

Is criminalization the answer? Perspectives of community members and police on menstrual seclusion policy in Far-West Nepal

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ABSTRACT

Chhaupadi is a form of menstrual seclusion practiced in Nepal in which women and girls are isolated during their menstrual cycles and follow numerous restrictions. The tradition dates back centuries and can have serious physical and mental health consequences. While the practice was criminalized in 2017 with fines and jail time, this legislative action comes after more than a decade of legal history, from an initial ban in 2006, to declaring it a form of violence against women in 2009, and finally, its criminalization in 2017. Exploring levels of awareness regarding the 2017 chhaupadi criminalization, perceptions of the legal penalties, and whether or not criminalization will lead to behavior change are imperative next steps for informing the development of evidence-based interventions targeting chhaupadi. In this qualitative investigation conducted in Kalikot district, six focus group discussions and 33 in-depth interviews were conducted with a total of 81 participants. School-going girls, girls who have dropped out of school before completing twelfth grade, mothers, fathers, teachers, health care providers, religious leaders, traditional healers, grandmothers and police participated in the study. The results indicate that criminalization is generally perceived as a positive step for initiating chhaupadi behavior change, and one-third of participants expressed that they plan to change their behaviors after learning that chhaupadi is punishable with fines and/or jail time. However, accurate information about the criminal code is extremely low and therefore interventions ensuring communities and law enforcement are informed of the criminalization and associated penalties are urgently needed. In addition, even after its criminalization, chhaupadi behavior change is anticipated to be gradual and is expected to require long-term interventions targeting social pressure associated with upholding the tradition and raising awareness via appropriate trainings, engaging the media, and beyond.

KEYWORDS

Nepal, menstruation, criminalization, chhaupadi, menstrual health, reproductive health, women's health, behavior change

KEY MESSAGES

- A range of community members and law enforcement expressed that the criminalization of chhaupadi (menstrual seclusion) is generally a positive step for initiating chhaupadi behavior

change, and one third of participants expressed that they plan to change their behaviors after being made aware that chhaupadi is punishable with fines and/or jail time.

- Accurate information about the criminalization of chhaupadi is extremely low, and initiatives are urgently needed to ensure communities and law enforcement are informed of the criminalization and associated penalties.
- Even after criminalization, behavior change is anticipated to be gradual and require long-term behavior change interventions targeting social pressure associated with upholding the tradition, raising awareness, organizing trainings, engaging the media and beyond.

INTRODUCTION

Menstruation is a natural, physiological process that is shared by nearly all women and girls of reproductive age. However, societies around the world give different meanings to menstruation, which are manifested in a variety of distinctive cultural practices. In Nepal, chhaupadi, or menstrual seclusion, is a culturally and religiously rooted tradition that dates back centuries in which Hindu women and girls are excluded from community life during menstruation and immediately following childbirth (Kadariya and Aro, 2015; NFCC, 2015; Ranabhat et al., 2015; Gautam, 2017; Karki et al., 2017; Amatya et al., 2018; Baumann et al., 2021). The rationale behind the practice is that menstruating women and girls are considered impure and therefore should stay separate from people and certain objects (Khadka, 2014; Joshi, 2015; Amatya et al., 2018; Baumann et al., 2019; Parker and Standing, 2019), a belief originating from Hindu religious mythology (Cameron, 1998).

Strict interpretation of chhaupadi includes requiring women to sleep in makeshift huts, animal sheds, or separate rooms during menstruation. Sleeping in a small shed outside of the home is one of the most visible aspects of chhaupadi and draws considerable attention to the practice, which has been highlighted in national and international media outlets (Hodal, 2016; NPR, 2016; BBC News, 2017; The Kathmandu Post, 2017a, 2017b; Preiss, 2017). The sheds, or chhau goths, are often unhygienic, unsafe, and lack basic necessities such as water and sanitation facilities (NFCC, 2015; Amatya et al., 2018). The chhau goth is typically one room with a small entryway and no windows or locking doors (NFCC, 2015), which puts women sleeping in the shed at risk for suffocation from the lack of ventilation and vulnerable to intruders. In remote mountain regions where chhaupadi is widespread, temperatures often fall below freezing and women are forced to sleep in unclean and risky conditions with little or no bedding or security (Robinson, 2015).

In following the chhaupadi tradition, women are also compelled to follow a range of additional restrictions, such as avoiding water sources, gatherings, cooking, religious activities, among several others (Kadariya and Aro, 2015; Lama and Kamaraj, 2015; NFCC, 2015; Robinson, 2015; Amatya et al., 2018; Baumann et al., 2019, 2021; Thomson et al., 2019). A 2019 study of 679 women and girls across nine districts in Nepal found that nearly 90% follow at least one restriction during their menstrual cycles (Baumann et al., 2019). While forms of menstrual seclusion exist throughout the country, including the capital (Mukherjee et al., 2020), chhaupadi is predominantly widespread in mid- and far-west Nepal (Amatya et al., 2018; Central Bureau of Statistics and UNICEF, 2015). In fact, up to 71% of women and girls in the mid-western mountain districts follow segregation practices during menstruation (UNICEF and Central Bureau of Statistics Nepal, 2016). Studies indicate that mothers-in-law and older members of the household play a vital role as cultural gatekeepers of the practice (Lama and Kamaraj, 2015), along with elderly village members, faith healers and religious leaders (NFCC, 2015).

