

# **EXPLORING THE MUTTUTHARAI PRACTICE: MENSTRUAL SECLUSION IN RURAL TAMIL NADU**

Alaka Rajeev

Institute of Public Policy, National Law School of India University

## **Abstract**

This paper analyses the Muttutharai practice of menstrual seclusion in Govindanallur, Tamil Nadu, based on interactions with community members during an immersive fieldwork conducted in October 2025. The muttutharai practice seems to be due to beliefs that lie at the intersection of gender, caste and religion. The interviews with women in the village across age groups highlights the deep-rootedness of this practice and the complex web of social norms and beliefs that ensure its adherence. The practice has an impact on the woman's autonomy, health and identity formation. The existence of the practice also reveals the blind-spots in policymaking at the local and state level that misses out on assessing such practices. Drawing on observations from the field and narrative vignettes, the paper also highlights the lived experience of such a practice for those who live in the village, Keeping this in mind, the paper proposes policy interventions that account for the needs of the public themselves in a way that involves the community and attempts to eventually build positive social norms that would bring about a community driven end to such a practice.

## Introduction



**Exploring the Muttutharai Practice:  
Cultural Insights and Policy Considerations**

A Study on Menstrual Practices in  
Govindanallur, Tamil Nadu

**Muttutharai (n.)**  
Definition: A building/structure designated for  
menstruating women associated with cultural beliefs  
surrounding menstruation.

### Govindanallur - Site for Exploring the ‘Unusual’

As part of the Rural Immersion and Experiential Learning programme at National Law School of India University, we interned with PRADAN in Virudhunagar, Tamil Nadu. PRADAN’s interventions in Virudhunagar address the Aspirational District Programme (ADP) focus areas, as Virudhunagar is one of the two Aspirational Districts in Tamil Nadu. Govindanallur, located 42 km from Virudhunagar, was the assigned fieldwork site for me. As per the local health department data, the hamlet spans a geographical area of 6.3 sq. km inhabited by 459 people (out of which 43.55% belong to the Scheduled Caste). The village has 4 settlements - 3 Scheduled Caste (Pallan) and 1 mixed caste (Pillai and Thevar, OBC).

### Situating the Field Location - Mapping the Institutions in Govindanallur

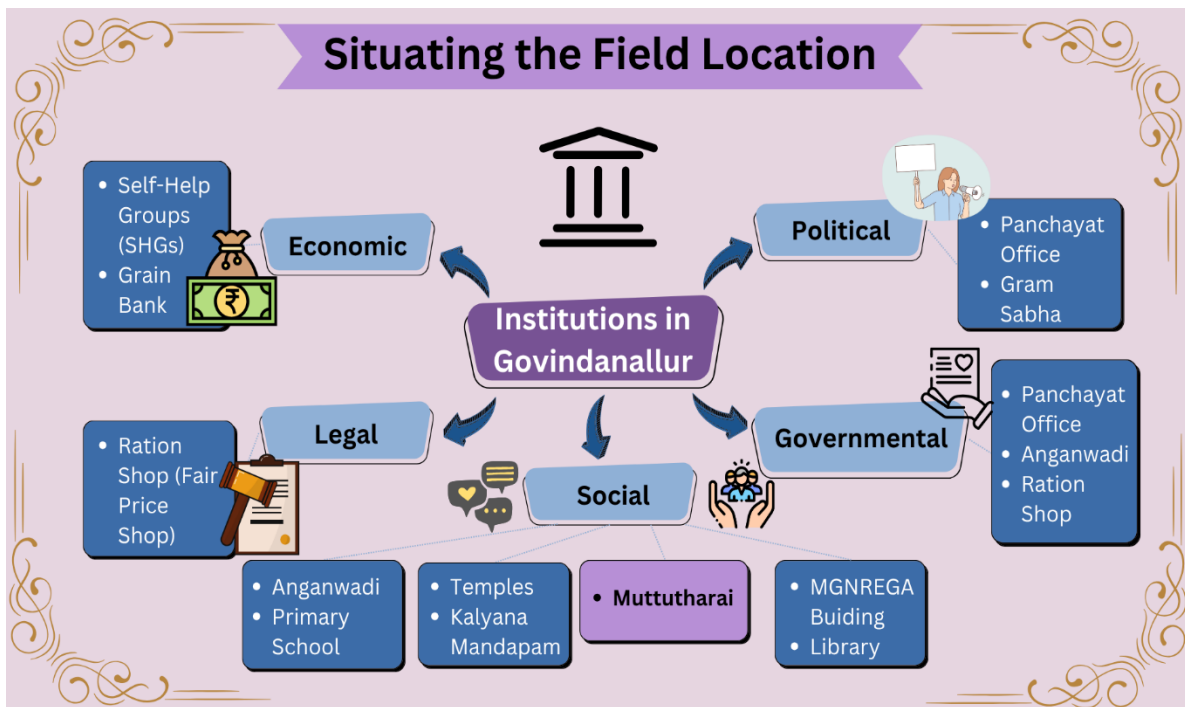


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As can be seen, the institutions in Govindanallur primarily focus on welfare and rights-based provision such as the Ration shop, Anganwadi, Primary School and Panchayat Office, which operationalise national policies such as the National Food Security Act and Right to Education. But what stands out in the map are the multiple social institutions created by the communities themselves, such as the temples and the conversion of a SHG building into the Muttutharai resthouse. Unlike the formal, rights-driven institutions that execute top-down directives, these community-created spaces reflect the active role played by residents to create spaces that foster meaning-making and solidarity within the community.

### Key Institutions in Govindanallur

I found the following two institutions to have a more tangible impact on the everyday lives of the residents of Govindanallur. The first institution is the Anganwadi which reminded me of the history of the National Food

Security Act, 2013. The framing of the Act as an Immediate Obligation to be performed by the State and the Court's initial involvement through the Writ of Continuing Mandamus played a crucial role in ensuring the Act's implementation. This legal framework proved pivotal and ensures the Right to Food in even a small hamlet such as Govindanallur. Although there are challenges such as limited personnel in the Anganwadi, the central role played by the Anganwadi in serving midday meals, tracking health metrics of children via the POSHAN app and providing Sathu Mavu to meet the nutritional needs of women has made a significant difference in the lives of residents in Govindanallur. The second institution and the focus of this paper is the Muttutharai which is a 'resthouse' where menstruating women of differing age groups are expected to stay for the duration of their menstruation in Govindanallur. The building, originally intended to be used by Self-Help Groups, has become a key institution shaping menstrual practices for women. While the Muttutharai can be seen as addressing the needs of the women in the community in a culturally accepted manner, it does raise questions about potential stigma and exclusion surrounding menstruation. The impact of the rootedness of such a practice and how it impacts the lives of women is also of concern.

### **PRADAN'S Impact in Virudhunagar**

The impact of PRADAN in Virudhunagar, while promising, is still in its early stages. Although the NGO has been in Tamil Nadu since the 90s, it started working in a full-fledged manner in the district only from 2019. Therefore, its interventions are relatively new and limited to technical projects such as tank restorations and supporting the setting up of Atal Tinkering Labs as part of Atal Innovation Mission (AIM) under the ambit of the Aspirational District Programme. Although their expertise in

managing such technical projects is evident, these projects require collaboration with functionaries such as the Panchayat President (for tank restorations) and School Staff (for AIM). Such a collaboration can obscure PRADAN's role making it difficult for the community to link PRADAN directly to the project outcomes.

