Knowledge and practices of menstrual hygiene among women in Farwest Nepal

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Abstract

Menstrual hygiene is the issue that is insufficiently acknowledged and given less attention from every sectors of development. Practice of proper hygiene during menstruation is very important as any small ignorance in hygiene during periods can increase the vulnerability to reproductive tract infection. This study was conducted in Sukhlaphanta-11, Kanchanpur district. The main objective of the study was to find out the understanding and practice of menstrual hygiene by girls and women. Descriptive research design under quantitative research method was adopted to conduct this study. Personal interview technique was used to collect data using pre-designed and structured questionnaire. Majority of the respondents were aware of menstruation before their menarche. Only 20.0% of the respondents always use sanitary pads as menstrual absorbent. Among the respondents using cloth as menstrual absorbent, 80.6% use the same cloth used during previous period. Majority (56.4%) of the respondents change their used menstrual material twice a day. Only 35.0% of the girls and women take bath daily during menstruation. Less than half of the respondents have knowledge on the washing of hands and genital part after every urination and pads change.

Keywords: Menstruation, menarche, hygiene, sanitary pads, absorbents, menstrual waste

Introduction

Menstruation, also known as the period, is the regular discharge of blood and mucosal tissue from the inner lining of the uterus through vagina in females. Menstruation is also known as menses (Nordqvist, 2016). Menstruation cycle is usually around 28 days but can vary from 21 to 35 days. Each cycle involves the release of eggs which moves into the uterus through the fallopian tubes. Tissues and blood start to line the walls of the uterus for fertilization. If the egg is not fertilized, the lining of the uterus is shed through the vagina along with blood. A healthy woman menstruates for approximately 3000 days in average lifetime. Menstruation stops occurring after menopause which usually occurs between 45 and

55 years of age. Period also stops during pregnancy and also in the initial months of breastfeeding (Women's Health, 2015). The cycle is often irregular for the first year or two after menstruation begins. During this period, physical, psychological and biological development of a child occurs (Thakre, Thakre, Reddy, Rathi, Pathak, & Sghade, 2011).

Hygiene-related practices during menstruation are of considerable importance for reproductive health as poor practices increase vulnerability to reproductive tract infection (Dasgupta & Sarkar, 2008). The United Nations defines adequate menstrual hygiene management as "women and adolescent girls using a clean menstrual management material to absorb or collect blood that can be changed in privacy as often as necessary for the duration of the menstruation period, using soap and water for washing the body as required and having access to facilities to dispose of used menstrual management materials" (Sommer & Sahin, 2013). Women in low income setting have low awareness on hygienic practices and lack culturally appropriate materials for menstrual hygiene management practices (Sumpter, 2013). The materials used as adsorbents during menstruation in low income countries including Nepal vary from reusable towels (cloth torn from dresses of women and cotton fabric) to commercially available disposable sanitary pads. Practical sustainable and culturally acceptable methods are recommended for addressing the menstrual hygiene needs of women in low income countries (McMahon, 2011). Hygiene during menstruation is an inevitable part of women's life. Various aspects such as physiology, pathology and psychology of menstruation have been found to associate with health and well-being of women; hence, it is an important issue concerning morbidity and mortality of female population (Bachloo & others, 2016). The misconception that "females touching others during their menstruation brings God's curse to their home and families" is still rampant in western Nepal (Bhattarai, et al, 2020).

Menstruation is a normal biological phenomenon but it is misunderstood as a taboo subject a topic that many women are uncomfortable discussing in public. These types of topic are excluded in public talks without giving any importance. Women are made to follow many restrictions and myth when they menstruate, which gives them a negative feelings towards menstruation. These restriction and secrecy surrounding menstruation create a negative impact on womenhood by essentially assaulting the women psychologically, degrading their self-image and self-esteem, creating a feeling of shame and undermining the physiological significance of menstruation (Umeora & EgwUatu, 2008). Negative attitudes arise when there

