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Barriers to menstrual hygiene management in school environment among adolescent girls of Tatopani Rural Municipality, Jumla: A cross-sectional study

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Abstract

Background: Adolescence, spanning the ages of 10 to 19, is marked by rapid physical, psychological, social, and biological changes. Despite its importance, menstrual hygiene remains a neglected issue. In many developing countries, adolescent girls face numerous of challenges in managing their menstrual hygiene, especially in school environments. These challenges include inadequate access to water and sanitation facilities, a lack of privacy, teasing by boys, insufficient menstrual hygiene education and products, and social stigma along with cultural restrictions on activities. This study aims to explore the barriers to menstrual hygiene management in school environment among adolescent girls in a rural municipality in Jumla,

Methods: A cross-sectional study was conducted in public schools located in Tatopani rural municipality, Jumla. Simple random sampling method was used to select the respondents. Data collection was carried out using a semi-structured questionnaire through the self-administered technique. The study population consisted of adolescent girls in grades nine and ten, with a total sample size of 192 participants.

Results: The study revealed that the majority of participants were aged between 13 to 15 years old, with 67.7% feeling uncomfortable managing their menstrual cycle at school. While most respondents had access to gender-separated toilets, only 38.0% had soap available for hand washing, and 88.5% faced poor lighting conditions. More than half of the students reported a lack of private spaces to address menstruation needs. Disposal practices varied, with 41.1% using dustbins, 40.1% utilizing rivers, and 16.1% resorting to toilet pans. Merely 15.1% had access to a sick room for resting. A significant number of students mentioned taking medication for menstrual pain, and 32.3% missed school during their cycle, citing reasons such as staining clothes or cultural restrictions.

Conclusions: The study identified several barriers to menstrual hygiene management among adolescent girls in a rural school setting, including discomfort, lack of essential facilities, unsanitary disposal methods, and missed school days. Raising awareness, improving infrastructure, educating on proper disposal, implementing policies, and community campaigns to enhance menstrual hygiene management and create a supportive school environment

Keywords: Adolescent; Barriers; Menstrual; Hygiene; Management; Practice; Discomfort; Jumla

1. Introduction

Adolescence, from ages 10 to 19, marks a crucial period of development, particularly with the beginning of menstruation. Despite being a natural process, menstruation is often stigmatized, impacting the adoption of proper menstrual hygiene management practices influenced by various societal, cultural, educational, and economic factors. In

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numerous developing nations, menstrual taboos restrict girls' access to essential information and support, hindering their ability to manage menstruation effectively.^{1,2,3} In many developing nations, menstrual taboos restrict girls' access to essential information and support from parents and teachers, hindering their ability to manage menstruation effectively.^{4,5}

In low- and middle-income countries, adolescent girls face challenges managing menstruation at school due to inadequate facilities, teasing, and stigma along with cultural restrictions.⁶ There are about 1.2 billion adolescents in the world and they have a wide range of interests, demands and worries, despite awareness of adolescent reproductive health needs, menstruation remains taboo.⁷ UNICEF's Factsheet reveals that 15% of girls in Burkina Faso, 20%, in the Ivory Coast and in Nigeria 23% miss school due to challenges in managing menstrual hygiene.⁸ According to the 2018 ASER study, 11.7% of schools lack separate restrooms for girls, while 22.8% have non-functional toilets, significantly affecting girls' education.^{9,10} In Nepal, out of 29,607 public schools, 82% have inadequate sanitation facilities, and 18% have lack any sanitation facilities at all. According to the MICS 2019 report, 9.4% of women reported missing social activities due to their menstrual periods.¹¹ approximately one-third of girls faced difficulties in washing, disposing of them discreetly, and carrying or storing them, often fearing ridicule from male peers. These challenges significantly impede girls' ability to effectively manage their menstrual hygiene.¹²

2. Methods

A school-based cross-sectional study was conducted from May to November 2022 in government schools of Tatopani Rural Municipality, Jumla, focusing on adolescent girls aged 10-19 in grades nine and ten. The study excluded girls who were absent during data collection or had not experienced menarche. The sample size was calculated using a statistical formula, resulting in a final sample of 192 participants after accounting for nonresponse.