Practicing chhaupadi has serious health implications. Following the practice can put women and girls at risk for poisonous snake bites, hypothermia, dehydration, pneumonia, asphyxiation, rape and, in some cases, death (Kadariya and Aro, 2015; Ranabhat et al., 2015; Amatya et al., 2018). As such, the 2010 National Plan of Action against Gender Based Violence in Nepal recognized chhaupadi as a harmful practice and a form of violence against women (Government of Nepal, 2009; UNFPA, UNICEF, and UNRCO, 2019). Harmful practices are generally accepted cultural practices that are grounded in discrimination and often lead to physical and/or psychological harm or suffering; other examples of harmful practices include female genital mutilation (FGM), child marriage, dowry and polygamy (Committee on the Elimination of Discrimination against Women and Committee on the Rights of the Child, 2014; UNOHCHR, 2020).

Chhaupadi has been banned in Nepal since 2006, though efforts to enforce it have been limited (Kadariya and Aro, 2015; Amatya et al., 2018; Budha, 2018; Jun and Jang, 2018; Gurung, 2019). Building upon the initial ban, in 2008 the Ministry of Women, Children and Social Welfare shared strategies for eliminating the practice via the Chhaupadi Pratha Elimination Directive (Kadariya and Aro, 2015; NFCC, 2015), which called for the elimination of practices that perpetuate inequality. Next, the National Plan of Action against Gender Based Violence in Nepal recognized chhaupadi as a harmful practice and a form of violence against women in 2010 (Government of Nepal, 2009). Ultimately, in August 2017, with implementation starting in August 2018, the Nepal Parliament passed Criminal Code 2074, which criminalized chhaupadi with a fine of 3,000 rupees (25 USD) and/or a 3-month jail sentence for anyone forcing a woman to follow the practice (Al Jazeera, 2017; Nepal Law Commission, 2017; Preiss, 2017; Republica, 2017; The Kathmandu Post, 2017c; Amatya et al., 2018; Bhattarai, 2018; Save the Children, 2018; Bhadra, 2019; Cousins, 2019; Gurung, 2019). After more than a decade of discussions regarding chhaupadi legislation, the practice has moved from being banned in 2006 to criminalized in 2017, which is widely viewed as a positive step towards ensuring the safety and well-being of Nepali women and girls (Cardoso et al., 2019).

Criminal Code 2074 criminalizes the practice and lays out broad enforcement strategies for police (e.g. fines and jail time), though a clear understanding of which aspects of the practice will be criminalized remains unknown. In addition, levels of awareness among police and law enforcement officers at the district and village levels regarding the criminal code and associated strategies remains unclear, as well as, whether they have the adequate training and resources to enforce the code, and whether a criminalization approach will be effective in curbing the practice. A growing number of organizations are working in collaboration with the Government of Nepal to address menstrual health, primarily through educational and awareness-raising programs focused on providing a basic orientation to menstruation (Karki et al., 2017); but less has been done regarding implementation of and raising awareness about the criminal code banning chhaupadi.

Some activists suggest that criminalization may not be enough to persuade people to give up the practice (John, 2017), as the fear of ostracization is predicted to be stronger than the fear of breaking the law (Jun and Jang, 2018). In the past, the Government of Nepal has taken similar legislative action to criminalize other harmful practices including caste-based discrimination, accusations of witchcraft and persecution and child marriage (UNFPA, UNICEF, and UNRCO, 2019); however, these practices are still prevalent, demonstrating that legislative action has not been enough to end harmful practices. Chhaupadi criminalization is expected to face similar challenges. Considering the historic legislation criminalizing chhaupadi in 2017, research is urgently needed to understand the levels of knowledge and intentions to

change behaviors associated with the new criminal code among various stakeholders at community and district levels. This information is imperative for informing evidence-based intervention development to ultimately improve health outcomes for women and girls.

This timely qualitative study provides insights on how the criminalization of chhaupadi is perceived by a range of community stakeholders in Nepal, including police. It pursues the following goals:

1. Examine the extent and spread of awareness regarding chhaupadi criminalization and sources of knowledge;
2. Investigate varying perceptions regarding the criminalization of chhaupadi;
3. Explore expected behavior change due to the criminalization of chhaupadi; and
4. Describe recommendations and considerations for designing future policies and interventions that address chhaupadi in the context of the 2017 criminal code.

METHODS

Six focus group discussions (FGDs) consisting of eight persons each and 33 in-depth interviews (IDIs) were conducted. A total of 81 participants were included in the study from a variety of stakeholder groups in Kalikot district, Province 6, mid-western Nepal in January 2019.

Study setting

Nepal is a landlocked, geographically small yet diverse Himalayan nation of 29 million people (World Bank, 2017). Situated in South Asia, Nepal ranks 144 out of 188 countries according to the Human Development Index, which assesses three basic dimensions of human development: a long and healthy life, being knowledgeable and a decent standard of living (UNDP, 2016). It is topographically split into three distinct regions, which range from low-lying plains in the south, to hills in the central belt to some of the world tallest mountains in the north.

The Mid-Western Mountain region has the highest documented prevalence of chhaupadi; a 2014 UNICEF survey of women aged 15–49 years who have ever menstruated found that 71.2% of the participants from this region reported staying in a separate specific house, 55.6% reported staying in an animal shed and 52.4% reported eating different foods during menstruation (Central Bureau of Statistics and UNICEF, 2015). Within the Mid-Western- Mountain region, Kalikot district was selected for the study based on accessibility. The lead investigator worked closely with Nepal Fertility Care Center (NFCC), a local non-governmental organization with expertise in menstrual health, to purposively select one municipality, Khandachakra, that would allow for a range of chhaupadi practices (e.g. consists of both semi-urban and rural communities). Within the municipality, three wards were selected (Wards 2, 6 and 9), with the goal of collecting data from a range of stakeholders with diverse experiences in geographical areas with varying degrees of remoteness.

