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# Natural disasters take a heavy toll on coastal Odisha women's health

The gynaecological health of many women living in Odisha's coastline belts, especially those from marginalised sections like Dalits, has been affected due to lack of proper sanitation facilities, absence of menstrual health management and taboos around menstruation during natural calamities like cyclones, which heighten risks for their health & well-being.

Written by [Aishwarya Mohanty](#) | Bhubaneswar |

December 28, 2021 5:51:40 pm



Sukanti Das (extreme right) along with other women outside their kutchha house in Khilakhotia village of Brahmagiri block | Express photo by Aishwarya Mohanty

After the cyclone “Fani” struck Odisha in May 2019, Sushmita Majumdar (26) was on medication for two months for an undiagnosed vaginal infection. In absence of a gynaecologist within 20 km of her village, Majumdar relied on a local pharmacist. “Around two to three days after I returned home from the cyclone shelter, I developed excruciating pain and pus in my private parts. Initially, I did not understand the cause, but I learnt that a few more women too had similar problems. We then approached the local pharmacist here who gave us a lotion and a medicine. There was instant relief, but it took nearly two months to get cured,” Sushmita, a native of Jamboo village in Mahakalpada block in Odisha’s Kendrapara district said.

The nearest shelter, where Sushmita stayed during that cyclone, was occupied by nearly 300 people. It had just one washroom without any water supply. “There was no place else to go. The tube well had drowned, the water supply was cut off. The washroom was filthy but there was little we could do,” another woman from the village, Arti Majumdar, said.



Sushmita Majumdar (2nd from left) along with other women from Jamboo village of Mahakalpara block in Kendrapara district | Express photo by Aishwarya Mohanty

The villagers spent three days at the shelter before they headed back home. The government-run Public Health Centre (PHC) covering three of these villages has been without a doctor for three years. In February this year, a nurse was appointed to the PHC. In absence of qualified medical practitioners, the villagers rely on local pharmacists for diagnosis and medicines for various ailments. Reaching the nearest gynaecologist, 30 km away, involves a boat ride across a river. “I never consult any gynaecologist after a problem is resolved. Visiting a gynaecologist is a tedious process, so we skip it,” Sushmita said.

Like Sushmita, the gynaecological health of many women living in Odisha's coastline belts has been affected due to lack of proper sanitation facilities, absence of menstrual health management and persisting taboos around menstruation

during natural calamities like cyclones, which heighten the risks for their health and well-being.

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A primary school which is used as a shelter during cyclones in Baliapal block of Balasore | Express photo by Aishwarya Mohanty

In many villages, women are still forced to stay in a separate room during their menstrual cycles. The practice continues even even in the times of natural calamities. During cyclones, menstruating women are expected to stay separately in shelters, which force them to stay back at their homes even as men and children shift there.

Health experts say that the lack of menstrual hygiene and inaccessibility to proper sanitation facilities could lead to various health problems including dermatitis, urinary tract infections (UTIs), genital tract infection, alteration in the pH balance of vaginal secretions, bacterial vaginosis, all leading to increased susceptibility to cervical [cancer](#).

Odisha is yet to create a proper database on the number of UTIs reported in the state. However, since 2018, the state has maintained data on cases of cervical cancer. These data accessed by [The Indian Express](#) show that the number of cervical cancer cases among women increased by over 350 per cent in the last three years. In 2018, the state had reported 45 cervical cancer cases, which increased to 137 in 2019 and to 204 in 2020.

Situated on India's eastern side, Odisha has six districts along the coast of the Bay of Bengal, that cover a 480 km-long coastline. Since 2013, the state has faced eight cyclones — “Phailin” (2013), “Hudhud” (2014), “Titli” (2018), “Fani” (2019), “Bulbul” (2019), “[Amphan](#)” (2020), “BOB 03” (2020) and “Yaas” (2021).