In Govindanallur, PRADAN's interventions include tank restoration and anaemia prevention sessions. However, the beneficiaries of such interventions seem to be unaware that these projects are being run by PRADAN. This was confirmed in interviews with beneficiaries on agricultural practices in the village. When asked about the water source relied upon for agriculture, the tank restored by PRADAN was not identified as a key source and the beneficiaries seemed to be unaware that PRADAN was the organisation that was involved in the tank restoration. In contrast, the discussion sessions organised by PRADAN on anaemia prevention would improve both PRADAN's visibility in the village while also improving awareness on sexual and reproductive health issues. In influencing the conversations surrounding health in the village, such as through menstrual health awareness, PRADAN can create an impact that will positively benefit the health and lives of women in Govindanallur.

Overall, improving outreach efforts to engage the broader communities present in the district through awareness interventions surrounding social aspects of people's lives would aid in boosting PRADAN's impact.

## **Exploring the Muttutharai Practice in Govindanallur**

Upon exploring the village in my first week at Govindanallur, I ‘accidentally’ came across the Muttutharai. I was passing by the Muttutharai when I was called by one of the residents to come to her house. I was told to come from the main path and not through the land adjacent to the Muttutharai. When I asked why I could not use the latter path, they explained that I am not allowed near the Muttutharai as menstruating women stay there. One of the younger women present there explained that all women in the village are expected to stay in the Muttutharai for the duration of their menstruation. This discovery made me curious to understand this practice and its implications for women in the village. To analyse the Muttutharai practice, this paper will draw on Kimberlé Crenshaw’s theory of intersectionality to explore why this practice is a burden borne exclusively by Dalit women, and Mary Douglas’s theory of purity and pollution to understand the deep-seated cultural logic behind menstrual seclusion.

## **Literature Review**

In 2019, a group of United Nations human rights experts acknowledged 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). In Govindanallur, all these rights are being impacted with the practice of Muttutharai where the women are separated from the community due to certain stigmas surrounding menstruation. Stereotypes surrounding menstruation can have a lasting developmental impact on women because across cultural contexts, constructions of menarche and menstruation are strongly tied to notions

of 'womanhood,' interlinked with reproduction and emergent sexuality (Hawkey, Ussher, and Perz 2020, 110). This construction of womanhood being shaped by menstruation has important implications because the Muttutharai practice becomes applicable from menarche itself, shaping and limiting the conception of what it means to be a woman. Added to this is the result from studies that emphasize how lack or 'poor quality' of girls' knowledge leads to distress, typically by describing how menarche triggers anxiety, panic, fear, and worries (McCarthy and Lahiri-Dutt 2020, 19). This means that the myriad changes that a young girl experiences during menarche which when combined with the absence of accurate, timely information in a context where one is expected to stay separately at a menstrual hut could have a significant, debilitating effect on how menstruation and womanhood is understood and experienced. An analysis of Chaupadi (menstrual seclusion) practice in Nepal by Rothchild and Shrestha Piya has found that such practices remind women that they "must police themselves once they start menstruating, that young women become 'polluted' and 'impure,' and that they must conduct themselves accordingly, including secluding themselves from men and boys" (2020, 924).

This logic aligns with the work of anthropologist Mary Douglas, who argued that societies maintain order by creating symbolic boundaries between the 'pure' and the 'polluting', with menstrual blood often classified as a substance that dangerously crosses these lines. In India, restrictions are placed on women and girls during menstruation, and the tradition of excluding menstruating women and girls from various activities continues (Rajagopal and Mathur 2017). Although such practices can operate at the level of the household in several places in India, practices such as seclusion in menstrual huts represent the most extreme

manifestation of menstrual stigma. These huts have been found in various parts of India such as Maharashtra, (Mathur 2018), Karnataka (Pailoor 2020) and Tamil Nadu (Pandian 2023). In Tamil Nadu, Koovalapuram and its neighbouring villages—Chinniahpuram, K Pudupatti, Saptur Alagapuri, and Govindanallur—had been in the news for sequestering menstruating women for five days, and new mothers and newborns for 30 days at muttuvedu/muttutharai (Pandian 2023). But the news has largely focused on capturing the experiences of women in Koovalapuram and there is not much effort made to document the experiences in a more intersectional and nuanced way which is something that this study attempts to do. To achieve this, the study employs the framework of intersectionality, developed by Kimberlé Crenshaw, to analyse how overlapping systems of power—in this case, caste and gender—create a unique and compounded experience of discrimination. What is also of importance in Govindanallur is that the practice is only followed by the Dalit women in the village and not the OBC women who stay separately within their house itself instead of staying in a separate Muttutharai. This is striking because non-Hindus, Janajati groups, and low castes and Dalits tend to be more socially lenient about menstruation and often regard it as simply a natural process (Rothchild and Shrestha Piya 2020, 925). There could be an element of Sanskritisation present here where the lower castes emulate practices followed by the upper caste communities in an attempt to seek upward mobility. The extent to which this applies to the Scheduled Caste community remains to be seen. But it highlights the interconnectedness of the question of caste to this socio-religious practice.



## **Contextualising the Muttutharai - History, Evolution and the Present**

The Muttutharai is considered to be a 'resthouse' for menstruating women of all ages for the duration of their menstruation. This practice is present not only in Govindanallur but also nearby villages that of Koovilapuram, Saptur Alagapuri, Chinniahpuram and Pudupetti. Adherence to the Muttutharai practice, presence of a significant Dalit population and worshipping of Thangamudi Saami (the God) and Muthirulan Pandaram (the God's seer) are commonalities shared by these 5 villages. The origin of the Muttutharai practice is traced back to these religious figures and their powers as narrated by multiple respondents during interviews conducted in Govindanallur.

### **Origin of the Muttutharai Practice**

As per the locals, there was Thangamudi Saami (God) and Muthirulan Pandaram (his seer). God had bestowed powers on to this seer who was like his physical manifestation on Earth. The respondents shared stories that began with explaining the powers of this seer who could control the ploughing of the fields just by sitting near a tree with his feet up in the air. His powers are so great that he finds treasures in wells when he draws water. After explaining these powers, they move onto how the seer was travelling horseback when he saw *vanaathi* or washerwomen (tasked with washing clothes of people in the village in those times). He was about to throw a *thundu*/piece of cloth towards the *vanaathi* when she exclaims that she is a *velli aal* (literally, outsider; here, woman with menses). When she said this, the cloth stopped midway in the air, and the seer gave a boon to all the washerwomen that they will not get their periods when they are

in this village doing this work. They will only get their periods twice - once during puberty and once before childbirth. The other women were told to stay in isolation separately during their periods (God through the seer cannot stop periods for everyone, hence, the others are to stay separately). There is also a belief that the deities of Thangamudi Saami present in all 5 villages were not placed by humans but that these deities, in a physical form, travelled on their own across hills and mountains to choose a resting place. There is a sense of feeling like chosen ones and, therefore a sense of obligation to listen to God and not incur his wrath.

### **Evolution of the Muttutharai Practice**

In earlier times, there used to be a mudhouse that the women in Govindanallur had to inhabit during their periods. This would get flooded during rains and they often had to spend the night standing knee deep in water in the Muttutharai. They would have to consume food in either banana leaves or *mannchattis* (vessels made from mud), and both of these had to be discarded in the forest after use. The food would be either poured to them or slid down to them using a *taghara pathal* (corrugated metal sheet) as a barrier to separate the food receiver and provider. Often, the person who is providing food themselves had to stay outside the house for having to come in contact with the menstruating woman. They also could not speak to anyone before in addition to the physical separation. They had to go to the forest to relieve themselves and to burn the used clothes.

However, things have changed now. There is a sturdy structure that houses the women. There is a washroom attached to the building for their use. Although it does get congested if many women have their periods at once, the structure is still better than earlier times with a fan, windows and a place to hang their belongings. Food is passed onto them normally and they can

talk to everyone from a distance. But the web of practices defining this practice have evolved with time with a responding profoundly remarking that “the building changes but not the practice”. Overall, there is an appreciation for the amenities that they have as a result of the building.