Study population

The key stakeholder groups selected for this study were informed by the Chhaupadi Pratha Elimination Directive, which outlines main gatekeepers of the chhaupadi tradition as adolescents and

women affected by chhaupadi, traditional healers (dhamis), elders, mothers and fathers (NFCC, 2015). Teachers, healthcare providers and religious leaders (pujaris) were also included to better understand their roles in addressing chhaupadi. Finally, considering the policy focus of this study, police at the district headquarters and rural wards were also interviewed to study enforcement behaviors and perceptions from law enforcement. Within these stakeholder groups, a diverse sample of participants was recruited based on caste/ethnicity, religion, rurality, age, marital status, education and occupation.

Entree and recruitment

Access to the study sites was gained by utilizing NFCC's relationships with formal and informal gatekeepers in the community, such as the District Women and Children Office and local nongovernmental organization partners. For gaining entree with police, the team introduced the study to the district-level Chief of Police, who supported the team with additional contacts. In addition, one member of the study team is from the region and has over 15 years of work experience in the district.

For recruitment of community members, the authors contacted a range of district-based government authorities, media personnel, faith leaders, school principals and teachers to announce the study. A list of interested participants was compiled and participants were purposively selected based on the aforementioned demographic criteria, with the aim of establishing as diverse a sample as possible.

Data collection materials and processes

All data collection materials were initially developed in English then translated into Nepali with support from NFCC, who supported with translating and back translating all study documents. The questions in the data collection materials were purposively written using a structure that moved from open-ended questions regarding chhaupadi practices for building rapport, to assessing levels of knowledge about the criminalization of chhaupadi, to an informational section in which all participants were provided the same full and accurate information of the criminal code, and finally, a series of questions as a response to the information received (Table 1). Specifically, to all participants were told, 'Last August, the Nepali government expressed that they will punish those who force a girl or woman to practice chhaupadi with jail time or fine of 3,000 rupees (~25 USD), or both' and then asked their opinions regarding this information.

The FGDs and IDIs were conducted by a native Nepali speaker (research assistant), with support from a native Nepali-speaking team member familiar with the local context (field coordinator) and one note taker with conversational Nepali language skills (PI). All discussions were audio-recorded. Before conducting the FGDs and IDIs, each participant completed a brief electronic demographic questionnaire via tablet to gather information regarding age, gender, marital status, level of education, employment, the practice of chhaupadi, caste/ethnicity and religion. If participants were illiterate, the research assistant and field study coordinator assisted the participants by reading the questions aloud and entering the responses.

Most FGDs and IDIs were held in public schools and community centers to ensure easy accessibility for stakeholders to participate, safeguard privacy and encourage comfortable conversation. When requested, interviews were held at alternative sites (e.g. police interviews were held at police stations, some health care provider interviews were conducted at the ward health post). FGDs included eight participants, lasted approximately one hour and were conducted in Nepali. IDIs lasted between 30 and 60 min and were also conducted in Nepali. Data collection was carried out until adequate saturation was reached, or no new themes were surfacing in FGDs and IDIs.

The study team maintained field notes throughout data collection and expanded them into rich descriptions at the end of each day. The notes were used to inform coding procedures and support with reflexivity during analysis. The study team discussed their notes daily, including observations, challenges and key findings. Finally, all audio recordings were transcribed verbatim and translated from Nepali to English. Each transcript was crosschecked by the research assistant for accuracy.

ANALYSIS

Qualitative data analysis was completed using a technique called template analysis (King, 2012) by a team that included the principal investigator and three trained coders in QSR NVivo Version 12 ('QSR International Pty Ltd', 2020). Template analysis uses a combination of content analysis and grounded theory, allowing for both inductive (i.e. allowing themes to emerge from data) and deductive analysis (i.e. analyzing the data using a priori themes) (King, 2012). The authors used this combined approach to allow for the application of predetermined themes from the study's theoretical framework based on the Theory of Planned Behavior (Ajzen, 1991), as well as allow for new themes to emerge from the data given the exploratory nature of the study.

Team members each independently reviewed two transcripts and established initial codes, examples and definitions of that corresponded with key themes in the data (see Operational Definitions for final code descriptions). Next, the coders were both assigned a third transcript to independently code using the initial codebook, which was used to calculate interrater reliability (IRR) and test the consistent application of codes. The first round IRR scores were between 0.57 and 0.62. After addressing inconsistencies, coders underwent a second round of calibration with a fourth transcript aiming to improve the reliability of code application. The second round IRR scores increased significantly to between 0.65 and 0.71 (fair/good agreement). This helped to confirm that interpretations between coders were consistent. After coder calibration, the coders were each assigned a set of the remaining transcripts to review.

To support with consistency of code application, address inconsistencies and apply principles of reflexivity, the coders maintained a list of memos and clarifying questions throughout the data analysis process. By maintaining memos, the coders were encouraged to consistently reflect upon their positions as non-Nepali researchers and reflect upon their own perspectives throughout the data analysis process (Engward and Davis, 2015). To support with reflexivity and reduce bias, the memos and clarifying questions were reviewed at monthly team meetings. Finally, NFCC reviewed the findings and provided feedback to ensure that the data were appropriately interpreted given the cultural and social context. The demographic questionnaires were analyzed using descriptive statistics in STATA/SE 15.0 for Mac.

TABLE 1 IDI/FGD QUESTIONS AND PROBES

1.	Let's begin by talking a little bit about chhaupadi. In general, what do you know about chhaupadi? Probe(s): What does it look like? How do you define chhaupadi? Who practices chhaupadi? What are the different aspects of chhaupadi?
2.	What do you know about the legal status of chhaupadi? What do you know about it being legal or illegal? Probe(s): What do you know about jail time and fines associated with chhaupadi?