Women and young girls from the Dalit community spending some leisurely time outside their homes in Sohoda village of Bhadrak district. Their houses still do not have toilets | Express photo by Aishwarya Mohanty

In 2021, the state experienced five low pressure, four severe low pressure, and one deep depression weather systems. It also witnessed a cyclonic storm between June and September leading to heavy rainfall and floods even in the western and southwestern districts far away from the coastal areas.

As a part of its cyclone relief package, the Odisha government has started rolling out the distribution of sanitary napkins for women and adolescent girls. After Fani, for instance, the Special Relief Commissioner distributed over 24 lakh sanitary napkins in the affected areas. No such provision was made available in the case of any other cyclone in the past. However, the issue of switching from reusable pieces of cloth to sanitary napkins and their disposal continues to be a challenge.

“The washrooms are always full of water and filth. There is always one washroom for over 100 of us and the shelter camps are always over-occupied. We refrain from using pads because there is no way we can dispose of them. We can still try and

wash our clothes, but pads have to be disposed of. In case of extreme emergency once, when I had no cloth left and my daughter was also menstruating, we had then used pads but since we could not dispose them, we kept them in our bags, wrapped in paper, until we returned home. After the water receded, we buried them in the sand. We felt terrible,” said Radha Rani Mohapatra (35) of Nikhara Gram Panchayat in Baliapal block in Balasore district, over 150 km from Kendrapara.



A special relief boat outside the village panchayat office in Sohoda village of Bhadrak, used during floods and cyclones | Express photo by Aishwarya Mohanty

Close to Balasore district, in Bhadrak, which took the brunt of the cyclone “Yass” in May this year, the length of the queue outside gynaecology clinics increased once the floodwaters began to recede. Dr Mitali Shrivastava, a gynaecologist in one of the Community Health Centres in Bhadrak, says, “Many women come to us complaining about infections, itching, rashes, irregular periods. These cases increase substantially after any natural calamity. If on average around 20 women approach us in a week on normal days, the number is 10 times higher during

cyclones and floods. And these complaints go on for a month or so. Managing their menstrual health and maintaining sanitation is a difficult task during cyclones.”

Jyotsana Rani Das (42), a native of Sohoda village in Bhadrak, maintains a strict diet of only puffed rice during the cyclones and limits her water intake. “I have seen all major cyclones. During Amphan, I had my periods and would go out in the open to defecate and urinate. There was no water to clean my used cloth so I would wash it in the floodwaters itself. There was no water available in the house and because I was menstruating I had to isolate myself, so I decided to stay home and not go to the cyclone shelter. After Phailin in 2013, I had contracted a vaginal infection and had to take medication. So, having faced all of this, during the recent ‘Yaas’ cyclone, I was determined not to use any toilet or go out in the open to defecate or urinate. I ate less and even restricted my water consumption so that I didn’t have to use the toilet frequently,” Das said.



Jyotsana Rani Das outside her house in Sohoda village of Bhadrak | Express photo by Aishwarya Mohanty

According to Accredited Social Health Activists (ASHA) in Sohoda and nearby villages, over 80 per cent of the local women have irregular periods and are anaemic. The nearest cyclone shelter from Sohoda is 6 km away. The women in the village avoid going to shelters so that they could look after their houses and cattles. The nearest hospital is 10 km away.

Currently, Odisha has 879 cyclone shelters to accommodate residents from low-lying coastal areas. But in many instances, women from the Dalit community from the marginalised Scheduled Castes (SCs) are prohibited from entering their washroom by the upper caste or socially dominant people, which make it more difficult for them to take care of their menstrual hygiene during natural calamities. During “Fani”, 25 families from the Dom community, which come under the SC category, were not allowed to enter the cyclone shelter by upper caste families in Biripadia village in Puri district. Dalits constitute 17.13 per cent of Odisha’s population.