is lack of awareness and proper communication. The logic behind considering menstrual women as impure and untouchable is found to be due to religious and superstitious beliefs (GC & koirala, 2013). These practices are mostly found in Farwestern and some districts of Karnali province where menstruation is considered as unclean and impure. In Farwestern Province, it is prevalent mainly in Achham, Bajura, Bajang, Doti, Baitadi, Dadheldhura, Darchula, Kanchanpur, and Kailali and in Karnali it is prevalent in Kalikot, Jumla, Dailekh and Jajarkot (Bista, 2017). Many girls residing in slum areas are unaware of what actually happens during menstrual cycle. Although menstruation is a natural process, it is linked with several perception and practices within the community, which sometimes may results in adverse health outcomes (Yasmin, Manna, Mallik, Ahmed, & Paria, 2013).

Cultural restrictions during menstruation are associated with different medical and psychological outcomes resulting in different reproductive diseases, urinary tract infection, school absenteeism and social isolatio. Menstruation and its practices are still clouded by taboos and socio-cultural restrictions resulting girls and women remaining unaware of sanitary pads and other hygienic health. In our society, the issues about menstruation are not allowed to discuss openly and this causes adverse effect in health of women.

Menstruation and menstrual hygiene practices along with menstrual waste disposal is usually kept under wraps. It has been considered as a taboo and several socio cultural restrictions are attached to it. This issue has always been inadequately recognized and it has always been sidelined while designing programmers' for improving women's health (Sarkar, 2015). Most of the girls in rural areas are not even aware of the menstruation as a natural phenomenon and they accept it as a matter of shame and social taboo as taught by parent, family and society (Gautam, 2016).

Menstrual hygiene is a very important issue that every girls and women face in their life but the topic is not so openly discussed in society as it is considered as subject of shame as is lack of awareness on menstruation and menstrual hygiene management. The main aim of the study is to assess the practice of menstrual hygiene management. The result obtained from this study will clearly show the real picture of our society and will help to raise awareness among the girls and women. The obtained result will also be helpful in formulating the appropriate plan, policy programmes for the better practice of menstruation and hygiene during menstruation.

Methods

The quantitative descriptive study was conducted among menstruating women of all age group of Shuuklaphanta Municipality-11, Deepnagar, Kanchanpur. This village was chosen purposively and systematic random sampling was used to select all the girls and women of this area. The total number of the household from Deepnagar Chowk towards east side along both right and left side of the road up to Deepnagar basic primary school were listed out. Total of 120 household having menstruating women were identified. Among 120 of the total household having menstruating women of age group 10-49, 40 of the household were randomly selected. From the selected 40 household one of the respondents from each house was taken as the representative of whole house. Pre-designed and structured questionnaire was used to obtain the information on menstruation and the hygiene practices during menstruation. The data collected were processed and analyzed using SPSS version 23.

Results

Socio-demographic characteristics

The survey was done among the 40 respondents of different age groups. The data showed that majority of the respondents (35.00%) respondents belonged to the age groups of 30-39 years followed by the 32.50% of the respondents from the age group of 10-29 years. 27.50% of the respondents were from the age group of 20-29 years and only 5.00% of the respondents were from age group of 40-49 years. In terms of Caste, 67.50% were Chhetris while 22.50 % of the respondents were Brahmins and only 10 % of the respondents were Dalits. All the respondents belong to Hindu religion.

Family-wise, the majority (52.50%) of the respondents belonged to nuclear family and 47.50% were from joint family. Among all the participants, 42.5 % were educated up to SLC level followed by 27.5 % intermediate level, bachelor's level were 12.5%, and 2.5 % of the respondents belonged to master's. Rest of the respondents (15.0%) had not got any kind of formal education.

Age of menarche

All the girls and women begin their menarche at different age group. It is not the same for all womens. Different factors like climate, nutrition, heredity, body shape and other factors are responsible for the difference of the menarche among different girls. Table 1 shows the distribution of respondentrs based on age of menarche.