Data was collected through a pre-designed and pre-tested questionnaire, with informed consent obtained from participants. A self-administered technique was employed, and facilitators were available to assist with any questions. Each questionnaire was coded to ensure confidentiality and anonymity. The study's validity was supported by a review of related literature, and reliability was confirmed through pre-testing on a similar population.

Data analysis was performed using Epi-Data version 3.1 and SPSS version 16, employing descriptive statistics and chisquare tests to explore associations between variables. Ethical approval was granted by the institutional review committees, and strict measures were taken to maintain confidentiality and minimize disruption during the study.

3. Results

 Table 1 Socio- demographic characteristics of the respondents (N=192)

| Variables | Frequency | Percentage |
|--------------------|-----------|------------|
| Age groups (years) | | |
| 13-15 | 107 | 55.7 |
| 16-19 | 85 | 44.3 |
| Family type | | |
| Nuclear | 75 | 39.1 |
| Joint | 109 | 58.8 |
| Extended | 8 | 4.2 |
| Ethnicity | | |
| Brahmin | 8 | 4.2 |
| Chhetri | 116 | 60.4 |
| Dalit | 66 | 34.4 |
| Janjati | 2 | 1.0 |
| Religion | | |

| Hindu | 185 | 96.4 |
|-----------------------|-----|------|
| Christian | 7 | 3.6 |
| Mother education | | |
| Cannot read and write | 143 | 74.5 |
| Can read and write | 43 | 22.5 |
| Primary level | 3 | 1.6 |
| Secondary level | 3 | 1.6 |
| Father education | | |
| Cannot read and write | 78 | 40.6 |
| Can read and write | 69 | 35.9 |
| Primary level | 24 | 12.5 |
| Secondary level | 14 | 7.3 |
| Bachelor | 2 | 1.0 |
| Master | 5 | 2.6 |
| Mother occupation | | |
| Housework | 148 | 77.1 |
| Business | 3 | 1.6 |
| Job | 5 | 2.6 |
| Agriculture | 35 | 18.2 |
| Daily wages | 1 | 0.5 |
| Father occupation | | |
| Business | 45 | 23.4 |
| Job | 20 | 10.4 |
| Agriculture | 85 | 44.3 |
| Daily wages | 24 | 12.5 |
| Foreign employment | 18 | 9.4 |
| Family monthly income | e | |
| <10,000 | 94 | 49.0 |
| 10,000-20,000 | 41 | 21.4 |
| 20,000-30,000 | 10 | 5.2 |
| >30,000 | 47 | 24.5 |

Table 1 shows that most students (55.7%) are aged 13-15, with joint families being the most common (58.8%). Chhetri is the largest ethnic group (60.4%), and 96.4% of students were Hindu. Majority (74.5%) of the respondent's mothers have no formal education, while fathers primarily work in agriculture (44.3%). Regarding family income majority (49%) had less than 10000 per month.

Table 2 Hygiene practice during menstruation

| Variables | Frequency | Percentage | |
|---|---------------------------------------|------------|--|
| Use of pad (n=192) | | | |
| Sanitary | 62 | 32.3 | |
| Cloth | 51 | 26.6 | |
| Both | 29 | 41.1 | |
| Reason for not using | on for not using sanitary pad (n=130) | | |
| Costly | 57 | 43.8 | |
| Easily not available | 60 | 46.2 | |
| Difficult to dispose | 3 | 2.3 | |
| Difficult to reuse | 10 | 7.7 | |
| Reuse of reusable cloth (n=120) | | | |
| Yes | 103 | 79.2 | |
| No | 27 | 20.8 | |
| Clean of external genital (n=192) | | | |
| Yes | 191 | 99.5 | |
| No | 1 | 0.5 | |
| Use to clean external genitalia (n=191) | | | |
| Water only | 83 | 43.5 | |
| Soap and water | 108 | 56.5 | |
| Bathing frequency (n=192) | | | |
| Daily | 111 | 57.8 | |
| Third day | 74 | 38.5 | |
| Fourth day | 7 | 3.6 | |

