



Menstruation and Gender-Based Violence

Richard Whitecross

Learning Objectives

Having read this chapter, you should be able to understand the following:

- How cultural, religious and social traditions and practices in relation to menstruation are multifaceted and impact on the wellbeing and safety of women and girls
- The vulnerability of women and girls, mainly living in the Global South, associated with menstruation
- Why it is important to be aware of and support locally lead challenges to cultural, religious and social norms that place restrictions on women during menstruation
- How the practice of social isolation and seclusion, as illustrated by the example of *chhaupadi* in Nepal, makes women and girls vulnerable to gender-based violence

Introduction

This chapter introduces the cultural, religious and social practices around menarche and menstruation that impact on women and girls (see Box 1 for definitions). The anthropologist Chris Knight notes that menstruation attracts ‘extraordinary attention ... in virtually all cultures’ (Knight 1996: 363). Gottlieb (2020: 144) notes that ‘despite shared biological roots, individuals and communities perceive and

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experience in enormously different ways'. Across a range of cultures, menarche represents a symbolic transition from childhood to womanhood linked with sexual maturation (Lee 2009). Acknowledging the universality of menstruation in 2019, human rights experts noted that 'the stigma and shame generated by stereotypes around menstruation have severe impacts on all aspects of women's and girls' human rights' (United Nations 2019).

Social science research reminds us that how women and girls experience menstruation depends on the complex interrelationship between social, cultural, religious and political contexts which shape and inform their experiences. It is important to understand that a practice may reflect social mores, as well as religious or other cultural influences. As a result of the stigma and shame highlighted by the United Nations, women and girls experience inequality in access to health care, housing, water, sanitation, education, freedom of religion or belief, safe and healthy working conditions. Nor are they able to participate in cultural and public life without discrimination. These can be difficult to untangle. However, it is this intertwined nature of customs and practices associated with menstruation that make challenging culturally informed practices difficult. For many women, the cultural, religious and social traditions and practices associated with menarche and menstruation can be highly restrictive and damaging as illustrated in the main case study presented in this chapter.

Buckley and Gottlieb (1988) and Paige and Paige (1981) provide anthropological studies of menstruation that demonstrate the importance of menarche as a sign of physical maturity and fertility. In some cultures, for example, menarche is celebrated with girls receiving gifts (Uskul 2004). Other cross-disciplinary studies highlight cultural and social perspectives that hold menstruation as physically, psychologically and spiritually problematic (Delany et al. 1977). Anthropologists and other social scientists have recorded a range of practices that prohibit menstruating women and girls from engaging in various activities and often being required to seclude themselves.

Whilst sexual relations are possible during menstruation, many cultures treat sexual relations during menstruation as either inappropriate or risk laden. Stubbs (2008: 58) notes that even in the United States until the 1980s, 'this negative characterisation ... was supported by psychodynamic theorists who believed that menarche was a traumatic intrapsychic event, provoking anxiety ... as well as diminished self-esteem'. In her study of the cultural perceptions and practices of adolescent girls in the United States, Stubbs reflects on the ongoing negative characterisation of the menstrual cycle. She notes the tension between menstruation as a normal physiological process and greater availability of menstrual products with mixed messages in menstrual education that it should be hidden (2008). Significantly, she demonstrates the impact of these mixed messages on adolescent girls' negative perception of menstruation and how this contributes to self-objectification, body shame and their lack of agency in their own sexual decision-making. The enduring cultural tension over menstruation in the Global North is succinctly captured by Stubbs who notes '[a]dvertisements for contraceptives that promote the notion that menstruation is unimportant, unnatural, unhealthy, and a generally negative experience, do the

same thing. In a culture that objectifies women, who wouldn't want to avoid such an experience?' (Stubbs 2008: 64).

Therefore, although there are physiological similarities in the experience of menarche and menstruation, it is important to understand that how both are understood and perceived is linked to a range of culturally and religiously informed social practices that impact on women and girls. In fact, there is a 'striking diversity of menstrual experiences, especially in the Global South' (Gottlieb 2020: 144). Indeed, a number of studies illustrate how varying perceptions of menstrual practices may allow women to demonstrate their own agency by deciding whether or not to engage with those practices (Mirvis 2020). This chapter focuses on outlining how restrictive menstrual practices endanger women and girls. The chapter illustrates these practices by drawing on recent social science and health research conducted in South Asia. The role of religion, as well as social and cultural norms such as caste, shapes and informs the experience of menarche and menstruation. In particular, it focuses on a widespread practice, called *chhaupadi*, in Nepal where women and girls are required to seclude and isolate themselves during menstruation.

