



The Menstrual Practice Needs Scale (MPNS-36) Interview Version

You do not need permission to use the MPNS, as long as you cite the scale in your report.
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During your last menstrual period ...

	Never	Sometimes	Often	Always	
1	Were your menstrual materials comfortable?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
2	Did you have enough of your menstrual materials to change them as often as you wanted to?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
3	Were you satisfied with the cleanliness of your menstrual materials?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
4	Could you get more of your menstrual materials <u>when</u> you needed to?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
5	Were you worried that your menstrual materials would allow blood to pass through to your outer garments?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
6	Were you worried that your menstrual materials would move from place while you were wearing them?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
7	Were you worried about how you would get more of your menstrual material if you ran out? (eg., if you needed to purchase materials, retrieve materials from home, or ask someone for materials)	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
8	Did you feel comfortable carrying spare menstrual materials with you outside of your home?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
9	Did you feel comfortable carrying menstrual materials to the place where you changed them?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
10	Did you feel comfortable storing [keeping] your leftover or cleaned menstrual materials until your next period?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
11	Were you able to wash your hands <u>when</u> you wanted to?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
12	Were you able to immediately dispose of your used menstrual materials?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
13	Were you able to dispose of your used materials in the way that you wanted to?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
14	Were you worried about where to dispose of your used menstrual materials?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
15	Were you concerned that others would see your used menstrual materials in the place you disposed of them?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

Next, you will read a set of statements asking about your experiences menstruating at home. You will then read the same statements about your experience at school [work/away from home]. Please think about your experience in each location.

At home during your last menstrual period ...

	Never	Sometimes	Often	Always	
16	When at home, were you able to change your menstrual materials <u>when</u> you wanted to?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

At home during your last menstrual period ...

	Never	Sometimes	Often	Always
17 When at home, were you satisfied with the place you used to change your menstrual materials?	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
18 When at home, did you have a clean place to change your menstrual materials?	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
19 When at home, were you worried that you would not be able to change your menstrual materials <u>when</u> you needed to?	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
20 When at home, were you worried that someone would see you while you were changing your menstrual materials?	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
21 When at home, were you worried that <u>someone</u> would harm you while you were changing your menstrual materials?	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>
22 When at home, were you worried that <u>something else</u> would harm you while you were changing your menstrual materials? (e.g., animals, insects, unsafe structure)	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>

At school [work/away from home] during your last menstrual period ...

	Never	Sometimes	Often	Always	N/A
23 When at school, were you able to change your menstrual materials <u>when</u> you wanted to?	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
24 When at school, were you satisfied with the places available at your school/workplace to change your menstrual materials? (eg., it had what you needed)	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
25 When at school, did you have a clean place to change your menstrual materials?	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
26 When at school, were you worried that your would not be able to change your menstrual materials when you needed to?	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
27 When at school, were you worried that someone would see you while you were changing your menstrual materials?	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
28 When at school, were you worried that <u>someone</u> would harm you while you were changing your menstrual materials?	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

If you washed and reused any materials during your last period, please answer these items. During your last menstrual period...

	Never	Sometimes	Often	Always	N/A
29 Did you have enough water to soak or wash your menstrual material?	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
30 Did you have access to a basin to soak or wash your menstrual materials whenever you needed it?	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
31 Were you able to wash your menstrual materials when you wanted to?	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
32 Did you have enough soap (detergent, laundry powder, detol) to wash your menstrual materials?	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

33	Were you able to dry your materials when you wanted to?	Never	Sometimes	Often	Always	N/A
34	Were you worried that someone would see you while you were washing your menstrual materials?	Never	Sometimes	Often	Always	N/A
35	Were you worried that your menstrual materials would not be dry when you needed them?	Never	Sometimes	Often	Always	N/A
36	Were you worried that others would see your menstrual materials while they were drying?	Never	Sometimes	Often	Always	N/A



MPNS-36 Guidance

Response options

- It may be helpful to substitute “Sometimes” for “Less than half the time” and “Often” for “More than half the time”.
- A short pre-survey activity is available to familiarise respondents with the response options. It is highly recommended to do the pre-activity before conducting the MPNS. Available on the website [Training](#) page.

Filtering and eligibility

Not all MPNS items may be relevant to all respondents. Applicable items may vary based on an individuals’ menstrual materials (eg., if they were reused), or locations where menstruation occurred. The scale can be completed more easily if respondents are only presented the items that are relevant to them. This can be done using prior survey questions to test eligibility and filter MPNS items.

The provided eligibility questions work when the survey is delivered electronically, or by and enumerator. “Not applicable” may be incorporated as a response option if filtering questions are not used, or if a respondent is self-completing a paper survey.

Disposal	
Did you dispose of (throw away) any menstrual materials during your last period? *note: includes single-use materials and reusable materials at the end of their life.	<ul style="list-style-type: none"> • Yes • No [If No, the respondent should skip MPNS12-15]
School attendance	
Did you attend any school/work during your menstrual period in the past six months?	<ul style="list-style-type: none"> • Yes [skip next question] • No [ask next question]
If no, “Did you attend any school/work during your last period in the past three or six months?”	<ul style="list-style-type: none"> • Yes, 3 or 6 months • No [If no, respondent should skip MPNS items 23-28]
Changing at school/work/away from home	
The last time you attended school during your menstrual period, did you ever change your menstrual materials at school? * note this question should only be asked of respondents who attended school during menstruation in the past 6-months.	<ul style="list-style-type: none"> • Yes • No [If No, the respondent should skip or respond ‘not applicable’ to MPNS 26-28]
Reusing	
Did you wash and reuse any menstrual materials during your last period?	<ul style="list-style-type: none"> • Yes • No [If No, the respondent should not answer MPNS 29 -36]



MPNS-36 Guidance

Scoring

The table to the right shows the score for each item. **Note** that the scale includes reverse scoring for some sub-scales. Use the table and the information below to calculate the total score, or individual sub-scale scores.