Table 2 indicate Regarding Hygiene practice during menstruation and the finding shows that, a significant portion used both sanitary pads and reusable cloth (41.1%) during menstruation. Among those not using pads, high cost (43.8%) and unavailability (46.2%) were the main reasons. Most of the girls reused the cloth (79.2%). Almost all girls maintained clean external genitalia (99.5%) during menstruation, with the majority using soap and water (56.5%). A majority bathed daily (57.8%) during menstruation, while a some percentage (38.8%) bathed every third day. Less participants (3.6%) bathed on the fourth day of menstruation.

Table 3 Menstrual Hygiene Management in school

| Variables | Frequency | Percentage |
|--|-----------|------------|
| Uncomfortable feel in school during menstruation (n=192) | | |
| Yes | 130 | 67.7 |
| No | 62 | 32.3 |
| Gender separated toilet (n=192) | | |
| Yes | 161 | 83.9 |

| No | 31 | 16.1 | |
|--|------|------|--|
| Condition of toilet (n=192) | | | |
| Clean | 109 | 56.8 | |
| Fairly clean | 40 | 20.8 | |
| Satisfactory | 23 | 12.0 | |
| Dirty | 20 | 10.4 | |
| Water availability (n=192) | | | |
| Yes | 162 | 84.4 | |
| No | 30 | 15.6 | |
| Availability of soap (n=192) | | | |
| Yes | 73 | 38.0 | |
| No | 119 | 62.0 | |
| Lock condition (n=192) | · | | |
| Good | 130 | 67.7 | |
| Bad | 62 | 32.3 | |
| Light condition (n=192) | · | | |
| Good | 22 | 11.5 | |
| Bad | 170 | 88.5 | |
| Availability of mirror (n=192) | · | · | |
| Yes | 6 | 3.1 | |
| No | 186 | 96.9 | |
| Private place to manage menstruation (n= | 192) | | |
| Yes | 84 | 43.8 | |
| No | 108 | 56.3 | |
| School provides sanitary pad (n=192) | · | | |
| Yes | 180 | 93.8 | |
| No | 12 | 6.3 | |
| Absorbent change in school (n=192) | | | |
| Yes | 185 | 96.4 | |
| No | 7 | 3.6 | |
| Frequency of absorbent change (n=192) | | | |
| Once a day | 3 | 1.6 | |
| Twice a day | 69 | 35.9 | |
| Thrice a day | 97 | 50.5 | |
| Fourth a day | 23 | 12.0 | |
| Dispose of pad (n=192) | | | |
| Dustbin | 79 | 41.1 | |
| Haphazardly throw | 5 | 2.6 | |

| Throw in toilet pan | 31 | 16.1 |
|--|-----|------|
| River | 77 | 40.1 |
| Rest room for rest (n=192) | | |
| Yes | 29 | 15.1 |
| No | 163 | 84.9 |
| Pain manages at school (n=192) | | |
| Medicine | 134 | 69.8 |
| Exercise | 2 | 1.0 |
| Drink hot water | 19 | 9.9 |
| Rest | 37 | 19.3 |
| School miss during menstruation (n=192) | | |
| Yes | 62 | 32.3 |
| No | 130 | 67.7 |
| Reason for school miss (n=62) | | |
| Afraid of staining on cloth | 20 | 32.3 |
| Lack of private space to manage menstruation | 8 | 12.9 |
| Pain | 8 | 12.9 |
| lack of disposal facilities | 1 | 1.6 |
| parents tell not to go to school | 7 | 11.3 |
| Cultural restriction | 18 | 29.0 |
| Teacher support (n=192) | | |
| Yes | 127 | 66.1 |
| No | 65 | 33.9 |

