

MENSTRUAL HEALTH COUNTRY SNAPSHOT



NEPAL

Menstrual health remains a neglected issue in Nepal due to limited resources and social stigma. Yet, growing public awareness offers the potential for meaningful progress.

MH CONTEXT

Summary

In Nepal, menstrual health (MH) is a significantly overlooked issue. As of 2025, there are approximately 15.5 million women and girls in Nepal, 290,000 of whom are experiencing menstruation every day (Khanal et al., 2023). A lack of formal education on MH, limited access to sanitation facilities and menstrual products, and poor national infrastructure in education and healthcare all compound MH challenges. These challenges are exacerbated by gender discrimination and menstrual stigmatization, which remain deeply embedded in Nepali cultural, religious, and social norms. As a result, women and girls experience high levels of social restrictions, absenteeism from work and school, and limited support during menstruation. Though the government of Nepal has taken important steps toward normalizing menstruation and strengthening MH resources in the last decade, improved sanitation, education, and product accessibility are all needed to advance MH conditions. Evidence-based research on MH in Nepal remains limited, highlighting the need for further study to gain a more comprehensive understanding of the country's menstrual health landscape.

Absenteeism

Menstruation-related absenteeism is a pressing issue in Nepal, both in rural and urban areas (Paria et al., 2014). Similar to other low- and middle-income countries, Nepal's lack of MH infrastructure and resources, specifically in schools, exacerbates absenteeism. A 2024 study of absenteeism in Lumbini Province found that a lack of access to MH products and water, sanitation, and hygiene (WASH) facilities (including private changing rooms, toilets, disposal facilities, and clean water) was the predominant reason for absenteeism from school among girls. 63% of survey respondents reported missing at least one day of class during menses, and 6% missed three or more days, while only 9% of respondents consistently

51.1%



of the population are
women and girls
(about 15.6 million)¹

Household WASH Access²

95% of the Nepalese
population has
access to safe
drinking water

64% have access to
handwashing
facilities in
their homes

51% has access to
safely managed
WASH facilities



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attended school during their menses ([Bhandari et al., 2024](#)). While absent from school, 43% of respondents missed homework submissions and tests, and 17% missed final examinations and were forced to repeat the same class.

In Chitwan District, almost two-thirds (63%) of girls reported missing school during their period ([Khanal et al., 2023](#)). While some girls were absent due to pain and discomfort, 99.5% of girls experienced cultural restrictions (social isolation, banishment from the home, limited food or health supplies, etc.) during menstruation that correlated to their absenteeism ([Thapa and Aro, 2021](#)). The correlation between menstruation and social stigmatization in school is particularly strong in Nepal. Nepalese girls with higher menstrual stress and shame are 1.4 to 1.7 times more likely to miss school than girls who experience low-to-no stress or shame ([World Vision, 2021](#)). According to a cross-regional UNICEF study, 45% of Nepalese girls were uncomfortable sitting toward the front of their classroom during menstruation. In schools that do not receive government-funded WASH programs, 21% of girls said they would never raise their hand during class to answer questions while menstruating, and 43% said they would never write on the class board. These statistics are slightly lower in schools that receive WASH funding.

The rural/urban divide and socioeconomic barriers also contribute to menstrual-related absenteeism. Girls in Sudurpaschim Province experience high levels of school absenteeism, due in part to its rural topography and the prevalence of cultural taboos and practices surrounding menstruation, including Chhaupadi, where menstruating girls and women are forced to stay in huts or sheds away from the home. Chhaupadi has been directly linked to the deaths of women and girls, including those due to exposure, smoke inhalation, or animal attacks while isolating during Chhaupadi. Comparatively, girls in Koshi Province and Lumbini Province were 53% and 46% less likely to miss school, respectively, than girls in Sudurpashchim ([World Vision, 2021](#)). Janajati girls, an ethnic minority and lower caste group in Nepal, are also 2 times more likely to be absent from school due to poor MH than girls in upper caste groups ([World Vision, 2021](#)).