### **Current Beliefs and Behaviors Surrounding the Practice**

Key beliefs and behaviours emerging from interviews reveal several recurring themes. The practice is rooted in the perception of menstruating bodies and items as impure, which manifests in behaviours like elaborate, multi-day purification rituals before re-entering the house, the inability to bring personal items back home from the muttutharai, and even rules requiring a mother's baby to be handed to her without clothes for feeding. The adherence to the Muttutharai practice seems to be influenced by beliefs such as not staying in the menstrual hut could invite snakes into the house, cause illness to family members and generally, inviting the ‘wrath of God’. Further, the women often spoke about the challenges on inhabiting a shared space with other menstruating women and the challenges of using unclean washrooms, many women crammed next to each other in the singular hut and how to get ready on time in the morning in the limited space.

### **Research Questions**

The study's attempt was to understand the following five aspects in regard to the muttutharai practice such as the experience of the muttutharai as a tangible structure, awareness or knowledge about menstruation, understanding of the nature and extent of enforcement, intergenerational changes in the experience of the practice, and reflections on the practice as it applies to the individuals. After gathering the demographic details,

specific questions were asked to capture all the five aspects. For male respondents, a different set of questions was posed. To understand the experience of the muttutharai as a tangible structure, questions on why the muttutharai was built in that specific location, the nature of facilities available in the hut and the restrictions women faced during menstruation influencing their conduct in or near the hut were captured. To grasp the extent of awareness of menstruation, details on their memory of when they experienced their menarche, duration of their usual stay at the hut and the kind and ways of disposing of menstrual products was recorded. The muttutharai practice in Govindanallur seemed to be strongly enforced, Hence, some of the questions posed to the respondents aimed to understand the actors in the family/village that enforced the practice, the role played by male members and how the village perceives menstruating women. To examine the intergenerational changes in the experience of the practice, the older respondents were especially asked to share the details on the history of the practice, its presence in other villages and the changes that have taken place in the practice over time. Finally, reflections on the practice were gauged by asking how women felt about the practice, whether they view it as a burden or a necessity, and to share their menarche and recent experience of staying at the muttutharai.

## **Research Methodology**

This study utilises an exploratory, qualitative design. This was chosen because the Muttutharai practice as it exists in Govindanallur has very little prior documentation. The selected design would help in comprehensively capturing the beliefs, practices and experiences of women who have been subjected to the practice. Further, an in-depth and contextual understanding of the practice becomes possible through this design. The

findings from this study are the results of the immersive fieldwork conducted over 25 days in Govindanallur where I stayed in the village settlement amongst the community members. This almost month-long duration provided me with the unique opportunity to speak to the community members, observe their daily practices and routines and eventually, build rapport to examine the muttutharai practice and its nuances.

The sample was obtained through snowball sampling. For the duration of my fieldwork, my stay was at a community member's house. This meant that my starting point for conversations on this topic was the community member and their family. It was through their help that I could identify women who would be willing to speak to me. The interviewed women would then further introduce me to other women. Given the sensitive nature of the topic, it was best to rely on such a sampling method. The primary sample was 30 women who met the inclusion criteria of having stayed in the Muttutharai at least twice. This would mean the initial one-month stay prompted by menarche and then the regular stay for the duration of the period. While I was initially concerned with only interviewing women, it slowly became clear that men had a significant role to play in the extent to which the practice was enforced or in what manner. Thus, I interviewed 10 men belonging to different age groups to understand what they felt about the practice.

For the purposes of this study, semi-structured interviews were found to be suitable as it would allow for guided discussions relevant for the study while also allowing space for the interviewees to delve into any other thoughts that come up while reflecting on the practice. The interview transcript was then subjected to thematic analysis. Initially, the attempt was

to identify and code key phrases and ideas that were coming up across the different interviews. Then, these were classified into broader themes which were then interpreted to understand the cultural, social and policy-related implications of the practice. This was supplemented by a narrative case study or vignettes that highlight the age-based experience of the practice and stems from personal accounts shared by the respondents.

### **Researcher Reflexivity and Ethical Considerations**

My reflexivity as a researcher and ethical considerations were important considerations when engaged in fieldwork and trying to capture such a rooted practice in Govindanallur. As a young, urban, and educated woman currently residing in Bengaluru, I was perceived differently in my interactions with the community. While I can understand and speak Tamil, I do not have native fluency. My manner of speaking, dressing and engaging with people would mean that I was perceived as an ‘outsider’. This presented challenges such as initiating conversations, building rapport, and having to learn the linguistic nuances. While the community was generally warm and interactive, the rapport required to have sustained conversations had to be built slowly. Quite interestingly, it was only when the children in the community took a liking to me that the mothers started to talk to me. Even then, the process required constant self-awareness and social manoeuvring. For instance, I could only interview men in the presence of their female relatives/partners. Furthermore, the fieldwork actively challenged my own urban-centric assumptions. I had anticipated a pervasive ‘male gaze’ similar to my experiences in cities. But I found the interactions in the village to be largely respectful. Similarly, I expected that a married woman with kids is likely to be older than me. However, this turned out to be wrong on many occasions. Lastly, the interviewing process

was rarely ever one-sided. Oftentimes, I was expected to share about my life and family so that an equal barter of information was achieved. While my 'outsider' status did impact my initial interactions, it also curiously motivated the community members to interact and engage with me more.

Given a recognition of my position as an outsider, I had to take active steps to ensure that all ethical considerations, including obtaining informed consent and ensuring the anonymity of respondents, were upheld throughout the process. Interestingly, it was an initial conversation with a community member that prompted me to design the informed consent form in Tamil and have it printed out. In my interaction with this member, they feared that my research would end up portraying the practice in a negative light as 'torturing women'. I cannot deny that I was indeed taken aback by the presence of the practice in the village, however, I was also aware that menstruation-related practices are often influenced and shaped by certain beliefs. The rest of my stay in the village was focused on unpacking the belief system surrounding the muttutharai practice sans any presumptions. This incident also made me reflect on my responsibility to mitigate any potential negative impact from this "intrusion" into their lives. Thus, ensuring informed consent becomes crucial in providing them with complete information on how whatever they share would be utilized, why I am doing it and to let them know that they can stop the interviews whenever they feel so or even take back their consent. Attempts were also made to ensure the anonymity of the interviewees.

## **Findings**

Both quantitative and qualitative data were collected and presented using a life cycle lens to illustrate age-based variation in adherence and perception.

## Quantitative Findings

### Perception of the Practice

Based on interviews with 30 women respondents, 63.33% perceived the practice as a burden, 26.67% saw it as a necessity and 10% saw it as a burden and a necessity (as visible in the bar chart titled ‘Perception of the Practice’).