Table 1 Distribution of respondents based on age of menarche

Age (Years)	Frequency	Percent
11.00	2	5.0
12.00	5	12.5
13.00	8	20.0
14.00	15	37.5
15.00	6	15.0
16.00	2	5.0
17.00	2	5.0
Total	40	100.0

It is observed that among 40 respondents, 37.5% respondents attained their menarche at the age of 14 year followed by the 20% of respondents menstruate at the age of 13 year. Fifteen percent of the respondents attained their menarche was at the age of 15 year and 12.5% attained their first menarche at the age of 12 year. While the respondents who menstruated at the age of 11 year, 16 year and 15 year was the same i.e. 5.0% each. The mean age at menarche was found to be 13.8 years.

Knowledge and attitude on menstruation

Menstruation is a biological process which signals the onset of fertile period in girls but only misconception and wrong knowledge or understanding about menstruation is leading in our society. Table 2 shows the knowledge and attitude on menstruation.

Table 2 knowledge and attitude on menstruation

Characteristics	Categories	Frequency	Percent
Awareness of menstruation before menarche $(N = 40)$	Yes	34	85.0
	No	6	15.0
Source of information $(N = 34)$	Mother	18	52.9
	Sisters	11	32.4
	School	3	8.8
	Friends	2	5.9

Reaction to first menstruation $(N = 40)$	Afraid	9	22.5
	Shy	12	30.0
	Uncomfortable	15	37.5
	Normal	4	10
Cause of menstruation $(N = 40)$	God gifted	2	5.0
	Shedding of bad blood	25	62.5
	biood	8	20.0
	Natural process	5	12.5
	Don't know		
Awareness on menstrual	All absorbents	0	0
absorbent	Sanitary pads and	31	77.5
	cloth	9	22.5
	Only cloth		

The majority (85%) of the respondents were aware about menstruation before their menarche while only 15% of the respondents said that they had no any idea about the menstruation before they themselves experience their menarche.

Those respondents who had knowledge about menstruation before their menarche had obtained this information mostly from their mothers and other different sources. While asked about the source of information about menstruation, 52.9% of the respondents responded that they got knowledge about menstruation from mothers, 32.4% of respondents said they got to know about menstruation from their elder sisters, 5.9% from their friends and 8.8% had heard about menstruation from their school. When asked about the respondents' reactions towards their first periods, 37.5% of the girls said that they were very uncomfortable, confused and hesitate as they were taught by their closed ones that menstruation is not good as it is the subject of shame. 30% of the respondents felt shy when they had menstruate for the first time and 22.5% respondents said that they were very afraid whereas only 10% reported that they felt normal as usual during their first menarche.

The majority (62.5%) of the respondents said that menstruation is shedding of bad blood from girls' body through vagina whereas 20.0% of them believed it as a natural biological process which signals the onset of the fertile age group. 12.5%

of the respondents were totally unaware of the cause of menstruation as they didn't have any idea about why girls menstruate and 5.0% of them believed it as god gifted. It was found that none of the respondents was aware of availability of all the types of absorbents in the market like disposable sanitary pads, tampons for managing the menstrual blood. While 77.5% of the participants were aware of both sanitary pads and cloth pads as menstrual absorbents and 22.5 % of the respondents were aware of only cloth a menstrual absorbent in order to manage their menstruation.

Socio-cultural restrictions during menstruation

Women or the girls especially in rural areas suffer more during their periods as they have to follow certain kinds of restriction as per their wish or as per not their wish. Even some women being educated enforce their daughters to follow the restriction which they were also following since their first periods as to maintain their honors in the society. Young girls who are menstruating have to face many problems as they are not much more familiar with norms, values and the restriction which are to be followed. Restrictions are enforced in all the girls since their first periods. Girls and women are restricted from talking to male member of their family, sleeping in the same room on the same bed as usual, to eat certain food, they are not even allowed to use toilets and touch any of the fruits-bearing plants. Some of the women and girls know these myth, belief, norm, values; traditions associated with menstruation are wrong but they are forced by their family members as well as society to follow these rules. Table 3 shows this kind of information.