Definitions and Types

There are three main terms in relation to menstruation that are set out in Box 1. As the definition of menstruation suggests, the focus of this chapter is on the physiological process as experienced by women and girls in a variety of social and cultural settings. The chapter does not discuss menopause, which like menstruation is experienced differently across cultures and societies with its meaning and management highly contested. This chapter does not adopt a biomedical approach to understanding menstruation and gender-based violence. Rather it draws, as illustrated in the introduction, on the complex interrelationship and meaning making of social, cultural and religious factors that define the experience of this universal physiological process.

Historical Context

Box 1 Definition

Menses refers to the time of menstruation (period) and the menstrual discharge.

Menarche refers to the first experience of menstruation and to the age at which this occurs.

Menstruation refers to the physiological process of discharging blood and other material from the lining of the uterus through the vagina, which occurs in sexually mature women (except during pregnancy and for a time after pregnancy) at intervals of about one lunar month until menopause.

Menopause is the final cessation of the menstrual cycle (Shorter Oxford Dictionary 2007).

In South Asia attitudes towards and beliefs about menstruation impact on women and girls through a range of social restrictions and religious/cultural practices. Due to widely held beliefs that view menstruation as impure, women and girls during menses are prohibited from touching certain people, usually men, as well as live-stock, crops and drinking water sources. As a result of such beliefs and practices associated with menstruation, women and girls during menstruation have limited access to food, water and other necessities. Significantly, research highlights that because of such beliefs women and girls are unable to practice good menstrual hygiene (House and Mahon 2013). To illustrate the cultural, religious and social practices and stigma around menstruation, one such practice, *chhaupadi* (isolation) in Nepal, is the main focus of this chapter. Although the geographical focus is on Nepal, it is important to understand that similar practices and their negative impact on the lives of women and girls during their menses are not restricted to either Nepal, India or the region of South Asia.

Various authors have explored the taboos and restrictions around menstruation in Hinduism (e.g. Narayanan 2005). It is claimed that Hindus believe that when women menstruate, the menstrual blood is impure; therefore, during menstruation their body is impure. Narayanan (2005) argues that the menstruation taboo is one of the reasons that women are not permitted to be priests. A study conducted in Cuddalore district in Tamil Nadu, in southern India, highlights the belief that menstruation is religiously impure and ceremonially unclean and was responsible for compliance by women especially by women from higher socioeconomic backgrounds where purity is emphasised (Selvi and Ramachandra 2012). Menstruation is not perceived as a natural physiological process, and in those communities in Nepal in which *chhaupadi* is practised, it is believed that the touch of a menstruating woman or girl is impure, requiring husbands and family members to bathe if touched. In their detailed qualitative study in Nepal, Rothchild and Piya (2020) observed that menstruation was framed by their informants as a concern about men or boys, rather than about the physical process they were experiencing.

The dyad of purity and pollution is one that is recognised across cultures and is not restricted to Hinduism or to South Asia. Guterman et al. (2007) note that all major religions contain, to varying degrees, restrictions on menstruating women, including the requirement to isolate themselves and not engage in various activities. Jun and Jang (2018: 50) argue that religious beliefs are not 'solely responsible for the menstruation taboo'. Rather, they see the menstruation taboos and the practice of *chhaupadi* in Nepal as reflecting the wider and complex interrelationship between religious beliefs and social norms and values.

Nepal: The Context

Located in the Himalayas, Nepal is a multi-ethnic, multilingual and multicultural country. Approximately 90% of Nepalese are Hindu (Asian Development Bank 1999). In 2020, the United Nations Development Program ranked Nepal 142nd out of 189 countries in terms of its human development index and 110th out of 160

countries in its gender inequality index. The Asian Development Bank (1999) noted women in Nepal are excluded from education and have limited labour market opportunities and decision-making over their property. A republic since 2006 when the monarchy was abolished, Nepal is a predominantly, though not exclusively, Hindu country. This is important for two reasons. The first is that a caste system remains in place in Nepal. Second, as will be discussed below, the practice of *chhaupadi* is rooted in the Hindu belief that menstruating women and girls are impure (Bhandari 2013). As a result of social, cultural and religious beliefs and practices, Nepalese women have limited or no social capital. This lack of power is further exacerbated by the caste system.