Table 3 Indicate regarding menstrual hygiene management in school, a substantial percentage of students felt uncomfortable (67.7%) during menstruation at school. Most students revealed that they had access to gender-separated toilets (83.9%), although the condition of toilet amenities such as locks (32.3%), lighting (88.5%), and mirrors (96.9%) was generally poor. A significant percentage did not have access to soap (62%) and private spaces (56.3%) for managing menstruation. Most reported their schools providing sanitary pads (93.8%). Many students disposed their pads inappropriately (58.8%) with a significant portion being disposed of in rivers (40.1%). Majority of girls reported that there was unavailability of restrooms (84.9%) for resting during menstruation. Many students resorted to medication (69.8%) for pain management, and a significant percentage of students missed school (32.3%) during menstruation, citing reasons such as fear of staining clothes, cultural restrictions, and lack of proper facilities. Many students reported receiving support from their teachers (66.1%) during their menstrual cycle but remaining did not get any support.

Table 4 indicates the Association between Uncomfortable feel in school during menstruation with different variables. The study findings suggest that various factors in the school environment can contribute to barriers in menstruation hygiene management among adolescent school girls. While the availability of gender-separated toilets, toilet conditions, and lighting did not show significant associations with discomfort during menstruation, the availability of soap and water for hand washing and the condition of the toilet lock were significantly linked to higher levels of discomfort. Additionally, the study indicated that the absence of a private place for managing menstruation and the disposal of pads did not significantly impact discomfort levels. However, missing school during menstruation was significantly associated with discomfort, emphasizing the need for comprehensive support systems to address the challenges faced by menstruating students.

Table 4 Association between Uncomfortable feel in school during menstruation with different variables

| Variables | Feel uncomfortable | Chi-square value | P-valu | ıe |
|--------------------------------------|------------------------|------------------|--------|-------|
| | Yes | No | | |
| Gender separated toi | let | | | |
| Yes | 111(68.9%) | 50(31.1%) | 0.696 | 0.404 |
| No | 19(61.3%) | 12(38.7%) | | |
| Condition of toilet | | | | |
| Clean | 76(69.7%) | 33(30.3%) | 0.469 | 0.493 |
| Not-clean | 54(65.1%) | 29(34.9%) | | |
| Availability of soap a | and water | | | |
| Yes | 42(57.5%) | 31(42.5%) | 5.576 | 0.018 |
| No | 88(73.9%) | 31(26.%) | | |
| Lock condition in toil | let | | | |
| Yes | 80(61.5%) | 50(38.5%) | 7.009 | 0.008 |
| No | 50(80.6%) | 12(19.4%) | | |
| Light in toilet | | | | |
| Yes | 13(59.1%) | 9(40.9%) | 0.844 | 0.358 |
| No | 117(68.8%) | 53(31.2%) | | |
| Private place to manage menstruation | | | | |
| Yes | 61(72.6%) | 23(27.4%) | 1.647 | 0.199 |
| No | 69(63.9%) | 39(36.1%) | | |
| Pad dispose | | | | |
| Dustbin | 57(72.2%) | 22(27.8%) | 1.212 | 0.271 |
| Improper Dispose | 73(64.6%) | 40(35.4%) | | |
| Sick room for rest | | | | |
| Yes | 18(62.1%) | 11(37.9%) | 0.497 | 0.481 |
| No | 112(68.7%) | 51(31.3%) |] | |
| Reason for school mi | ss during menstruation | n | | |
| Cultural Restriction | 9(47.4%) | 10(52.6%) | 3.990 | 0.046 |
| School Environment | 121(69.9%) | 52(30.1%) | | |

4. Discussion

This study investigates the barriers to menstrual hygiene management in the school environment among adolescent school girls. Practices and various barriers regarding menstrual hygiene management have been burning issues in today's world. Although many school health programs conducted among school periphery girls still have to face their own challenges and limitations regarding menstruation.²⁴

In this study, most of the participant's parents were uneducated with low family income, and all participants preferred using disposable sanitary pads, though 41.1% used cloths as an alternative due to the high cost and unavailability of sanitary pads. Similar findings were reported in a study conducted by Singh et al. among adolescent girls of private schools, where girls used cloths as an alternative while at home due to family practices and cheap alternatives. ²⁴