Table 3 *Restrictions during menstruation*

Restrictions	Frequency	Percentage
Cooking/entering kitchen	35	87.5
Restricted to touch other	27	67.5
Restricted using common toilets	13	32.5
Restricted to touch water	35	87.5
Restriction in sleeping in same room as other day	29	72.5
Restriction on eating dairy products	25	62.5
Restricted to visit religious place	40	100

Almost all of the respondents follow more than one types of restriction during menstruation though few of them have knowledge about menstruation as a

physiological process. The majority (87.5 %) of the respondents were not allowed to enter kitchens and cook food during their periods. Menstruating women are considered as impure and other family members don't eat the food cooked by them. 67.5% of the respondents were not allowed to touch other members of the family during periods as they think if menstruating women touch, then other members will also become impure. They are not even allowed to go to other rooms as they had to sit only in one room for 3 days and in fourth day after taking bath, washing all clothes and sprinkle the cow urine they are considered pure.

More than 87 % of the respondents were not allowed to touch water tap and 72.5% of the respondents were restricted to sleep in the same room as in other days during their periods. They shift to another room during periods and most of them sleep in ground during periods. 32.5% of the participants were not even allowed to go to the toilets during their periods as the elders of their house restrict them to do so. 62.5% of the respondents were not even allowed to eat dairy products like milk and yoghurt. All the respondents were restricted to visit religious places like temples and were also restricted to attain the cultural ceremony during periods.

Practice of menstrual hygiene among the participants

It is very necessary to keep the body hygienic and clean during the periods. Women and girls must take bath daily during periods. They should also wash their hands after every urination and changing of pads. Washing of the genital parts is also one of the major things to do during menstruation as to ensure the hygienic behaviours during menstruation. Proper and safe absorbent is very important in order to manage the blood flowing during period. Bleeding occurs during menstruation and the menstrual absorbents absorb the blood and it is not safe to keep it for long period of time as it may help to grow germs and bacteria which infect the genital parts and may cause reproductive tract infection and many dangerous disease like cancer. So it is necessary to change the used menstrual absorbent in certain time interval. Disposal of the menstrual waste material generated during the periods is one of the serious problems for the girls. Every girl goes through this problem every month during their periods as no any ideal method of disposing the waste material is available for girls and women. Table 4 shows the practice of hygiene during menstruation.

Table 4 Practice of hygiene during menstruation

Characteristics	Categories	Frequency	Percent
Types of absorbent used (N = 40)	Sanitary pads	8	20.0
	Cloth	22	55.0
	Both	9	22.5
	Nothing	1	2.5
Types of cloth absorbent used $(N = 31)$	New	6	19.4
	Old	25	80.6
Disposal of used pads $(N = 17)$	Threw in toilet	2	11.8
	Buried	4	23.5
	Burn	3	17.6
	Threw in jungle	8	47.1
Changing of absorbent $(N = 40)$	Many times a day	4	10.3
	Thrice a day	10	25.6
	Twice a day	22	56.4
	Once a day	3	7.7
Frequency of bathing during menstruation(N = 40)	Daily	14	35
	In gap of one day	17	42.5
	Not fixed	9	22.5
Practice of washing hands after urination and pad change (N = 40)	Always	11	27.5
	Wash but not always	27	72.5
Cleaning of genital parts after urination and pad change(N = 40)	Frequently	13	32.5
	Rarely	27	67.5

Among all the respondents, only 20.0% of them always used sanitary pads as menstrual absorbent, 55.0% used cloth, 22.5% used both sanitary pads and cloth to collect or manage the blood flowing during their periods and 2.5% of the respondents didn't use any types of absorbent to collect the blood during menstruation. Among