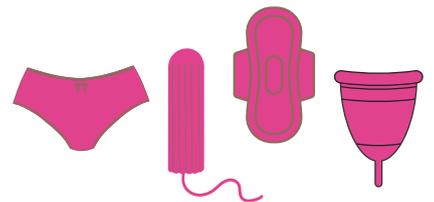
Access to Products

A lack of hygienic MH practices and access to purpose-made MH products (commercially available [[Wilson & Mahajan, 2025](#)]) is considered a major social and public health issue in Nepal ([Hasan et al., 2025](#)). Only 15% of Nepalese girls (between the ages of 10-24) had ever used a commercially manufactured menstrual pad, while 84% relied on cloth for their MH management ([WaterAid, 2018](#)). Access to menstrual

Menstrual Product Access

39%³

of women rely on unhygienic methods for MH management



VAT on Products

0%⁴

as of 2025



MH CONTEXT

pads and other purpose-made products is often limited due to high costs and low availability. This can be due to poor quality of products, limited information on how to use them, and a lack of infrastructure for safe disposal ([UNFPA Nepal, 2025](#)). These barriers are reinforced by misconceptions and fears around purpose-made products, particularly that they contain harmful chemicals and/or are unsafe to use ([UNICEF, 2018](#)). Additionally, reusable products like washable pads are not widely used because of the shame associated with washing and drying them outdoors ([Hasan et al., 2025](#)). Similarly, one study found that 47% of Nepalese girls surveyed threw soiled pads into rivers or bushes to avoid washing or disposal ([UNICEF, 2013](#)).

Knowledge of safe practices and access to purpose-made menstrual products in Nepal are also often determined by location and socioeconomic status. Women and girls in Nepal's urban areas consistently have improved access to MH products, including single-use products, than those in rural areas. In rural areas, only 9% of women and girls use purpose-made menstrual pads, while 89% use cloth to absorb menstrual blood ([Hasan et al., 2025](#)). In urban areas, 34% of women and girls use purpose-made menstrual pads, while 64% use cloth ([Hasan et al., 2025](#)). 48% of reproductive-age women across all 7 provinces in Nepal reported using hygienic methods for MH management, compared to 39% who use unhygienic menstrual absorbents (e.g., old clothes, rags, or leaves) ([Hasan et al., 2025](#)). This study found that women and girls were more likely to engage in safe MH practices if they received more than 5 years of education, worked white-collar jobs rather than blue-collar, and belonged to families with higher wealth statuses.

Access to Information & Education

Access to reliable MH information and education varies across Nepal, and is generally inconsistent for most women and girls. Many girls do not receive age-appropriate and sufficient education about menstruation before experiencing their first period. This fact is illuminated in the Parsa district, where 76% of girls did not know the cause or reason for the onset of menstruation ([UNICEF, 2018](#)). Most commonly, Nepalese girls receive MH information and support from their mothers ([WaterAid](#)). 61% of girls in Lumbini Province report receiving

Product Standards

- Disposable Pads
- Washable Pads
- Menstrual Cups

Key Government Stakeholders

- Ministry of Women, Children, and Senior Citizens (MOWCSC)
- Ministry of Education, Science, and Technology (MoEST)
- Ministry of Health and Population (MoHP)
- Ministry of Water Supply, and Ministry of Industry, Commerce, and Supply
- National Women Commission
- Nepal Bureau of Standards and Metrology
- Planning Commission (NPC)

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information about menstruation from friends and family members ([Bhandari et al., 2024](#)). However, information from family members can be limited and may perpetuate taboos or myths about menstruation ([Bhandari et al., 2024](#)). While NGOs and media play an important role in educating girls about menstruation and bodily changes experienced during menarche, formal education is lacking ([Yadav et al., 2018](#)).

In Chitwan, 53.2% of school-age girls surveyed had never participated in a MH-related program in their school, and 57.7% had a very limited level of MH knowledge ([Khanal et al., 2023](#)). 98% of girls surveyed in the Shivanagar and Patihani villages of Chitwan reported being insufficiently educated about menstruation at school ([Adhikari et al., 2007](#)). Broadly, a high proportion of Nepalese girls are not informed of the cause or reason for menstruation, and are thus ill-prepared to manage their periods. In the Parsa district, 76% of girls reported that they did not know the cause of menstruation ([UNICEF, 2016](#)). School-based health education plays a vital role in preparing girls for menarche. Before receiving such education, only 38% of girls in Chitwan knew that menstrual bleeding originates from the uterus, and only 52% knew that it was a normal and healthy process ([Khanal et al., 2023](#)).

Access to WASH

Access to WASH facilities and resources in Nepal is largely inconsistent and has major impacts on MH practices. 51% of the Nepalese population has regular access to a safe sanitation facility, and 64% have access to a handwashing facility in their homes ([International Water Management Institute, 2025](#)). While WASH access has significantly improved in recent decades, it remains a critical issue in Nepal ([UNICEF, 2024](#)). 20% of government-funded schools lack improved WASH facilities, and 19% lack separate toilets for boys and girls ([UNICEF](#)). This greatly impacts safe MH management for girls in school.