This study findings show that 67.7% of respondents feel uncomfortable in school during menstruation due to various barriers like the lack of adequate school infrastructure and amenities, such as lock condition of toilet, lighting condition of toilet, Availability of mirror, availability of soap and water, private spaces for menstrual management, resting room, teacher support and disposal facilities. This finding supports by the menstrual hygiene matters result conducted by House et al. which reported that girls found school environments insufficient to support their menstrual management practices, due to lack of clean latrines, locks or doors, soap, sufficient water, and dustbin. ²,^{4,6}

In this study, the majority (83.9%) of students reported the availability of gender-separated toilets. However, 88.5% of the toilets were in poor condition due to inadequate lighting, with 96.9% lacking mirrors and 32.3% having broken locks. This finding aligns with the study by Trinis et al., which highlighted issues such as unclean latrines, missing locks or doors, and poor lighting conditions.¹⁸ Additionally, more than half (62%) of respondents noted the absence of soap and water for hand washing. A study by Mohammed et al. in Ghana among adolescent girls supports this, showing that none of the schools had a regular water supply, mirrors for girls to check for bloodstains, or soap for hand washing in their WASH facilities.¹⁶

The study found that most participants (50.5%) change their absorbent three times a day, but the disposal methods were not ideal. While 41.1% use dustbins, 40.1% dispose in rivers, 16.1% throw in toilet pans, and 2.6% discard carelessly. This finding was strongly supported by Ranabhat et al. in Kalikot showed that more than half (69.8%) of respondents dispose of cloth or pads in open areas, such as rivers, or carelessly in the environment.¹³

Regarding pain management, 19.3% of participants reported needing rest to alleviate their pain; however, the school lacks a restroom for them to rest during menstruation. A similar study conducted in the Bamako district by Seydou et al. among school adolescent girls found that schools also did not provide a space to rest when pain occurred during menstruation.⁴

In this study, 32.3% of girls missed school during menstruation. The reasons for absenteeism included fear of staining (32.3%), cultural restrictions (29%), and lack of private places to manage menstruation (12.9%), pain (12.9%), parental instructions not to attend (11.3%), and inadequate disposal facilities (1.6%). This aligns with findings from Rajbhandari et al. in Bhaktapur, which noted that pain and discomfort were major reasons for absenteeism, with 37.5% of girls citing fear of leakage and 8.9% mentioning lack of private space.²⁴ Similarly, Van Eijk et al. in India found that girls missed school due to physical discomfort, lack of water and hygiene facilities, fear of staining, and restrictions from relatives or teachers.¹⁹

The study found no significant association (p>0.05) between uncomfortable feelings during menstruation at school and factors such as gender-separated toilets, lighting conditions, private spaces for managing menstruation, sick rooms for rest, or school attendance during menstruation. However, there was a significant association (p<0.05) between uncomfortable feelings and factors like the availability of soap and water, the condition of toilet locks, and pad disposal facilities. In contrast to the current study, previous research had not demonstrated significant associations between menstrual barriers and these specific factors.

Overall, this study highlights the challenges and limitations faced by adolescent schoolgirls in managing menstruation in the school environment. It emphasizes the need for a menstrual-friendly environment, access to affordable menstrual products, and teacher support. Improving menstrual hygiene management can lead to increased school attendance, better health outcomes, and reduced stigma associated with menstruation.

5. Conclusion

This study highlights the significant challenges faced by adolescent girls in managing menstruation within school environments in low- and middle-income countries. Key barriers identified include inadequate facilities, lack of privacy, and cultural stigma, which collectively hinder effective menstrual hygiene management and negatively impact girls' school attendance and overall well-being. The findings underscore the urgent need for systemic improvements, such as the provision of clean and accessible sanitation facilities, adequate menstrual products, and supportive educational environments. Implementing community-wide awareness campaigns and educational programs can help break the stigma surrounding menstruation and promote healthier practices.

Compliance with ethical standards

Disclosure of conflict of interest

No conflict of interest to be disclosed.

Statement of informed consent

Parental consent and Informed consent were obtained from all participants included in the study.

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