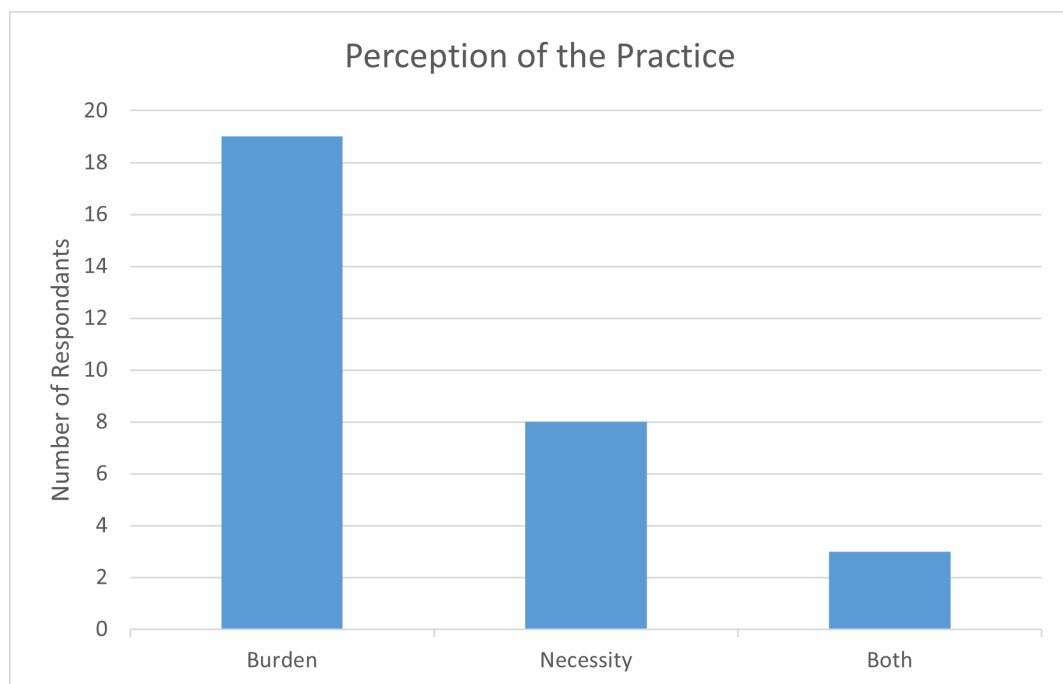


Chart:1

### Adherence to the Practice

Out of 30 women respondents ( $n = 30$ ), 98% adhered to the practice and only 2% did not.



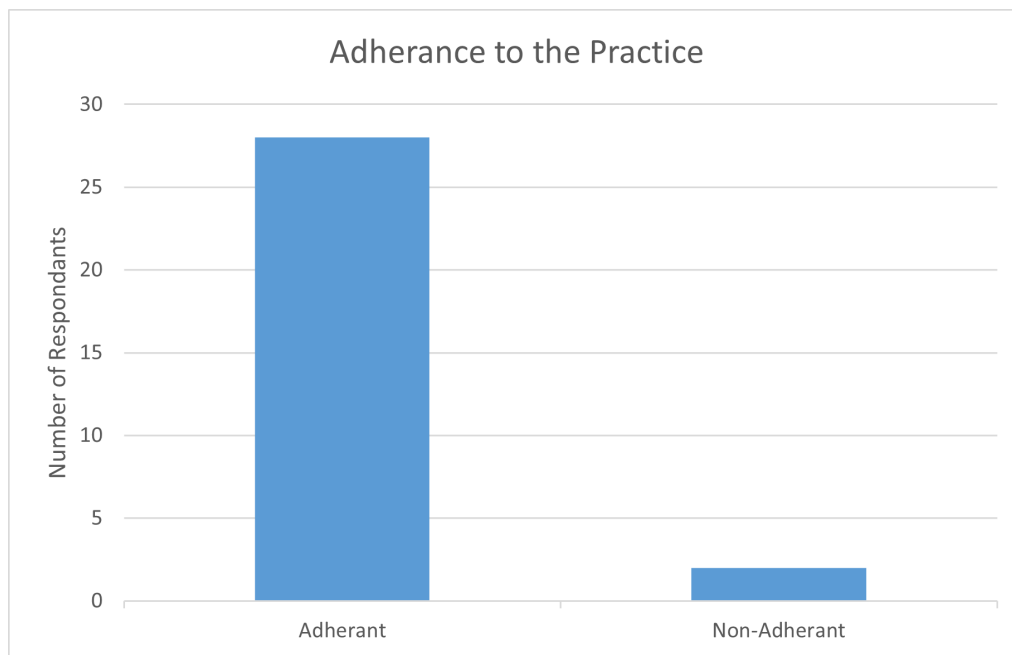


Chart:2

### Crosstabulation of Age and Perception of the Practice

There seems to be a shift in the perception of the practice from burden to necessity as the woman ages which is confirmed by the narrative data as well.

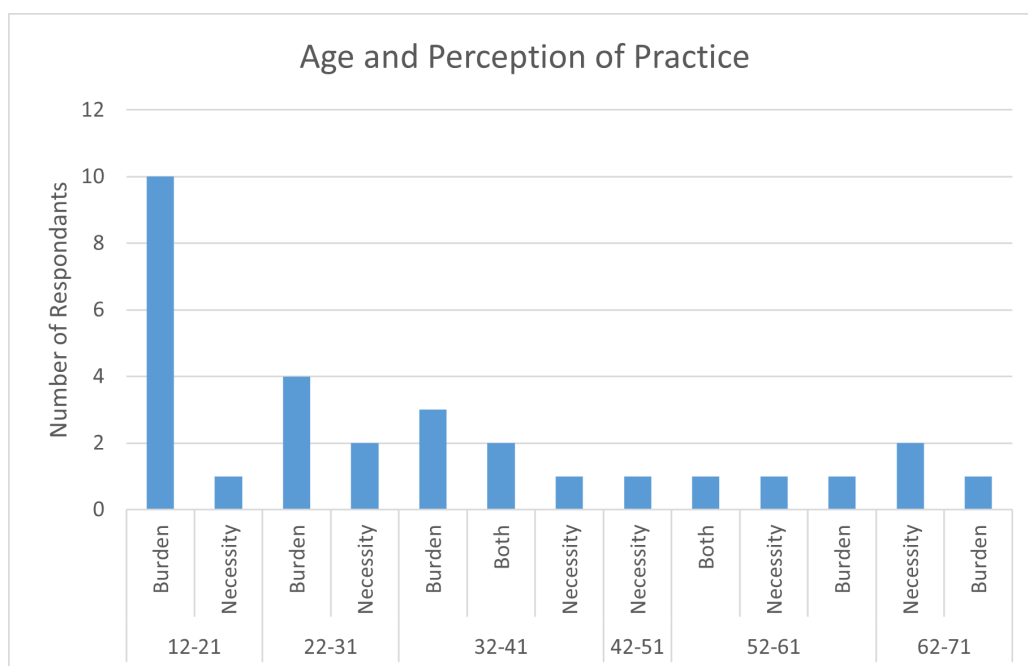


Chart:3

## Crosstabulation of Age and Adherence to the Practice

Only women in the 32–41 age group reported non-adherence, with reasons explored through the Geeta narrative vignettes below.