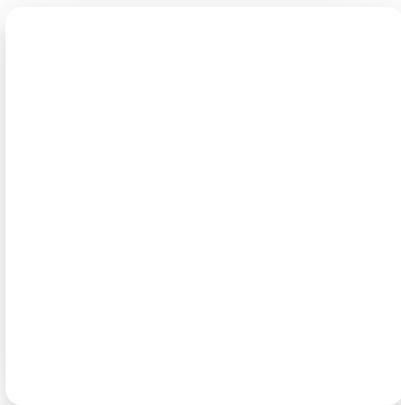
A file photo of women returning home from cyclone shelters in Balasore during Yaas | Express photo by Aishwarya Mohanty

Puri’s Brahmagiri block was ravaged by “Fani”, which was India’s most severe summer-time cyclone in 43 years. For many Dalit women of the block, the accessibility to washrooms was then a distant dream. “I could not pack spare

clothes with me due to the strong winds and rain and had to go to the shelter in just one piece of clothing. Initially, we were not allowed inside the cyclone shelters, so we stayed outside but when the situation deteriorated, we were permitted to live in a small room. But there was no access to the toilet. We would cut pieces of our own sarees to use as tampons while we were menstruating. We urinated outside in the open in knee-deep water,” said a resident of Khilakhotia village in Brahmagiri block, Sukanti Das (32), who belongs to the Kui community.

“I developed rashes, pain and the bleeding did not stop for over a week. But I could not even go to the doctor because when we returned home, there was no home. We had to rebuild our house, rebuild our lives, there was no time to go see a doctor,” Sukanti said.

Since then Sukanti has never had regular periods, but she has never approached any doctor. As per standard protocols, after every cyclone ASHA workers distribute medicines for cold, diarrhoea and fever, which are common ailments reported during such times.



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Health activists have maintained that women's health needs special attention in times of natural calamities, and that the impact of such disasters on their health must be studied. Bishaka Bhanja, member of the National Alliance of Women Odisha and former regional head of Water Aid, says, “There is a need to focus on women's health, specifically their menstrual health, before and after a disaster hits. Prior to a disaster, there should be awareness campaigns at community level on how to manage menstrual hygiene during any disaster. After a disaster it is important that the state health machinery include gynaecologist in their health

camps, which focus solely on fever, cold or diarrhoea, and pay extra attention to the impacts that such calamities have on health of women. Only then we can gauge the impact that calamities have on women's health and understand the kind of interventions that need to be made. When Fani happened, people in Puri had not anticipated the kind of destruction it left behind. It also impacted their mental well-being. Even psychological factors affect the menstrual health of women but that is never addressed. Until and unless menstruation is talked about from a public health point of view rather than just from a sanitation point of view, there is a long route ahead."

For women living in these coastal belts, the demand remains modest: water facility and a separate washroom in cyclone shelters. A 14-year-old girl from Sandhakud who shifted to a cyclone shelter with her parents and grandmother ahead of "Yaas" said, "If just an extra washroom can be built at these centres for us (women), it will be a lot easier. We do not feel comfortable using the same washroom, used by many others, while menstruating, especially when there is limited water."

Dr Niranjana Mishra, director of Public Health, Odisha, said: "Cyclones are a temporary phenomenon. Preparing for impending cyclones in the state, we ensure that pregnant women are shifted to safer locations, children are taken care of, and sanitary napkins are provided. But there is no data or any kind of study which has been undertaken after cyclones to understand the effect of cyclones on the health of women. Health screening is definitely conducted in every block and village taking care of the overall health of people affected."

(The report was supported by Internews' Earth Journalism Network's Bay of Bengal Story grant for 2021)

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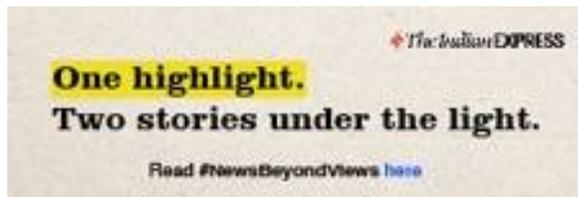
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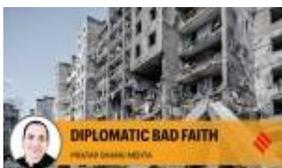
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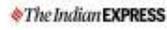
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