fostering hygienic menstrual practices – as evidenced by the improvements in awareness levels in subsequent post-camp surveys. Further, menstruating women and girls confirmed being subject to several socio-cultural restrictions during their menstrual cycle – including not being allowed to go to the temple, eat with their families, or go to school. While the Spot On & Off programme's activities have transformed the perceptions of families and social networks positively (as evidenced by the data of the post camp surveys), a gap with respect to girls' education persists: a number of school-going girls still refrain from attending school during their menstrual cycle. Further, a significant number of women and girls in Mewat confirmed using unhygienic/no MH products before the programme intervention due to factors ranging from price and lack of awareness to socio-cultural barriers; however, after attending the programme activities, their perceptions were observed to change with large-scale adoption of reusable pads. The findings illustrate the transformative potential of changed perceptions, and their influence on behaviour change – at the individual and community levels.

#### 6.2 Implications for Sustainable MHM Programs in Rural Areas

This research study provides the following key implications for building sustainable MHM programmes in rural areas.

- MHM programmes in rural areas should focus on promoting and distributing reusable menstrual products. Presently, MH programming in India has largely focussed on promoting disposable menstrual products. However, reusable pads provide a more cost-effective and environmentally sustainable alternative, which should be actively pursued in future MHM programmes.
- MHM programmes should provide a package of services: This research study highlighted the value of combining educational workshops with the distribution of reusable pads wherein both components of the interventions reinforced each other. Future MHM programmes should look to combine and create a 'package of services' in a similar way, to address the economic and socio-cultural barriers to adoption of MH products in a holistic manner.
- Future MHM programming in rural areas should focus on community involvement: Addressing the socio-cultural myths, shame, and taboos surround menstruation requires involving not just the women and girls who experience these challenges, but also members of the community who may foster such negative perceptions. By involving community members – including family members, neighbours, village leaders etc., interventions will pave the way for menstrual health to become a commonly discussed topic at the village level, thereby breaking down the taboos and myths surrounding it. Transforming community perception is as crucial as transforming individual perceptions around MH.
- MHM programmes should address school dropouts by adolescent girls: The research study highlighted that a large number of adolescent girls miss school during their menstrual cycle. Future programmes should raise awareness on the importance of attending school even during one's menstrual cycle and facilitate access to MH products within school premises as well. This will encourage more adolescent girls to transform their attitudes towards education and change their behaviours with respect to school attendance during their menstrual cycles.

#### 6.3 Final Thoughts on Perception-Driven Behaviour Change

In sum, perception-driven behaviour change plays a crucial role in modifying the actions, decisions, and individuals. In essence, when people find a behaviour aligned with their beliefs and values, then they are more likely to engage in it. In the context of the menstrual health in India, perception-driven behaviour change has the potential to transform MH outcomes, particularly in rural areas. This is because such behaviour change is rooted in transforming the very perceptions that give rise to harmful socio-cultural norms and behaviours. By changing perceptions surrounding menstruation and menstrual health products, there is immense potential to make a difference in the menstrual experiences of women and girls – through healthier behaviours, improved societal attitudes, adoption of hygienic MH products, and participation in socio-cultural activities without barriers. Changing the perceptions of individuals and communities is the first step towards behaviour change for positive outcomes.

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## 8. Annexures

## 8.1 Pre-Camp Survey Questionnaire

Pre Camp Survey 1 - Spot On & Off												
ahaanabr29@gmail.com Switch account											Ø	
Rate your	under	standir	ng of n	nenstr	uation	on a s	cale o	f 1-10				
	1 2 3 4 5 6 7 8 9 10											
Lowest	0	0	0	0	0	0	0	0	0	0	Highest	
Do you ha O Yes O No	ive a d	evice v	vhere y	you ca	n wato	∶h vide	os we	send?				
0	duct do ary Pad	-	se dur	ing yo	ur peri	od?						
<ul> <li>Тоо е</li> </ul>	t know xpensiv	advant ve	age			don't us	se it					
O Sharr	e											

O Other reasons
Assuming you use sanitary pads, at what price do you buy them? <ul> <li>Dont use</li> <li>Rupees 5</li> <li>Rupees 8</li> </ul>
Where do you buy sanitary pads from?  Village Medical Store Don't use
Do you have a hygienic toilet in your school? Yes No
Are you interested in using a reusable pad?  Yes No What is that?
What restrictions do you have to abide by while you are menstruating? <ul> <li>Can't go to the temple</li> <li>Can't go the school</li> <li>Can't eat with the family</li> </ul>
Would you like to help us create more awareness?  Yes No
Submit Clear form This content is neither created nor endorsed by Google. <u>Report Abuse</u> - <u>Terms of Service</u> - <u>Privacy Policy</u>

Google Forms

## 8.2 Post-Camp Survey Questionnaire 1

Post Camp Survey 1 - Spot On & Off											
ahaanabr29 Eo Not sha		l.com	Switch	accou	nt						Ø
Rate your u	Inders	tandin	ig of n	nenstr	uation	on a :	scale	of 1-1(	)		
	1	2	3	4	5	6	7	8	9	10	
Lowest	0	0	0	0	0	0	0	0	0	0	Highest
Are you usi O Yes O No	ing the	e reusa	able pa	ads we	e provi	ded?					
Are you liki O Yes O No	ng the	new p	oad?								
Submit											Clear form

## 8.3 Post-Camp Survey Questionnaire 2

Post		-			-	- S	oot	On	& (	Dff	
ahaanabr2		ail.cor	n Swite	ch acco	ount						Ø
Which vill	age ar	e you f	rom?								
⊖ spn	angli										
O Sonki	۱										
O Badw	а										
⊖ Ghas	era										
What is yo	our age	e grou	o?								
0 8-15											
0 16-35											
36-60											
Rate your	knowl	edge o	of men	struati	on on	a scal	e from	1-10			
	1	2	3	4	5	6	7	8	9	10	
	0	0	~	$\sim$	0	~	0	$\sim$	0	~	

Has there been any change in your family behaviour regarding	g menstruation?
O Yes	
Νο	
Do you go to school if you are on your period?	
O Yes	
O No	
O Sometimes	
Do you use the sanitary pads provided by us?	
O Yes	
O No	
Submit	Clear forr
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Google Forms	