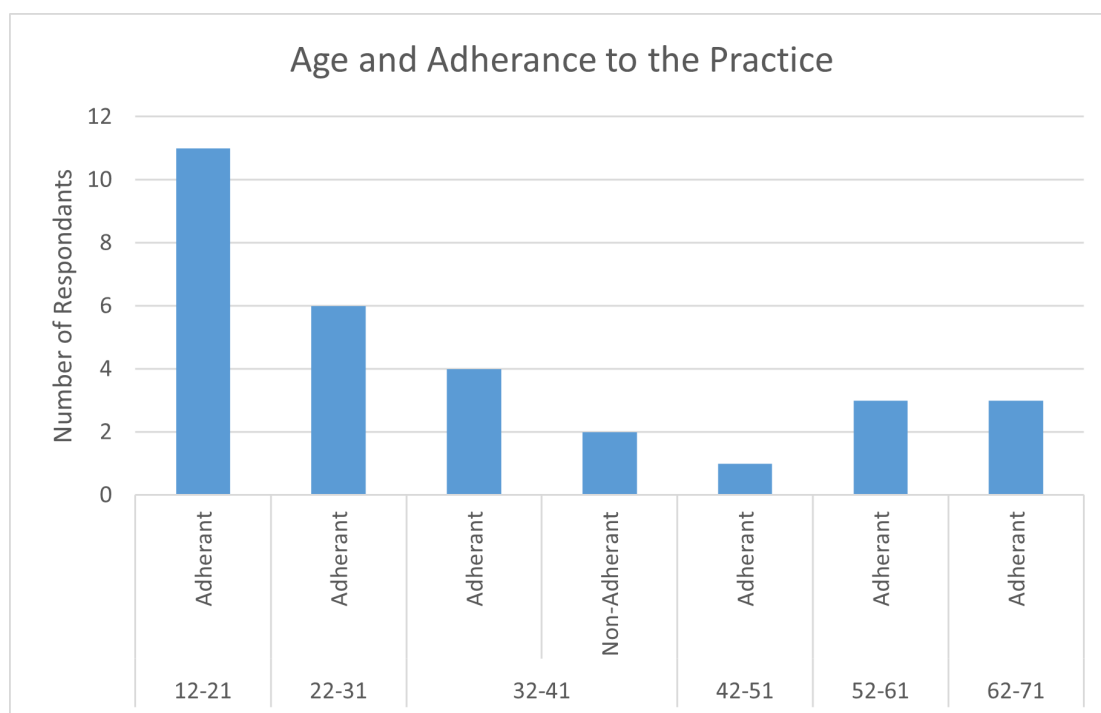


Chart:4

## Perception of Male Respondents

Among 10 male respondents ( $n = 10$ ), 70% supported the practice, 20% seemed open to changes, and only 10% did not support it. Most adolescent male respondents supported the practice, often citing misconceptions about menstruation as impure. Men with female partners, close female cousins and daughters were the ones open to an end or change to the practice. Their views are important because they play an important role in enforcing the practice.

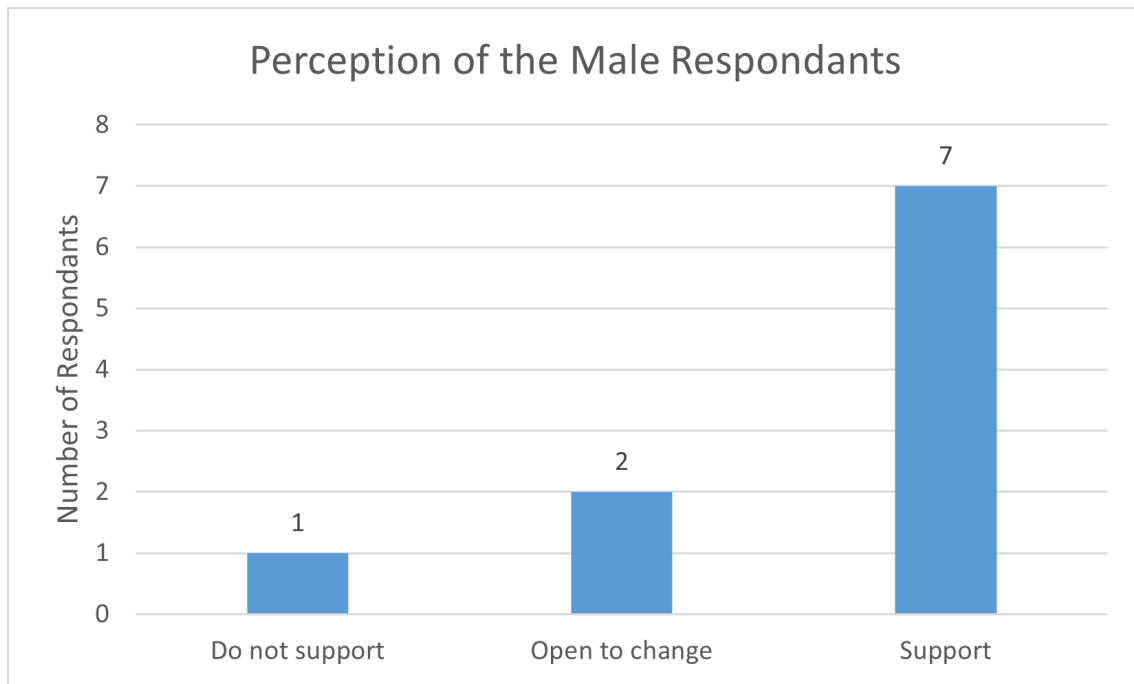


Chart:5

## Qualitative Findings

To understand the story behind the quantitative data, a qualitative analysis becomes important. The following are the three themes that seemed to emerge across the interviews with the respondents:

- **Generational Shifts in Perception:** In conversations with the different respondents across age groups, the experience of women in a particular age group seemed to differ from that of a woman in another age group. The perception of the practice also seemed to evolve over the years. The adolescents seemed to be more expressive about the burdens associated with the practice; the middle-aged women seemed to either be unsure or supportive of the practice except two women who were non-adherents. The older women seemed to be the primary enforcers of the practice. This shows how the grasp of the practice on the women in Govindanallur increased the more they were exposed to the practice.

- **Role of Fear in Influencing Enforcement of the Practice:** As explained before, the women respondents often cited fears such as retribution from a divine source and negative consequences in the form of themselves or to their family members as driving adherence. This indicates that it is not only pressure of adhering to a practice accepted by the community but also the above fears.
- **Impact of Caste Hierarchy and Gendered Stigma:** There seems to be a caste dimension at play. This is because it is only the Scheduled Caste or Dalit women in the village that are expected to stay in the menstrual hut and not the OBC women who live in a separate settlement in the same village. This points to a differentiation in the enforcement of the muttutharai practice based on caste lines indicating an instance of double discrimination.

### **Life-Cycle Narrative - Geeta and the Gendered Continuum of Seclusion**

The following composite narrative provides a rich illustration of how the three themes of generational shifts, fear, and caste become considerations for women in Govindanallur. ‘Geeta’ is not a single individual but a composite character whose experiences are drawn from the recurring accounts of the 30 women interviewed for this study.

#### **Introduction to the Muttutharai Practice: Geeta as an Adolescent**

One fine morning, Geeta woke up to find blood stains on her clothes. Feeling alarmed, she informed her mother with hopes of obtaining an explanation. Instead, her mother immediately informed all her relatives and neighbours that she has come of age now. People started streaming in to have a look at her, making her feel perceived. Amidst this, her mother

instructs her to follow her to the forest with the stained clothes which are to be burnt. She is provided with no reason as to why the clothes that she liked and had worn for all these years were being burnt. On the next day, she is asked to put on a *dhaavani* (dress), hold a lemon and cover her face with a shawl. She is then made to walk to the muttutharai where a makeshift structure made of banana leaves has been arranged. Her hair is oiled and *manjal* (haldi) is applied to her face which is later washed off by the pouring of the water. These rituals do not make any sense to her, but she obliges. Then, she is asked to change into clothes provided by her maternal uncle and is decked in jewellery. She comments that she looks like a bride. There is talk of fireworks, drums, and dance being arranged, which starts to make her feel excited knowing that her blood stain could be an occasion for celebration like the kind seen during festivals. She can smell meat being cooked and there is a line of people waiting to take pictures with her, but they don't stand too close to her. She does not register it as she is too excited to see everyone enjoying the celebrations. Slowly, the people start heading to her house for food. She also decides to follow them but is told by her grandmother that her food is being brought here. She does not think too much of it. After having the food, she expresses a desire to change out of her clothes and to head home. She is stopped and told that her home is going to be the muttutharai where she has to rest for the next 1 month. A range of emotions run through her head as she grapples with what this would mean for her. The first few days she wakes up with a cold sweat in the night scared by her unfamiliar surroundings and cries as she misses her home. Her days are long, and she usually sits on the steps of the muttutharai's entrance gazing at the common area where others are moving about freely. She is expected to walk to the compost pit to dispose her used sanitary pads every day. She is also unable to make it to school on time on some days as she shares the muttutharai with other women. Her friends

start noticing her unkempt appearance and the toe ring on her feet (indicating coming-of-age) making her feel scrutinised. After returning from school, she has to rely on someone from her family sending her food, water and clothes in a timely manner. She feels neglected and sidelined by her loved ones who take great efforts to distance themselves from her. At the end of 30 days, she gets her periods again and now must stay in the muttutharai for 15 days. She feels deflated and resigned to her fate. However, the sight of another girl who comes in provides her with some reprieve and they gradually bond over their shared sorrows of having to stay away from home.