<i>Facilitator provides information about the criminal code: 'Last August, the Nepali government expressed that they will punish those who force a girl or woman to practice chhaupadi with jail time or fine of 3,000 rupees, or both'.</i>	
3.	What do you think of this criminal code? Probe(s): How do you see enforcement of this criminal code happening in your community? Do you think this is something that you should be involved in, why or why not? How does this new code affect you or others like you?
4.	How likely are women and girls to stop practicing chhaupadi now that it is punishable with fines and jail time? Why?
5.	What are your recommendations for women practicing chhaupadi in your district? Probe(s): Do you think the new law should be implemented? Why or why not? If yes, how do you think this new law should be implemented? What do government officials in Kathmandu need to know or consider? What kinds of challenges do you foresee? Do you have any other recommendations regarding chhaupadi that you would like to share?

OPERATIONAL DEFINITIONS

Knowledge and awareness of chhaupadi criminalization

Knowledge and awareness were assessed via an opened ended question asking what participants knew about the legal status of chhaupadi. Responses were categorized according to the levels defined in Table 2.

Expected behavior change due to chhaupadi criminalization

Participants were provided accurate information about the chhaupadi criminal code, then asked whether they intended to change their behaviors due to the code or expected the behaviors of others to change. Behavior change refers to changing personal chhaupadi practices (i.e. sleeping in the house instead of the shed), telling others about the code to encourage behavior change (e.g. fathers informing women in their households), or adjusting the rules of the households to allow women and girls to stop practicing chhaupadi (e.g. grandmothers encouraging fathers to not allow for the practice of chhaupadi in the household). For police specifically, they were asked if they expected law enforcement behavior to change now that they have accurate information about the new code. Responses were categorized according to the groups defined in Table 2.

TABLE 2 OPERATIONAL DEFINITIONS OF KNOWLEDGE AND AWARENESS OF CHHAUPADI CRIMINALIZATION AND EXPECTED BEHAVIOR CHANGE DUE TO CRIMINAL CODE

Knowledge and awareness of chhaupadi criminalization	Definition
High accurate knowledge	Participant expressed knowledge of the chhaupadi criminal code and could accurately describe the two key aspects of the chhaupadi criminal code (i.e. 3,000 NPR fine and jail time)

Aware but not fully informed	Participant expressed they had heard of the chhaupadi criminal code but were unable to accurately describe both aspects of the code in full
Incorrect knowledge	Participant reported incorrect information regarding the chhaupadi criminal code
No knowledge	Participant was unaware of or had not heard about the chhaupadi criminal code
Expected behavior change due to chhaupadi criminal code	Definition
Behavior expected to change	Participant responded positively, or ‘likely’, to the question: ‘How likely are women and girls to stop practicing chhaupadi now that it is punishable with fines and jail time?’
Behavior not expected to change	Participant responded negatively, or ‘not likely’, to the question: ‘How likely are women and girls to stop practicing chhaupadi now that it is punishable with fines and jail time?’

RESULTS

Participant characteristics

The 81 participants were from the following stakeholder groups: school-going girls (n 24), girls who have dropped out of school before completing twelfth grade (n 4), mothers (n 24), fathers (n 4), teachers (n 4), health care providers (n 4), religious leaders (pujaris) (n 4), traditional healers (dhamis) (n 3), grandmothers (n 4) and police (n 6). The mean age of the sample was 36.2 years, a majority of the sample identified as female (76%), 33% were illiterate and in terms of education, 35% completed class 6-10. The primary occupations of the participants were agriculture (33%) or student (30%). Most of the participants were from the Chhetri (66%) caste, with the remaining from Brahman (15%) and Dalit (15%) castes. The religious background of the sample was almost exclusively Hindu (98%).

Knowledge and awareness of chhaupadi criminalization

The majority of participants reported having no knowledge regarding the criminalization of chhaupadi. Only a quarter of respondents had some awareness of the criminal code but were unable to name specifics, and high accurate knowledge of the code was extremely low. Of those with some awareness of the criminal code, 11% expressed that they learned about it via the radio, which was the most common source of knowledge discussed. Notably, professionals in the community, including some police and health workers, were not fully informed about the criminal code.

High accurate knowledge

Only two out of 81 respondents (2%) had high accurate knowledge the criminalization of chhaupadi. These respondents were a male police officer and a female teacher. ‘We have received information in regard to the 3,000 rupee [~25 USD] fine and three months of jail time as the chhaupadi practice got criminalized’ (Police, Ward 2). ‘Yes there is a penalty. If any sort of discrimination is done regarding chhaupadi or inhuman behavior, the penalty is prison for three months and [a fine of] 3,000 rupees [~25 USD] as a punishment’ (Teacher, Ward 2).

Aware but not fully informed

A quarter of respondents were aware of the criminal code, but unable to describe or correctly name its stipulations. Many expressed they had heard chhaupadi was punishable with imprisonment and fines. ‘The government has launched a new policy that was not there before’ (Traditional Healer, Ward 2). ‘I heard about it once during a radio program on Radio Naya Karnali 102.8 MHz. They said that there are new laws related to chhaupadi and they also mentioned something about jail time’ (Health Worker, Ward 6). ‘We have heard that those found involved in chui [chhaupadi] practice will be jailed and made to pay a penalty’ (Father, Ward 6). One police officer expressed that he had heard about the criminal code, but was unable to explain the details: ‘I don’t have the exact idea [about jail time and fines]’ (Police, Ward 2). These respondents were generally correct in their understanding that chhaupadi has been criminalized, though their knowledge about the code details was incomplete.