Menstruation and Impurity: The Basis of the Practice

The Nepalese Ministry of Health reported in 2012 that about a quarter of women did not know about menstruation before the onset of menarche. Similarly, Rothchild and Piya (2020) in their qualitative study on menstruation in Nepal found that Nepalese women were unprepared for menarche. Rothchild and Piya note that whilst some were able to access advice, many women reported being discouraged by their mothers from discussing what was happening to them or asking questions and advice. This lack of information and support has practical consequences in terms of hygiene. However, one of the main features of Rothchild and Piya's findings is the social requirement for women to isolate and the cultural and taboos and religious rituals associated with menstruation.

Chhaupadi: Isolation and Vulnerability

The practice of *chhaupadi* (alternatives spelling include: *chhapadi*, see Box 2) in Nepal refers to the requirement for women and girls to move to a remote makeshift hut during menses. The term *chhaupadi* is based on two words: *chhau* refers to being 'untouchable' and *padi* meaning 'women' (Dahal et al. 2017: 3). When girls experience their first menstruation, they are required to be sequestered for between 11 and 15 days, with a similar period of sequestration at the second menses, then up to 7 days for their third. Thereafter women and girls are banished to the *chhaupadi goth* or *chhau* shed for on average 4–7 consecutive days (Robinson 2015). At the end of their period, the women and girls bathe and wash their clothes before returning home.

The *chhaupadi goth* are built from stone and mud, typically long and dark with no windows or doors that can be locked. Women using the *chhaupadi goth* report being unable to control the temperature which ranges from freezing in winter to stifling in summer months. Research conducted in 2011 suggests that the number of dedicated *chhaupadi goth* are decreasing (UNRHCO 2011). This is not because the practice is diminishing but that resources are not available to maintain the huts. The areas in which the practice continues are among the poorest in Nepal. As a result,

women and girls have stayed in cattle sheds during menstruation (UNRHCO 2011: 4). The use of cattle sheds increases the vulnerability of women and girls to a range of infections as they are required to eat and sleep in the cattle sheds. In one study, a woman described that she felt reduced to being an animal during her period and seclusion (Khadka 2020).

Box 2

Alternative terms used for the practice of *chhaupadi*: *chhue* or *bahirhunu* in Dadeldhura, Baitadi and Darchula, *chaupadi* in Accham and *chaukulla* or *chaukudi* in Bajhang district.

Prevalence of Chhaupadi

The research evidence from Nepal suggests that *chhaupadi*, despite official steps to prohibit the practice, remains widespread. In particular, various studies suggest that it continues to be widely practiced in the hill districts of Far West and Mid-West regions of Nepal. In 2011, it was estimated that more than 95% of women were practicing *chhaupadi* in Achham District (UN Resident and Humanitarian Office 2011). Recent research highlights that as families migrate from the hill districts in search of work, they bring the practice with them. A series of studies between 2014 and 2017 suggested a significant increase in the number of women practicing *chhaupadi* in Tikapur in Kailali District (Khadka 2020). Jun and Jang (2018) in their study of non-compliance with the state prohibition of *chhaupadi* argue that policy or law-making to address the practice is insufficient. Their study demonstrates the importance of engaging with established norms and challenging them, for example, through local level education programmes that highlight the human harm caused by *chhaupadi*.

Research highlights that social pressure remains the primary reason for the continued practice of *chhaupadi* (Jun and Jang 2018). Although there have been high-level moves to prohibit the practice and legislation passed in 2017 criminalising those requiring women and girls to seclude themselves during menstruation, traditional social norms and religious beliefs reinforce and maintain the practice (Thapa and Aro 2021). This is particularly the case in the far western districts of Nepal where up to 60% of women still practice *chhaupadi*. It is important to understand that in many communities, support for the practice remains strong among village elders, husbands, mother-in-law, Hindu priests and traditional healers, as well as older women who believe that it is necessary to maintain purity and not anger the gods.