all the respondents using cloth as menstrual absorbents, only 19.4% of them used the new cloth as absorbent during monthly periods while maximum 80.6% of them washed the used menstrual absorbent, stored it safely in private place and reused it during every menstruation. A large proportion (47.1%) threw their used sanitary pads in nearby jungle, followed by 23.5% of respondents who used to bury their used pads in land, 17.5% of the respondents burnt the used sanitary pad in order to dispose them and 11.8% of the respondents threw the used pads in toilets safety tank. The majority (56.4%) of the respondents changed their used absorbent twice a day followed by 25.6% thrice a day. The findings on practice of bathing during menstruation showed that 42.5% of the respondents used to bath in the gap of one day, only 35.0% respondents bathed daily during their periods and 22.5 % of respondents reported they were not fixed as sometime they used to bath directly in fourth day. Out of the 40 respondents, only 27.5% washed their hand after every pad change and urination while other rarely washed their hand. It was found that only 32.5% of the respondents cleaned their genital parts frequently after urination and changing of pads other 67.5% rarely or didn't clean the genital parts they only clean while taking bath.

Discussion

Different aspects like education level, family types, caste, and educational status of parents, family members, economic status and socio-cultural status have direct effect on understanding of menstruation and the practice of menstrual hygiene. In this study the mean age at menarche was found to be 13.8 which is different from the finding of other studies where mean age at menarche was 12.5 + 0.9 (Poudel & Gautam, 2020) and 13.1 + 0.9 (Sapkota, Sharma, Pokheral, Budhathoki & Khanal, 2013). Regarding the knowledge about the menstruation and the experiences of menstruation, it is found that the majority (85.0%) of the respondents were aware of menstruation before their menarche and the main source of information about menstruation was found to be mother (52.9%). This finding about the awareness on menstruation is different from other study conducted in West Bengal which showed that only 42% of respondents were aware of menstruation prior to their menarche (Yasmin, et al, 2013) and the other study where only 36.19 % of respondents were aware of menstruation before menarche (Jogdand, 2011). The main source of information about menstruation was found to be mother in in this study. There is misconception about menstruation in our society, it is considered as taboo, subject of shame. There are very few who have good understanding on menstruation.

The finding of present study showed that only 20% of respondents were aware of menstruation as a natural physiological process whereas the finding of similar study conducted in Doti showed that 83% of respondent were aware of menstruation as a physiological process (Yaday, Joshi, Poudel, & and Pandya, 2017).

In this study, the majority (67.5%) of the respondents were not allowed to touch other family members or anyone during period. This result differs from the finding of similar types of study conducted in Aagashivnaar, Maharastra where only 21 % of the girls were not allowed to touch anyone during periods (Deshpande, Patil, & Durgawali, 2020). It is found in the study that the majority (87.5%) of the respondents were not allowed to enter the kitchen and cook food and 72.5% of them were not allowed to sleep in the same room as in other days. This might be due to rural and urban context and composition of family and education level. Mostly in rural areas girls and women have to follow more restriction because of society and the fear of what others might think but in urban areas no one bothers about what others think all do whatever they are comfortable doing.

This study shows that all the respondents were restricted from entering the religious places and perform any sorts of religious activities which is similar to the finding of other studies conducted in Morang, Nepal where 94.15 of girls were not allowed to perform any of the religious activities (Parajuli, Poudel, & Shrestha, 2016). However, other study showed that 78.99% of the respondents were restricted from attaining the religious activities (Jogdand, & Yerpude, 2011). It is clear from the study that many restriction are still being followed in our society during menstruation as per the girls and women wish or as per the rule given by their family or society. In this study the finding showed that 87.5% of the girls and women were not even allowed to touch water tap.

Personal hygiene is very important in everyday life. Bathing daily, washing of hands and genital parts after the pad change and urination is very necessary in order to be safe from different reproductive tract infections uring periods. Along with this, it is very important to use more safe absorbent to collect the flowing blood during menstruation. This study showed that only 20.0% of the respondents used the sanitary pad, 55.0% of the respondents used cloth as absorbent, 22.0% used both sanitary pads and cloth as menstrual absorbent and only one of the respondents was not using any sorts of menstrual absorbent. The finding of this study is very much different from the finding of other studies where 69.7% of the respondents used sanitary pads as menstrual absorbent, 9% of the respondents are found using