Total Score:

The MPNS-36 total score is calculated as the mean (average) across all answered items. Add up the points then divide by the number of items answered.

Sub-scale score:

Individual sub-scale scores can also be calculated for the MPNS-36, using the same method as the total score. Add the points for an individual sub-scale, and divide by the number of answered items in that sub-scale (ie: material and reliability concerns has 3 items if a respondent has not missed any items).

For more information about scoring the MPNS, including handling missing data, interpreting scores, and generating categories of need using thresholds, please see the [MPNS User Guide](#).

Never Sometimes Often Always

	Never	Sometimes	Often	Always
Material and home environment needs Mean score of items				
MPNS Item 1	0	1	2	3
MPNS Item 2	0	1	2	3
MPNS Item 3	0	1	2	3
MPNS Item 4	0	1	2	3
MPNS Item 10	0	1	2	3
MPNS Item 11	0	1	2	3
MPNS Item 12	0	1	2	3
MPNS Item 13	0	1	2	3
MPNS Item 16	0	1	2	3
MPNS Item 17	0	1	2	3
MPNS Item 18	0	1	2	3
Transport and school environment needs Mean score of items				
MPNS Item 8	0	1	2	3
MPNS Item 9	0	1	2	3
MPNS Item 23	0	1	2	3
MPNS Item 24	0	1	2	3
MPNS Item 25	0	1	2	3
Material and reliability concerns Mean score of items				
MPNS Item 5	3	2	1	0
MPNS Item 6	3	2	1	0
MPNS Item 7	3	2	1	0
Change and disposal insecurity Mean score of items				
MPNS Item 14	3	2	1	0
MPNS Item 15	3	2	1	0
MPNS Item 19	3	2	1	0
MPNS Item 20	3	2	1	0
MPNS Item 21	3	2	1	0
MPNS Item 22	3	2	1	0
MPNS Item 26	3	2	1	0
MPNS Item 27	3	2	1	0
MPNS Item 28	3	2	1	0
<i>Those reusing materials</i>				
Reuse needs Mean score of items				
MPNS Item 29	0	1	2	3
MPNS Item 30	0	1	2	3
MPNS Item 31	0	1	2	3
MPNS Item 32	0	1	2	3
MPNS Item 33	0	1	2	3
Reuse insecurity Mean score of items				
MPNS Item 34	3	2	1	0
MPNS Item 35	3	2	1	0
MPNS Item 36	3	2	1	0

Total score

Mean score of all answered items



Scoring for adult populations

The table to the right shows the score for each item. **Note** that the scale includes reverse scoring for some sub-scales. Use the table and the information below to calculate the total score, or individual sub-scale scores.

Total Score:

The MPNS-adult version contains 28 items). The total score is calculated as the mean (average) across all answered items. Add up the points then divide by the number of items answered.

Sub-scale score:

Individual sub-scale scores can also be calculated for the MPNS-adult version, using the same method as the total score. Add the points for an individual sub-scale, and divide by the number of answered items in that sub-scale (ie: material and reliability concerns has 3 items if a respondent has not missed any items).

For more information about scoring the MPNS, including handling missing data, interpreting scores, and generating categories of need using thresholds, please see the [MPNS User Guide](#).

	Never	Sometimes	Often	Always
Material and home environment needs	Mean score of items			
MPNS Item 1	0	1	2	3
MPNS Item 2	0	1	2	3
MPNS Item 3	0	1	2	3
MPNS Item 4	0	1	2	3
MPNS Item 10	0	1	2	3
MPNS Item 17	0	1	2	3
Material and home environment insecurity	Mean score of items			
MPNS Item 5	3	2	1	0
MPNS Item 6	3	2	1	0
MPNS Item 19	3	2	1	0
MPNS Item 20	3	2	1	0
MPNS Item 21	3	2	1	0
MPNS Item 22	3	2	1	0
Disposal needs	Mean score of items			
MPNS Item 12	0	1	2	3
MPNS Item 14	3	2	1	0
MPNS Item 15	3	2	1	0
Work practice needs	Mean score of items			
MPNS Item 9	0	1	2	3
MPNS Item 23	0	1	2	3
MPNS Item 24	0	1	2	3
MPNS Item 26	3	2	1	0
MPNS Item 27	3	2	1	0
MPNS Item 28	3	2	1	0
<i>Those reusing materials</i>	Mean score of items			
Reuse needs	Mean score of items			
MPNS Item 29	0	1	2	3
MPNS Item 31	0	1	2	3
MPNS Item 32	0	1	2	3
MPNS Item 33	0	1	2	3
Reuse insecurity	Mean score of items			
MPNS Item 34	3	2	1	0
MPNS Item 35	3	2	1	0
MPNS Item 36	3	2	1	0
Total score	Mean score of all answered items			