Jun and Jang's research suggests that both bonding and bridging social capital contribute to ignoring legal prohibitions. This appears to be because those respondents with strong bonding and bridging social capital appear to value and uphold *chhaupadi* because the practice is viewed as socially necessary, and as a caste

related social norm that builds solidarity. One Nepalese woman explained that ‘I follow it because my family members and ancestors followed it and it will bring bad luck to my family if I do not follow it and something bad will surely happen’ (Amayta et al. 2018: 7).

The Experience of Chhaupadi

As the case study of Geeta and Ishu (Box 3) suggests, Nepali women and girls who practice *chhaupadi* experience a range of physical and mental impacts. The banishment to the *chhaupadi goth* or shed means that they are forced to live in unhygienic and exposed conditions. According to the beliefs about menstruation, women and girls are viewed as impure and unclean during menstruation and are not permitted to eat ghee (clarified butter), yoghurt, curd or drink milk. Instead, they are only permitted to eat a restricted range of foods, for example, flatbreads with salt. This deprives women and girls of a balanced diet and important nutrition during menstruation. In addition to prohibitions on foodstuffs, women and girls often are required to engage in physically demanding work during the period that they are effectively banished to the *chhaupadi* shed. For example, they undertake digging, collecting firewood and farm labour.

Although there are no accurate statistics, it is reported that women and girls staying in the *chhaupadi goth* die as the result of snake bites, scorpion stings or animal attacks. In addition, the sheds offer little or no protection from the weather, with some women being reported to have died of exposure. Whilst the women and girls are sent to the *chhaupadi* huts because they are viewed as impure, during their menstruation, they are also vulnerable to sexual assault. Isolated and removed from other houses, the women are unprotected, and research suggests that sexual assaults are not reported due to stigma associated with rape (UN 2011). Research suggests that women and girls are too afraid to sleep in the *chhaupadi goth* due to concerns about sexual assault or being bitten by snakes (Action Aid 2021). A female community health volunteer observed:

the sheds are not secure and safe. They are small, with no proper ventilation, light, electricity and other necessities. There are many cases in which women have died of cold and suffocation. The things get worse in winter when the women light fires for heat inside the shed with no ventilation. Sanitation and hygiene is another problem. (Amayta et al. 2018: 10)

Women and girls practising *chhaupadi* report a range of physical and psychological problems. The unsanitary conditions of the *chhaupadi goth*, or shed, mean that they experience diarrhoea, dehydration and a range of reproductive and urinary tract infections. Research suggests that reproductive health problems, for example, itching in the genital region, painful and smelly menstruation, abnormal discharge and burning sensation when urinating, were significantly higher among women and girls practising *chhaupadi* than those not required to follow this practice (Ranabhat et al. 2015).

Legislation and Education

Sandbakken (2011) notes that the practice is directly linked to local cultural understandings and local power structures. Recognising the need to challenge these cultural practices, nongovernmental organisations (NGOs) have used drama and other public education approaches to make women and girls aware of their rights and to challenge social pressure to engage in the practice of *chhaupadi*.

Women's rights in Nepal have been slowly recognised. The protracted civil war between 1996 and 2006 impeded progress. However, in May 2005, the Supreme Court of Nepal banned the practice of *chhaupadi*. The Supreme Court issued the Government of Nepal with a directive to introduce laws to eliminate the practice throughout Nepal. The Interim Constitution of Nepal 2007, issued after the overthrow the royal government in 2006, set out the end of discrimination based on gender, and it sought to promote rights of equality and social justice, including caste discrimination. In theory, the Interim Constitution provided the legal basis for further state backed efforts to bring the practice of *chhaupadi* to an end. The Interim Constitution stated the following:

- There shall be no discrimination because of gender.
- Every woman shall have the right to reproductive health and reproduction.
- No physical, mental or other kind of act of violence shall be committed against any woman; and there shall be equal rights to parental property for sons and daughters.

However, *chhaupadi* continued to be practised, especially in far western districts of Nepal. Newspaper articles continued to report stories of women and girls sexually assaulted, bitten by snakes or dying from cold (Bhandaree et al. 2013). Importantly, the practice was identified as responsible for the high rate of uterine prolapse in women, a high rate of neonatal mortality (32 deaths per 1000) and a range of menstruation disorders (Bhandaree et al. 2013). In 2017, following the newspaper reports of three deaths of women and girls practising *chhaupadi* the Nepali Parliament introduced and enacted a new law to criminalise *chhaupadi* (Kathmandu Post 2017). The new law, which came into effect in August 2018, imposes a fine (3000 rupees) and/or a 3-month prison sentence for anybody forcing women or girls to follow the practices of *chhaupadi* (Preiss 2017). However, a local study in 2017 highlighted that up to 60% of people in Karnali, one of the Western districts, were unaware that the practice is illegal (Dahal et al. 2017).