cloths and 35.4% of the respondents used both sanitary pads and cloth as menstrual absorbent (Poudel & Gautam, 2020). However, the findings of this study is similar to the result of the other similar study where only 21.3% of the girls used sanitary pads as menstrual absorbent and 53.9% of the respondents used homemade disposable pads (Yadav, et al, 2017). The finding of the study conducted in Gujarat showed that 60% of the respondents used sanitary pads (Sapkota, et al, 2013), and similar study showed that 54.1% of the respondents used sanitary pads (Ten, 2007). In this study the majority (56.4%) of the respondents changed their used menstrual absorbent twice a day which contrasts to the study where frequency of changing pads twice a day was 50.8% (Ten, 2007), and 50.8% (Poudel & Gautam, 2020). However, the finding differs from the similar types of study conducted in Sokoto, Nigera where 70% of the respondents changed their used absorbent thrice a day (Oche, Umar, Gana, & Ango, 2012). This might be due to the low awareness among the girls and women about the different infection that may be caused due to the ignorance in changing of absorbent frequently.

The finding of the study showed that only 35.0% of the respondents bathed daily during their periods which is different from the finding of the other studies where 78.7% of the respondents bathed daily during periods (Yadav, et al., 2017). This is because in this study most of the respondents didn't have access to tap water. It is found that only very few (27.5%) of the respondents washed their hand and 32.5% of them cleaned their genital parts after every urination and pads change. These findings differ from the findings of other similar types of studies where 91.8% of the girls washed their hand, 76.9% of girls cleaned their genital parts regularly after every urination and pad change (Yasmin, et al, 2013), also 68.1% and 56% of the girls washed their hands and cleaned genital parts after pad change (Yadav, et al. 2017). It is found that in this study the majority of the respondents threw their used sanitary pads in nearby jungle but the findings obtained from similar type of study conducted in Aagashivnagar, Maharashtra showed that the majority (51.67%) of the girls used proper disposal method as they wrapped sanitary pads with paper and then threw it into dustbin (Deshpande, et al, 2018). It was because the respondents of this area were not aware of proper disposal method and in some cases they were not allowed to use disposal method like burning and burry.

Conclusion

Menstruation is a natural biological process but in our society it is considered as impurity. During periods, girls and women are forced to follow different restrictions. There are persistent myths, taboos, social norms, values, and misconception surrounding menstruation. Girl and women during periods are excluded by family members or they exclude themselves from different activities. This study revealed that menstruation is not a much discussed topic in the society. It is considered as subject of shame and embarrassment for every girl and woman.

The practice of menstrual hygiene among the girls and women of this community is found to be very poor. Very few of the respondents bath daily while most of the others bath in the gap of one day. Practice of cleaning genital part, washing of hand after every urination and pad change is found to be very poor. Few people who were aware of menstruation as a biological process were also unable to practise good hygienic habit during their periods always as there is no access to water, restriction on sharing common toilets or bathroom, lack of private space for changing of pads during periods and non-affordability to sanitary periods

Having good knowledge on sanitary pad, only one-fourth of the respondents used sanitary pads during every period. This is because of the socio-culture aspect, economic aspect which has become great hindrance on the way of practising good menstrual hygiene.

It is very important to make the effort from local level governments, TV, FM Radios like conducting awareness programme in every village, community to make aware all girls, women and local people of society that menstruation is a biological process and proper hygiene must be maintained during periods. Every school and college especially in remote areas must teach their students both boys and girls about menstruation, menstrual hygiene and impact of poor menstrual hygiene in women's health.

So along with spreading the awareness about menstruation and menstrual hygiene among all the underprivileged women and girls, it is also necessary to ensure that every girl and woman has access to sanitary pads, water sources, toilets facilities and environment friendly waste disposal. For this efforts must be made from government and non-governmental organization, local level government, and other responsible authority must ensure that every girl and woman espically of remote areas are getting pad free of cost. Cleaning genital parts frequently is very important so every women must be aware of this and they must be warned about the bad consequence of poor menstrual hygiene like different reproductive tract infections and other genital diseases. Menstrual hygiene is no more privilege; it is a right of every woman.

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