Incorrect knowledge

A handful of respondents had incorrect information about the criminal code. ‘I think there is two to four years of jail time and some fine, let’s say 1,000 or 2,000 rupees [~8 or ~16 USD]’ (Traditional Healer, Ward 2). ‘They said there will be a fine of 10,000 rupees [~83 USD] for practicing chhaupadi. . . I haven’t heard anything about the jail time’ (Grandmother, Ward 2).

No knowledge

Nearly half of the sample had no knowledge of the chhaupadi criminal code, which included participants across all stakeholder groups. ‘We have not heard of this in our community’ (Grandmother, Ward 2). With the exception of one of the FGD participants, most of the mothers shared that they were unaware of any law against menstrual practices:

Facilitator: What have you heard?

Mother 1: Now we cannot follow our menstruation practice.

There is a big rule against menstruation.

Rest of participants: We haven’t heard anything as such.

Mother 2: I haven’t heard.

Mother 3: I haven’t.

Mother 4: I already said I haven’t heard (Mothers, Ward 2).

In an FGD with school going girls, one explained, ‘We didn’t know that there were any rules as such,’ and another agreed, ‘we don’t know about all this’ (School going girls, Ward 2). A religious leader noted that he had no knowledge of the code and shared the challenges associated with sharing information given the remote and harsh Himalayan landscape and way of life: ‘I don’t know a lot about these new codes. I am a person who lives in a forest in a remote and mountainous area’ (Traditional Healer, Ward 9).

Knowledge of the criminal code was concerning low among health workers and police. Two health care workers were unaware of the criminal code altogether. One explains a potential reason for this being the changes in government structure: ‘I don’t know about it, but that doesn’t mean others don’t know about it. . . the federal government structure has changed, and many new institutions have been formed and dissolved. The lack of knowledge about the new codes could also be due to the fact that we are really busy nowadays. But [some] community people might have knowledge about new codes from

the staff of the National Women Commission’ (Health Worker, Ward 2). Another health worker expressed knowledge that chhaupadi was illegal, but was unaware of the new 2017 criminal code with jail times and fines associated with the practice, stating ‘I have not yet studied about that law’ (Health Worker, Ward 2).

Alarming, two police officers had no knowledge of the criminal code, and three had awareness but could not name the specifics. ‘I am aware of the fact that this new law consists of punishment to penalize those who force others to practice chhaupadi. But I don’t have a clear understanding of jail time and fines associated with this new law. All I know is that the law considers this practice a criminal offence. That is all I am aware of’ (Police, Ward 9). Another reported that police often face challenges with receiving information due to delays in delivery of updated books regarding policy changes. ‘I haven’t been able to read the new codes that were recently released. We don’t have the books yet’ (Police, Ward 6). Only one out of the six police interviewed was able to name the specifics about the code.

Perceptions regarding chhaupadi criminalization

After the study team assessed levels of knowledge, they provided accurate information to all participants about the criminal code and gathered perceptions. When asked about their opinions regarding the new criminal code and whether it should be implemented, nearly all responded positively and shared beliefs that that such an approach was likely to be effective. However, a few participants raised concerns about awareness and objective and timely implementation of the code.

Positive perceptions of chhaupadi criminalization

Most respondents from all stakeholder types, from grandmothers, mothers and daughters, to fathers, religious leaders and police, had positive reactions when introduced to the chhaupadi criminal code. ‘Now we are safe. . . now others can’t tease us [because] now we can tell them that there are such rules’ (School going girl, Ward 2). ‘I also think it is good because we have got our rights now. We can tell our parents that it is illegal if they make us sleep in cow sheds. We have to follow the law, right? We might get bitten by snakes or suffer from different diseases if we stay in a cow shed. Now there is a new law, so I feel good’ (School going girl, Ward 6). According to a health worker, ‘this will have a positive impact on women. It may bring a realization to those practicing chhaupadi that they were doing wrong things’ (Health Worker, Ward 2). ‘I feel good. . . life will be much easier now and it will be good for the coming generation’ (Mother, Ward 6).

Positive perceptions were also witnessed among gatekeepers of the chhaupadi tradition, such as traditional healers, religious leaders and grandmothers. For example, a traditional healer said, ‘I think that this law against chhaupadi tradition is right. . . the punishment and fine is [also] right’ (Traditional Healer, Ward 2). Generally, religious leaders also had positive reactions to the criminal code, as expressed by one: ‘I think this is a good law. . . if this law is implemented then women and adolescent girls that have been the victim of this practice will get some kind of support and facilities. This practice has resulted in many unfortunate incidences and news about such incidences can be heard over the radio. [Women and girls] are apprehensive and fearful, but they are obliged to stay separate and this is the current condition’ (Religious Leader, Ward 2). According to one grandmother, ‘this would be very beneficial because females won’t be discriminated against while they are menstruating. They won’t be compelled to live in cowsheds where there is a fear of snakes’ (Grandmother, Ward 2).

Effective approach for behavior change

Participants also felt that criminalization will be effective for encouraging behavior change: ‘I think after the new law will be imposed, change will come’ (Mother, Ward 2). ‘Chhaupadi can be minimized with the help of the law’ (Teacher, Ward 2). However, one health worker explained that while the law is likely to make an impact, the code alone may not be enough to eradicate the practice: ‘It will definitely reduce the practice, but it might not end completely. This is because it has been practiced for over 100 years, so it is hard to stop it completely in a short period of time. But it will stop gradually and for that all of us have to contribute and advocate against it’ (Health Worker, Ward 2). The police also felt confident that the criminalization would make an impact on chhaupadi practices:

This law will definitely work because if a suffering woman comes to us for help, then someone can be punished. By seeing a person get punished due to forcing a woman to follow chhaupadi, then others will also realize that chhaupadi should not be practiced. They will definitely become more cautious knowing that they will get punished (Police, Ward 6).