Aligned to the legislation, the Nepal authorities, along with other member states of the South Asian Association of Regional Cooperation (Afghanistan, Bangladesh, Bhutan, India, Pakistan, the Maldives, Sri Lanka), responded to concerns over menstruation hygiene by committing to the Dhaka Declaration in 2016 (Sixth South Asian Conference on Sanitation, 2016). The Dhaka Declaration recognises the need to work to change social norms and behaviours that negatively impact on women and girls during menstruation.

In a recent study, Jun and Jang (2018), conducted in south-eastern Nepal highlighted the social aspects underlying the continued practice of *chhaupadi* despite

the legislative measures by the Supreme Court and the Nepali Government. Their research suggests that the practice continues to be carried out based on social capital built and reinforced by tradition and social norms. The findings of their research suggest that ‘government interventions should be geared toward reconceptualizing the prevailing norms around *chhaupadi*’ (Jun and Jang 2018: 66).

One area that appears to be changing are attitudes around menstruation and attending school. It was believed that the goddess, Sarasvati, would become angry if a menstruating girl reads, writes or touches a book (UN 2011). In a recent study conducted in 2017, it was found that the number of girls attending school during their monthly cycle had significantly increased, possibly reflecting state and non-governmental emphasis on education (Amayta et al. 2018: 12).

Box 3 Case Study: Geeta and Ishu, Western Nepal

Geeta lives with her parents, aunt and nephew in a remote village in western Nepal. Although the practice of *chhaupadi* has been prohibited, it continues to be practised in her village. When she experienced her first period aged 11, Geeta was sent to a small mud hut, removed from her family home and village for 21 days. Unable to go to school, Geeta spent her days cleaning, sweeping and cutting grass. Since her menarche, she continues to spend 4 days each month on her own in the *chhaupadi* goth or menstruation hut or animal shed. She is not allowed to sleep in her own bed, to eat certain foods or touch her parents. Geeta does not like being sent to the hut. She is afraid of snakes and of being assaulted.

Her mother, Dhauli, believes in the practice of *chhaupadi*. She, like many of those living in remote rural communities, believes that if menstruating women and girls do not follow *chhaupadi*, the ‘gods’ will become angry and there will be serious consequences, for example, a poor harvest or livestock will become ill and die.

Ishu is 14 years old and is sent away from her home when her period starts. The hut where she stays has no windows and is very warm in summer but freezing in winter. To wash, she must walk 2 hours to wash in the nearest river. Lacking access to sanitary towels, Ishu uses rags which can cause serious infections. Her mother, Durga, is anxious for her safety when she is sent to the hut, particularly her vulnerability to sexual assault.

Source: Action Aid 2021 *Chhaupadi and menstruation taboos*.

Menarche and menstruation are universal features of women and girl’s lives. As illustrated above, subtle and not so subtle forms of gender violence are experienced by women and girls following the onset of menarche. Tackling these forms of gender violence, particularly when embedded in social, cultural and religious practices, is challenging. However, the example of female-led initiatives to educate local communities, including other women, shows that such forms of gender violence can be challenged and open up the opportunity for girls and young women to access education and enable them to support their families.

Summary

- Although women, and girls, experience menarche and menstruation in similar physiological ways, how menarche and menstruation are perceived and understood varies across societies and cultures, reflecting a range of cultural and social factors.
- Whilst menstruation is viewed as morally neutral or ambivalent in some societies, menarche and menstruation are often represented as impure.
- As a result of the perceived impurity and pollution brought about by menarche and menstruation women are restricted in what they can do, eat and required to seclude or isolate themselves.
- In the widespread practice of *chhaupadi*, isolation makes Nepalese women and girls vulnerable to illness and to sexual assault.
- Activities to challenge local beliefs and to educate local communities about menstruation are more successful and meaningful than hard to enforce legal prohibitions.

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