Out of 11 schools observed in seven Nepali villages, only four had separate toilets for girls and boys, and only three had running water ([Yadav et al., 2018](#)). In a survey of five rural districts across Nepal, no schools were found to have private WASH facilities, and only 12 schools had waste disposal facilities ([Morrison et al., 2018](#)). Among Nepali schools that have separate toilets for girls, they still suffer from a lack of privacy and cleanliness ([UNICEF, 2016](#)). As a result, girls often feel uncomfortable using school facilities when menstruating because they need to change and dispose of soiled products. Additionally, many avoid using school toilets for urination during their period out of fear of leaving blood marks ([WaterAid](#)).

Myths & Taboos

In Nepal, MH is deeply affected by cultural taboos and discriminatory traditions. Religious beliefs in Nepal often inform these discriminatory practices against women and girls, as many believe that menstruation is impure ([Bhandari et al., 2024](#)). Harmful traditional norms

like Chhaupadi persist in many rural areas, despite being criminalized in 2017 ([Amatya et al., 2018](#)). While menstruating, women and girls face other forms of exclusion, including being barred from cooking, eating, participating in religious and social spaces, and touching friends or family members ([UNICEF, 2018](#)).

Restrictions and taboos around menstruation are more common in rural and remote areas than in urban ones. However, studies show that nearly all girls and women in Nepal face some form of restriction during their periods ([Khanal et al., 2023](#)). This cultural stigmatization helps explain Nepalese women and girls' absenteeism from work and school during menstruation, as well as their lack of comprehensive MH knowledge ([Bhandari et al., 2024](#)). Some studies have found that there is also a connection between MH restrictions and maternal health outcomes, as ideas of impurity around women and girls' reproductive health lead to more at-home births and higher risks of maternal mortality ([Kumair and Maity, 2022](#)).

MH POLICIES & PROGRAMMING

MH Product Standards

Nepal has a national standard for disposable sanitary napkins ([NS 587:2077](#)). The sanitary napkin standard includes requirements for product composition, manufacturing specifications, absorbency, and bacterial bioburden. Products that conform to the standard are eligible to display the national certification, but this certification is not mandatory for manufacturers. Nepal does not have national standards for tampons, menstrual cups, washable pads, or other MH products.

MH Policies & Programming

Over the last several years, the government of Nepal has made significant strides in advancing MH through a range of policies and programs focused on reducing stigma and improving MH resource access. Chhaupadi was criminalized in 2017, marking a critical advancement toward ending harmful traditional practices. Despite this progress, deaths have continued to be linked to Chhaupadi since its criminalization. It will be critical that Chhaupadi-related interventions go beyond legislative policy and actively engage communities in dismantling deep-rooted menstrual taboos.

In 2019, the National Water, Sanitation, and Hygiene (WASH) in Schools Procedure incorporated MH-friendly WASH services and education. That same year, MH management was included in School Health Programs Manuals in an attempt to improve MH practices and resources in schools. In 2020, Nepal rolled out a national program to distribute free menstrual pads to public school students, reaching approximately 1.5 million girls ([MHMPA](#)). However, some critics note the absence of a mandatory national product quality standard for menstrual pads or procurement guidance for alternative menstrual products may limit options for high-quality or environmentally sustainable product choices for girls.

The program also lacks a sufficient monitoring system to ensure not only that participating local governments are provisioning menstrual pads, but also that schools are equipped with suitable WASH facilities, disposal facilities, and other essentials for the experience of dignified menstruation among students.

As of 2022, imported menstrual pads receive a 90% tax exemption to increase affordability. In 2025, Nepal's Supreme Court ruled to remove all taxes on menstrual products, including the value-added tax.

From 2016 to 2023, the School Sector Development Plan sought to improve girls' school attendance by fulfilling MH needs ([WaterAid](#)). Published in 2024, the government's latest Five-Year Plan includes two MH-related indicators: availability of MH materials in schools and women/girls' MH-related absenteeism from work and school. In 2025, Nepal's National Assembly unanimously approved a resolution focused on eliminating menstrual discrimination. The motion underscored a growing national commitment to promoting menstrual dignity ([MHMPA](#)). As of 2025, the government of Nepal is developing a Dignified Menstruation Policy, building on public momentum following the National Assembly's unanimous resolution to end menstrual discrimination. This new policy will aim to comprehensively address menstrual taboos and improve national MH through education, facilities, and holistic social change.

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