Awareness-raising is needed

According to respondents, raising awareness regarding the criminal code is necessary, after which behavior change is likely: ‘If [the community] has knowledge regarding the law and if they are familiar with the law then it will definitely mitigate the practice’ (Religious Leader, Ward 2). ‘Yes, it’ll be good. This law will bring positive changes. . . when news about this new law spreads, people will start understanding it and the problem will start decreasing too’ (Grandmother, Ward 2). ‘People might still be unaware about the new codes. . . positive information regarding this code needs to be provided to the community. It will take time, but I think that it will be successful’ (Health Worker, Ward 2). ‘Yes! Now that the law is here it will be a huge help. If everybody is educated and communication is clear about this new rule, this tradition will die on its own’ (Teacher, Ward 9).

Implementation of the law is essential

Respondents also raised the issue of objective and timely implementation of the law for it to be effective:

It is obvious that there are going to be challenges and constraints if the government implements the law unfairly. If the government punishes some people and sets others free, there will be problems. Everyone should be treated the same and no guilty [person] should be let free. I think this will be the biggest challenge (Religious Leader, Ward 2).

Several community members also discussed the importance of implementing the law soon. ‘This law should be enforced very early, so we do not have to suffer much. If this law will be imposed now then our daughters won’t suffer’ (Mother, Ward 2). A religious leader agreed: ‘My suggestion is that the law that has been prepared should be implemented as soon as possible’ (Ward 2).

Expected behavior change due to chhaupadi criminalization

After being provided accurate information about the chhaupadi criminal code, approximately one third of participants expressed that they planned to change their own behaviors or expected the behaviors of others to change due to the criminal code. ‘I am going to tell [others]. I can tell my father and my mother. I can tell my sisters-in-law who are relatively well educated. I can also tell the neighbors from my

community’ (Out of school girl, Ward 2). ‘I think there is a probability [that chhaupadi behaviors will change] because we are the ones who implement the law. We are in the position to make people obey it. . . I think we can eliminate chhaupadi’ (Police, Ward 6). A religious leader and health worker both expressed that the criminal code is expected to change behaviors, but it will take time: ‘Since a 3,000-rupee [~25 USD] penalty has already been made, now [chhaupadi] will decrease gradually’ (Religious Leader, Ward 6). ‘Things are normally difficult in early stages no matter what we do, whether we move to a new place or meet a new person. So, I think it will be difficult at first, but we might see transformation at later stages’ (Health Worker, Ward 6).

Seven participants (9%) shared that they had no intention to change their own behaviors and/or they did not expect behaviors to change due to the criminal code. They cited social pressure and the minor fine and jail time as not being significant enough to support changing behaviors. ‘At the end of the day, people will do the same old thing’ (School going girl, Ward 9). ‘I am obviously going to practice [chhaupadi] at home. . . I am obliged to follow it otherwise they won’t let me stay in the community’ (Out of school girl, Ward 2). ‘Since their beliefs revolve around gods, a minor punishment of 3,000 rupees [~25 USD] fine and three months of jail time is not sufficient to solve this problem’ (Police, Ward 2).

Recommendations and consideration for future policies and interventions

Various recommendations were posited by community members regarding how the chhaupadi criminal code should be implemented so that relevant stakeholders might change their behaviors. The most frequently proposed recommendations included awareness raising (mentioned by 67% of respondents), implementation of programs and seminars (mentioned by 60% of respondents) and education (mentioned by 37% of respondents), which can take many different forms, including community meetings, formal education and short-term trainings:

People practice such traditions due to lack of awareness, right? There will be transformation if people are more aware. We have to go out and tell people about the positive and negative aspects of such traditions. There are already signs of mitigation compared to the past, but we have to work harder by organizing meetings among the community members and interacting with them in order to lessen this practice further (Father, Ward 2).

The first important step is to educate the women and make them aware of these sorts of rules. When they understand this, they will use their rights on their own. When they start understanding that the tradition is wrong and start following the new law, I am very sure that this will be successful (Teacher, Ward 9).

Gradually if people like you come here and give trainings maybe once a week, maybe once in three months, people will think it might be right and will listen to you (Religious Leader, Ward 9).

Others recommended giving it time (mentioned by 52% of respondents): ‘It will take time to end completely because it takes some time for everyone to learn about it. However, only learning about it won’t help. They need to understand it and make an educated judgment to end it’ (Health Worker, Ward 2). Mutual cooperation, involving women and non-governmental organizations, as well as engaging

media were also discussed as recommendations for implementing the criminal code aimed at ending chhaupadi. In terms of who should be involved in addressing chhaupadi, involving the local government (mentioned by 62% of respondents), police (mentioned by 56% of respondents) and women (mentioned by 19% of respondents) to achieve increased awareness was also discussed.

Transformation can be achieved with support of the local government by conducting awareness programs, and if local government can't achieve this, then it can be achieved from the central or state level. They have to go to each and every ward and conduct rallies and provide public awareness using signboards, pamphlets, or flyers with a message (Health Worker, Ward 6). I think there will be transformation if there is police support. People won't be disrespectful towards the law. Leaving chhaupadi aside, it is quite evident that the involvement of police helps things to run better (Health Worker, Ward 9). The police should listen to women and more priority should be given to the women (Mothers, Ward 2). Elders of the community and members of Mothers Groups can be used to disseminate the information (Religious Leader, Ward 2).