### **Continued Exposure to the Muttutharai Practice: Geeta as an Adult**

Geeta has been going to the muttutharai for almost 10 years now. She has figured out some small ways in which she can hold on to some of her freedoms. She goes to the areas around the colony which is accessible since there are no temples in that area. She has started to go to the end of her street to collect her food. She spends time at the common area where her friends sit and gossip or use the swing. She sits at a distance from them, but she is happy to be able to at least witness what is happening and be included even if from a distance.

She has figured out her routine for when she gets her menses now. Her utensils, bottles and clothes that are to be worn are already in a cover hanging inside the muttutharai. She cannot take these back, so she just left it inside. She has gotten used to the impositions on her and how people keep a distance from her. She only feels sad when her menses coincides with an important festival or a wedding which she can then not attend. She hides her sadness and lives vicariously through the various accounts shared by her friends of such celebrations.

But Geeta has other reasons to be joyous. She has been seeing a man in the village who she is soon to be betrothed to. He is a nice and caring man with a government job, but he never stops her from going to the muttutharai. He has seen his mother and sister going to the muttutharai since he was a child. He knows that it is the norm in the village. She does not question him on it because she knows it is futile to question. Geeta used to question her mom a lot, but she would just be told that not going would incur the saami's wrath and would invite bad luck and ill-health to the household.

She used to protest initially but slowly, she stopped. Her friends and people around her had made their peace with it. She would get scolded if she said anything against the practice. She had other things to focus on now such as working at the jute factory and her marriage. Geeta gets married and stops going to the jute factory because of opposition from her in-laws. Earlier, she could at least have some sense of normalcy when she was away at work and would just have to come back to sleep at the Muttutharai. But now, her life was defined by the chores at the household and catering to her family. Nevertheless, she slowly started to get used to her new life.

Amidst this, she gets to know that she is pregnant. It is a joyous occasion for the family who were looking forward to this. She has some relief from going to the Muttutharai as she would not get her periods. She observes girls of differing ages still going there and feels glad that she does not have to at least for 9 months. After her pregnancy, she is told to stay at the Muttutharai again. She does not even question it. She obliges to please her family. She stays in the Muttutharai away from her family and her baby is brought to her sans-clothes by her mother-in-law whenever the baby cries

for food. She has to shower every time before she can feed the baby. This is really tiring for her which then raises a discussion in the house whether she can just stay in the house. She had seen others doing the same and just painting their house after a month in an attempt to bypass the tradition. Her in-laws agree and she does this for the rest of her two pregnancies as well. This provides her with some relief.

### **Acceptance of the Practice with Age: Geeta as an Old Woman**

Geeta is in her early 40s now. She has had 3 children who are all grown up now. Two of them are girls who have just gotten their periods recently. She sends them to the muttutharai fearing any harm to her family and to avoid any comments from others in the village. She had observed how some of the older women catch hold of the young girls and ask them why they hadn't been coming to the muttutharai since almost a month. There was always at least one person monitoring if everyone was coming to the muttutharai or not. She had gotten used to going to the Muttutharai but would worry that her husband or children had to manage things at the household on their own now. She would sometimes have to wait a long time to receive food and water from them. But she always made sure that her girls received the food on time. She would commiserate with other mothers that they wish they would not have to send their daughters to the muttutharai. But she knew she could not differ from the village tradition. Her mother-in-law and mother were also involved in ensuring that her daughters were going to the muttutharai. She would respond to her daughters' questions with the same answers that she used to get and would tell them to stay there even if they cried or protested staying there. She is in her 60s now. Her children are all married now. She got her menopause and does not have to stay in the muttutharai anymore. But she keeps an eye out to ensure that her daughters, daughter-in-law and granddaughters are all



going to the Muttutharai. With age, her fears of incurring God's wrath have increased, so, she plays a more active role in enforcing the Muttutharai practice.

These above vignettes showcase how the process of socialisation is one way of building acceptability for the practice. This means that seclusion during menstruation becomes a normal way of experiencing menstruation as a woman. The below section maps these findings to the issues of caste, religion and gender.

## **Analysis and Discussion of the Findings**

An analysis of the thematic findings reveals how there is a complex interplay between the social control over women, how it links to religious beliefs held by the community and how it reflects a tension between culture and modernity. This section seeks to highlight the particular factors that have shaped the stringency of the practice, what it says about caste affecting enforcement and the need to reconcile tradition with modern constitutional values.

### **Stringency of the Practice**

The stringency of the Muttutharai practice which means the degree to which it is enforced, appears to be shaped primarily by two aspects:

#### **Age and Stringency**

As has been pointed out before, the younger girls seem to subject to stricter enforcement of the practice. This appears to be because of prevailing beliefs that view menarche as especially impure and inviting greater social control at the start of menstruation. This is powerfully

illustrated in the composite narrative, where the experience at menarche is marked by a mandatory one-month seclusion. Conversely, the only non-adherents in the village belong to the 32-41 age group. One respondent explained her non-adherence as a practical necessity, such as having to stay home to care for her young children while her husband was away. Another respondent mentioned that there is no one to take care of her household when she is away, as both her children and husband are away for education and work, respectively. It is only such practical reasons, with the approval of the family members that have made it okay for them to stay in the house instead of going to the Muttutharai. Even then, they practice seclusion by either staying in the veranda or in one corner of the house.

### Family's Religious Beliefs and Stringency

The data also seems to indicate that the closer one is situated to the temple, the stricter the enforcement of the practice by the woman and her family so as to not incur God's wrath. The spatial manoeuvring that women must do to avoid crossing the temple adds an extra layer of seclusion.

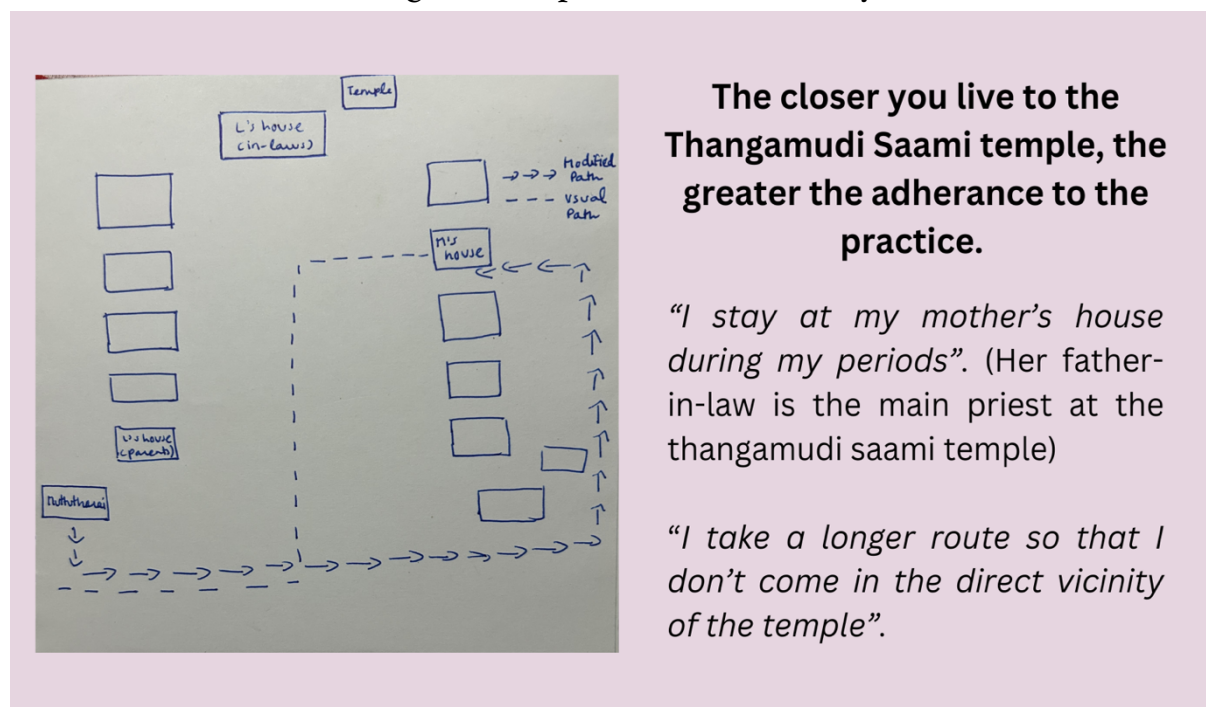


Fig:2

## **The Spectre of Caste**

The linkage between caste and gender manifesting in the form of a double discrimination that is experienced by the women in Govindanallur requires further analysis. In contrast to patterns where higher caste women are seen to follow stricter menstrual restrictions, it is Dalit women in Govindanallur who adhere to the practice. This inversion is curious and makes one question if this is a case of Sanskritisation where practices or rituals of the upper caste communities are adopted or if it is about imposing intra-caste control on the lines of gender.

In such a context, Dr. Ambedkar's notion of graded inequality sheds some light. He had explained how caste operates through layers and that even among the marginalized, certain norms persist to maintain hierarchical order. The Muttutharai hut itself functions as a physical manifestation. The hut symbolises the intersectional burden faced by women in Govindanallur. The practice seems to reveal a caste hierarchy where a Dalit woman not only bears the brunt of being lower caste but also the gender-based stigma attached to a menstruating woman.

## **Clash of Modernity and Tradition - Relation to the Sabarimala Judgement**

The justification of the muttutharai practice and even the Chaupadi practice in Nepal involves mention of terms such as "(im)purity" and "pollution". This has been highlighted by Mary Douglas in her work on how such beliefs shape practices. Such an emphasis rooted in culture and religion goes against modern constitutional values of equality. The Sabarimala judgement powerfully categorised menstruation-related exclusion as a form of untouchability taking an expansive reading of Article

17. This opened space for reinterpreting such customs as unconstitutional. The idea of transformative constitutionalism further supports challenging discriminatory social norms by not just law but also by centering dignity and equality.

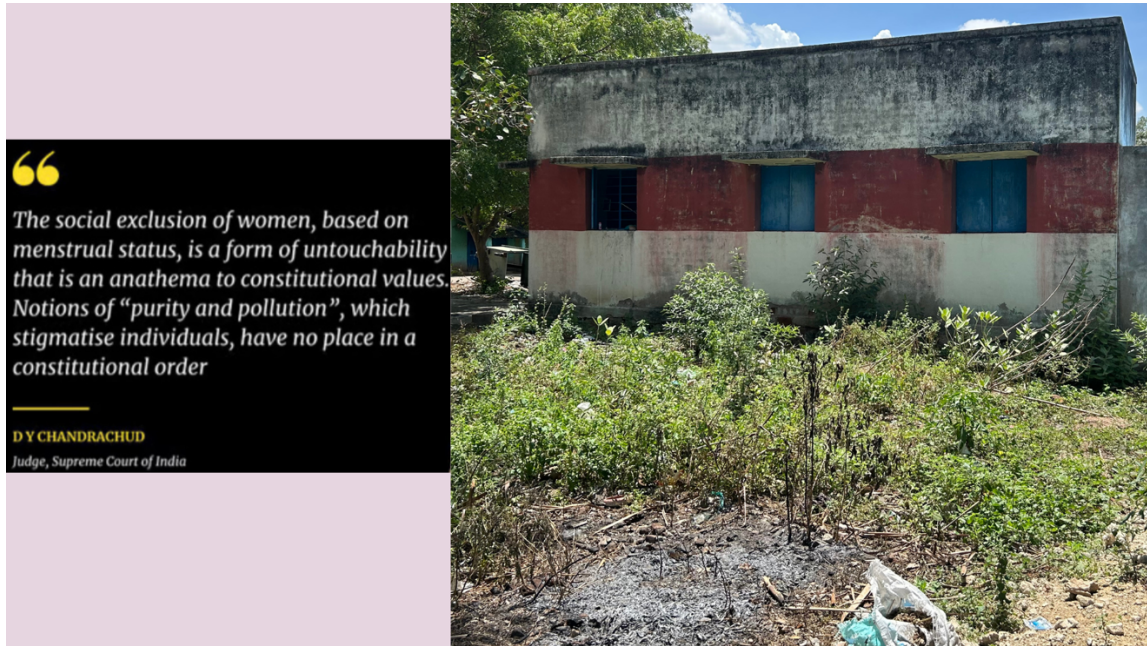


Fig:3

This is important even in the case of Govindanallur. While the practice in itself can be seen as harmful to women, change must be demanded from within the community, keeping in mind the rights of the community to hold on to their own traditional beliefs. A fine line must be drawn to address the tension between the need for modern constitutional values and a community's socio-religious beliefs.

## Stakeholder Mapping

In a culturally sensitive context where menstrual stigma stems out of a socio-religious practice, policy interventions must be carefully planned, requiring an understanding of the stakeholders to be consulted.