DISCUSSION

Knowledge and awareness regarding the 2017 chhaupadi criminal code was very low among a wide range of stakeholders including teachers, health workers, women, girls and police, with only a quarter of the respondents having some awareness, and the majority having no knowledge of the criminal code. Limited knowledge in the community was expected due to the relative recentness of the code, challenges with information sharing in remote parts of Nepal, and the lack of coordinated awareness-raising efforts at the time of the study; however, levels of knowledge among working professionals directly involved in menstrual health and law enforcement, such as health workers and police, was unexpectedly low.

Health workers and police, who are considered leaders in the community and whose roles are critical for communicating health and legal information to community members, had alarmingly limited awareness of the chhaupadi criminal code. With only half of the health workers in the study having some awareness of the code, it will be difficult for those in such positions to influence healthy behavior change when it comes to harmful menstrual practices. Furthermore, low levels of awareness among police is a critical finding, especially considering the nature of the law that includes jail time and fines, in which police have an important role in enforcing. If police lack accurate and timely knowledge of the criminal code, resources and an implementation plan, enforcement and chhaupadi behavior change will remain a challenge.

Reactions to the criminal code were positive overall, and most expressed that the code was likely to lead to behavior change. However, raising awareness about the new code is critical as well as timely and equitable implementation of the law. This is also the case with other harmful practices, such as FGM, which is a deeply embedded social practice that has been criminalized in parts of the world. To address low levels of awareness, lessons can be learned from the United Nations Development Programme efforts for addressing FGM in Egypt, such as the development of awareness campaigns that place women's voices at the center, since 'the strongest advocates are the families themselves' (UNDP, 2020, p. 1). In Nepal, awareness-raising efforts could strategically build upon the criminal code, and lessons learned from FGM can provide insight, especially when it comes to the development of successful media campaigns. In fact, centering women's and girls' voices aligns with recommendations put forth by Parker and Standing for addressing menstruation challenges in Nepal, in which they state, 'The media

have a role to play in raising awareness, too—but they must be careful not to sensationalise the issue, and to also listen to—and report—the voices of activists and change makers in the community’ (Parker and Standing, 2019, p. 1).

One example of awareness-raising efforts in Nepal regarding the new criminal code is being conducted by NFCC with support from AmplifyChange. The ‘Chhaupadi Criminalization Dissemination Project’ is a radio campaign designed to inform and educate the general public in Province 7 about the criminal code. This is the first known intervention to directly address low awareness of the criminal code. Additional efforts are still needed to build upon this effort for addressing low levels of knowledge. Notably, the dissemination project began in April 2019, after data collection for this study took place, and nearly 2 years after the criminalization legislation was passed. This highlights the gap in timing between legislation and securing funding and partners for scaling up awareness-raising interventions necessary for informing the public. Levels of awareness regarding chhaupadi criminalization are likely higher now than at the time of the study due to this intervention and to mainstream media coverage of the issue and chhaupadi-related deaths.

FGM efforts also highlight the successful development of strategic partnerships between local authorities, civil society organizations, UN agencies, multiple governments and the European Union to address the issue. In alignment with this approach, in Nepal a multi-stakeholder platform called the Menstrual Health and Hygiene Management Partners’ Alliance (MHMPA) has been established to support with strategic planning and partnership building, as well as providing technical expertise for government ministries addressing menstrual health. It promotes the exchange of ideas advancing dignified menstruation initiatives and provides a platform for coordination and exchange (Evans and Broch Alvarez, 2019).

Another key finding of this study was the expressed need for timely and equitable implementation of the law. Historically, Nepal has faced challenges associated with accountability related to discrimination and violence for other harmful practices, such as caste based discrimination, rape, child labor, early and forced marriage, to name a few (United States Department of State, 2018). As such, the criminalization of chhaupadi must be considered in the context of other criminalized practices in Nepal.

Additionally, strategic and coordinated efforts are needed to build upon the new legislative framework, pairing policy change with evidence-based behavior change interventions. While legislation aimed at reducing harmful practices is noteworthy to set priorities and agendas, it is well known that legislation alone is not enough for long-term behavior change. Community members in this study agreed and expressed that while behavior change due to the chhaupadi criminal code is likely for some, the code alone is not likely to eradicate the practice. Constructs of behavior change theory are applicable here, and can help inform decision making for improving the efficacy and effectiveness of interventions targeting chhaupadi. For example, the Theory of Planned Behavior (US DHHS, 2005) suggests that education should be supplemented with intervention efforts to address attitudes, social norms and perceived behavioral control. In addition, guidance from the CEDAW committee and Special Rapporteur on violence against women has accelerated efforts to eliminate all forms of violence against women in Nepal, and the plan highlights the importance of persecuting perpetrators, investing in efforts that increase awareness among all legislators on harmful practices as well as those who are complacent with such practices, and establishing justice and support systems for victims (UNFPA, UNICEF, and UNRCO, 2019). Writing and approving the criminal code is only one aspect of the solution.

Interestingly, though knowledge of the criminal code was low, after respondents were informed about the code, nearly all had positive reactions towards the criminalization approach, including those who have traditionally upheld the practice such as grandmothers, mothers, traditional healers and religious leaders. Many expressed that the law is likely to change behaviors if community members are made aware of it, and if objective and timely implementation occur. This is an important finding, as it offers insight into initial community reactions to policy level changes and suggests that a range of community members appear supportive of the legislative changes and are hopeful that these policy actions will bring about change. According to the respondents in this study of various backgrounds, criminalizing the practice is a strong start to build upon with awareness and behavior change activities. This finding is notable as previous studies have highlighted that gatekeepers of the chhaupadi tradition have the power to change it, particularly religious leaders and traditional healers (NFCC, 2015). In a study conducted in Achham, Bajura and Kailali, participants expressed that religious leaders and traditional healers are the primary upholders of the chhaupadi tradition (NFCC, 2015). Our study findings suggest that these leaders may be more open to change than previously anticipated and should be targeted in behavior change efforts. Future studies may consider expanding upon the results of this study with a larger sample size to determine if there are critical differences in changing behaviors among these gatekeeper groups, which would support with developing targeted interventions for each.