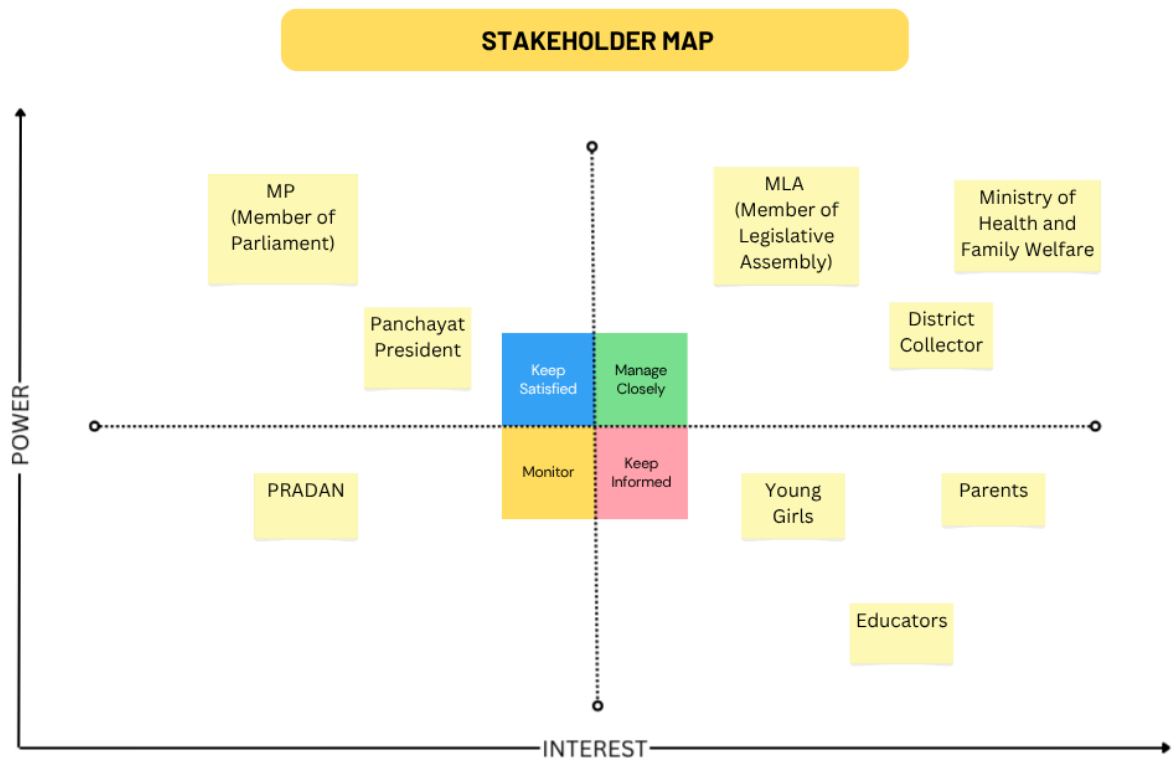


Fig:4

## Policy Problem

Having considered the several themes and tensions inherent in the understanding of this practice, the younger girls are more likely to be influenced by any policy interventions and their perception of the practice as a burden will mean that they will be more receptive to any possibilities for change. So, the policy recommendations cater to the adolescent category in particular. The Muttutharai practice in Govindanallur village of Virudhunagar forces menstruating girls to isolate themselves, impacting their wellbeing. The girls grow up being exposed to negative social norms surrounding menstruation and lack access to accurate information. There is a need for urgent policy intervention to enable menstrual health awareness and address the stigma surrounding menstruation.

As per National Family Health Survey (NFHS)-5, it has been found that 98% of women aged 15-24 years make use of hygienic menstrual products. This is commendable and highlights how the Tamil Nadu government's focus on ensuring Menstrual Hygiene Management (MHM) has proved to be successful. However, it has not meant the elimination of exclusionary practices such as the Muttutharai practice. In fact, the officials seemed to be unaware of such a practice. As scholar Chris Bobel (2019) argues, the MHM movement can inadvertently prioritize 'technological fixes' that teach girls to manage and conceal their bodies, rather than dismantling the underlying social stigma that frames menstruation as impure. This critique is highly relevant in Govindanallur, where the wide availability of pads has clearly not meant an end of the Muttutharai practice. The other MHM components such as ensuring accurate and timely knowledge and working towards positive social norms remain to be adequately addressed. It has been found that inadequate knowledge and understanding of menstruation can be harmful to adolescents' mental and physical health (Sychareun et al. 2020). This means that the focus in Govindanallur should now be to focus on the unaddressed aspects of ensuring accurate and timely knowledge and working towards positive social norms.

### **Policy Alternatives**

Given the need to create awareness and target the adoption of positive social norms, the following seems to be the potential policy recommendations that can be applied:

### **Solution 1: Prohibition of Harmful Menstrual Seclusion Practices by the Tamil Nadu State Government**

This would mean that there is a ban on such a practice, anyone found promoting the practice or coercing someone to adhere to the practice could be penalised.

### **Solution 2: Introduce Menstrual Health Awareness sessions alongside Anemia Prevention sessions conducted by PRADAN (NGO) under the Aspirational Districts Programme**

1. Efforts by PRADAN to spread awareness on anaemia prevention had started under the ambit of the Aspirational Districts Programme. Given that a knowledge sharing network is already in place using a local educator, the menstrual health awareness component can be incorporated through the use of menstrual health booklets.
2. Since there is a demonstrated need for accurate information on the biology of menstruation and on MHM to dispel myths and misinformation (McCammon et al. 2020), the booklet written in Tamil should contain factual information alongside practical day-to-day ways of addressing menstruation-related discomfort.
3. Once these sessions have a good uptake, it is also important to include young boys into such sessions so that the selective science knowledge of menstruation as bad blood coming out is replaced with accurate and scientific information about menstruation as a normal physiological process.

### **Solution 3: Add questions on Menstrual Hygiene Awareness Sessions to the NFHS**

Currently, the National Family Health Survey (NFHS) only gathers data on whether hygienic menstrual products are being used by women.

Adding a question on whether they have attended any Menstrual Hygiene Awareness sessions will aid in getting a clear sense of the extent to which stigma and lack of awareness is being unaddressed.

To evaluate what would be the most suitable policy intervention for Govindanallur, a Multi-Criteria Analysis (MCA) framework has been applied. Such a framework would compare all the three recommendations across key dimensions such as political feasibility, social impact, cost effectiveness, operational feasibility, sustainability, and scalability. The mapping is determined based on analysis of existing literature, stakeholder considerations and feasibility given the rootedness of the practice. Within the Menstrual Health and Hygiene (MHH) field, there has been an attempt towards having rigorous assessments of interventions so that there is a stronger evidence base for policy and investment. As Sommer et al. (2020) argue, improved measurement is essential for governments and donors to “invest resources with confidence.”

<b>Criteria</b>	<b>Solution 1: Legislative Prohibition of Harmful Menstrual Seclusion Practices</b>	<b>Solution 2: Menstrual Health Awareness via PRADAN</b>	<b>Solution 3: Add Questions to NFHS</b>
Political Feasibility	Low	High	Medium
Social Impact	High	High	Low
Cost Effectiveness	Medium	High	Medium



Operational Feasibility	Low	High	Medium
Sustainability	Low	High	Medium
Scalability	Low	Medium	Medium

Table 1: Application of Multi-Criteria Analysis (MCA) Framework

## Policy Recommendation

**Having applied the MCA framework, solution 2 emerges as the most suitable option that can be adopted in Govindanallur since it is:**

1. Politically and operationally feasible alongside being cost-effective because it makes use of the existing programme structure, funds and networks that have been set up as part of the Aspirational Districts Programme.
2. Socially impactful as these sessions would allow for any misinformation to be corrected at the root, builds support networks outside of the immediate family and would influence the proliferation of positive social norms surrounding menstruation,
3. Sustainable over the long term, as it utilises existing funding provided to the NGO from CSR partners who contribute to the Aspirational Districts Programme.
4. It has medium scalability because the specific context of where such an intervention has to be implemented would have to be taken into account.

Unlike bans that could face resistance or backlash from the community, the approach of introducing Menstrual Health Awareness sessions alongside Anaemia Prevention sessions conducted by PRADAN (NGO) under the Aspirational Districts Programme fosters bottom-up rather than top-down change by making use of education, dialogue, and trust-building.

## Conclusion

The Muttutharai practice in Govindanallur reflects how practices that are deeply rooted and tied to a community's socio-religious norms can have a powerful influence on the lives of women. In Govindanallur, this practice not only restricts their autonomy but also hampers the quality of their health and life under the guise of tradition. 63.33% of the respondents themselves articulate how they find the practice to be burdensome. However, 98% of the respondents still adhere to the practice. The reason for such a high degree of compliance seems to be narratives of fearing divine wrath and being monitored and pressured by the community to stick to the defined norms. This pressure to comply starts as soon as the girl gets her menarche and it seems to be passed down by women generation after generation. Even though there is some voicing out of frustrations by the younger girls, it seems to be that they eventually become the enforcers of the practice itself as they age. There is a caste element that comes into play given that the practice is strictly adhered to only by the Dalit women of the village. The OBC women who live in the next street do not undergo such a seclusion during menstruation.

Given such a context, it is important that any policy intervention preemptively anticipates the fallouts from modifying or tampering with such belief systems. This means that intervention needs to strategically take place in a manner that is context-sensitive. As highlighted in the vignettes, targeting younger women who are the only ones expressing some sort of resistance is a critical target group. This is also why Solution-2 would be most suitable since it would target female adolescents who are more likely to be receptive to change than their older female relatives. The sessions led by the NGO would provide factual information to the girls, involve their immediate mothers eventually and then lead to slow but incremental

change over time by instituting positive social norms. It is important that such an intervention is rooted in empathy, evidence, and community dialogue so that the delicate balance between cultural respect and constitutional rights is ensured.

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