Lessons from FGM interventions also align with the targeting of leaders and gatekeepers for the tradition to promote behavior change. One example from Somali communities in Kenya is the ‘Religious Oriented Approach to Addressing FGM’, which aimed to overcome the belief that FGM is required by Islam (Askew, 2009). The approach targeted religious scholars and facilitated discussions to debate the role of FGM in Islam to determine ways to implement community awareness raising to encourage the abandonment of the practice (Askew, 2009). The program demonstrated the power of approaching religious leaders for changing deep-rooted behaviors at the community level (Population Reference Bureau, 2013). As there are numerous beliefs about chhaupadi and its close ties with Hinduism, developing partnerships with religious leaders to dispel myths may serve as a powerful approach for ending the practice in the context of the criminal code.

Overall, the results of this study highlight a number of specific opportunities for action:

- Develop systematic and timely communication channels to share the latest information about new codes with police and health workers at the district and community levels, as awareness regarding the new code was exceptionally low among these groups.
- Establish a strategy for equitable and timely enforcement of the criminal code at the district and community levels, including allocation of resources and appropriate training, as the new code is expected to lead to behavior change over time but requires appropriate enforcement.
- Implement long-term awareness-raising interventions to provide updated information to community members regarding the criminal code, as overall awareness and knowledge of the code was low among all stakeholder groups.
- Harness the power of community leaders who are gatekeepers of the chhaupadi tradition (e.g. traditional healers, religious leaders, grandmothers) and incorporate them as leaders in behavior change interventions, as they are more open to change than previously expected.

LIMITATIONS

This study is limited to 81 participants from one district and one municipality. Hence the results are not generalizable to other settings. However, this is the first known study to explore reactions to the criminalization of chhaupadi, and the results of this formative study provide a depth of understanding regarding this complex topic and serve as the foundation for the development of future studies. In addition, other key stakeholder groups, such as school-going boys, village leaders, political party leaders and scholars were not included due to timing and budgetary restraints; however, future studies should consider including them. There was also a risk for social desirability bias in this study, particularly since police are expected to enforce the law and other stakeholders may have been reporting what they believed would be more acceptable to the researchers versus what they might truly believe or think. To overcome this limitation to the best of our ability, the study team made every effort to discuss confidentiality and frame questions in a way that did not ask about individual experiences or opinions, but rather asked about opinions of the police force or the community as a whole.

The study design included providing participants with accurate information about the criminal code during the interview and asking for their reactions. This approach limits responses to initial reactions. Respondents may have formed different opinions if they had additional time to process and discuss the code with others. Future studies may explore if opinions regarding the code change over time and study how opinions are influenced by others.

CONCLUSION

While the practice of chhaupadi was criminalized in 2017 with fines and jail time, this legislative action comes after more than a decade of legal history, from an initial ban, to declaring it a form of violence against women, and finally to its recent criminalization. Given this history, it is critical to reflect upon the decision to criminalize the practice and gain a deeper understanding of levels of awareness regarding the legal penalties, study reactions from a range of community members, and gather thoughts from those who practice the tradition as to whether criminalization is a potential solution for behavior change. Results from this study indicate, from both the perspectives of community members and law enforcement, that criminalization is generally viewed as a positive action for initiating chhaupadi behavior change, with one third of participants expressing that they plan to change their behaviors after being made aware that chhaupadi is punishable with fines and/or jail time. However, accurate information about the legislation is extremely low, and thus initiatives are urgently needed to ensure communities and law enforcement are informed of the criminalization and associated penalties. In addition, even after criminalization, behavior change is anticipated to be gradual and require long-term behavior change interventions that target social pressures associated with upholding the tradition, raising awareness, ensuring mutual cooperation, organizing trainings, involving women and non-governmental organizations, as well as engaging the media.

Overall, lessons learned from this study are informative for developing interventions that build upon the momentum of the recent chhaupadi criminalization. Specially, addressing harmful chhaupadi behaviors will require systematic and timely communication channels for sharing the latest information about the criminal code, a strategy for equitable and timely enforcement at the district and community levels, long-term awareness-raising interventions and incorporating gatekeepers of the tradition into behavior change interventions.

ACKNOWLEDGEMENTS

The authors would like to extend thanks to Narendra K.C. for his support with data collection logistics and field work. The authors would also like to thank Srijan Bhattarai, Sanskrit Adhikari, Smriti Poudel, Shweta Adhikari, Anusha KC, Pratibha Shahi, Panchu Khadka, Rabina Raut, Binita Khatri and Prajwal Manandhar for their support with transcription and translation. Shalini Ayyagari, Marni Sommer and Martha Terry provided critical inputs on the design of this study. This study was supported by the first author's David L. Boren Fellowship (US National Security Education Program) and the Silverman Award, Department of Behavioral and Community Health Sciences, Graduate School of Public Health, University of Pittsburgh, USA.

Ethical approval. The study protocol was reviewed and approved by the University of Pittsburgh's Institutional Review Board as well as the Nepal Health Research Council Ethical Review Board. Participants completed a written informed consent form before participating, and those under the age of 18 were required to provide written assent as well as written parental consent. After each FGD and IDI, participants were compensated based on local ethical standards and guided by NFCC.

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