



How Social Cultural and Belief Affect Girl Students' Menstrual Hygiene Management in Tanzania

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Abstract: *The study examined how social cultural and belief affect girl students' menstrual hygiene management in Tanzania. The study adopted exploratory research design. This study employed qualitative approach with semi-structured interviews and focus group as data collection tools. A total of 29 students from four different private and public school in Dodoma city were involved. The study found that social cultural and beliefs affect girl students' menstrual hygiene management; majority of girls were not allowed to cook, touch, or gather with others and avoided to talk anything about menstruate instead of taking instruction from members of the family. They were not allowed to plant and harvest when menstruate, if they did its believed that crops will wither, though only few school have few knowledge which support girl students during menstrual period. The study recommends that; society must abandon their poor traditional customs which discouraged girls from participating in a particular activity when they were in the menstruation period. Traditional leaders and female guardians should play a pivotal role in teaching girls on menstrual hygiene management (MHM) and resolved challenges among school girls.*

Keyword: Menstrual, hygiene, management, social cultural, belief

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1. Introduction

The prioritization of women's and girls' menstrual requirements is of utmost importance in the context of global health and the pursuit of gender equality. However, many of girls from middle and low-income countries, has often been challenging because of menstruation linked to cultural beliefs, traditions, and stigma both at school and in the community. For instance, in Nepal, most of adolescent girls practice and lived experience of menstrual exiles. It also known as *Chhaupadi* a tradition of "untouchability". Forbidden from touching other people and objects, women and girls are required to live away from the community, typically in a livestock shed, during menstruation (Amatya *et al.*, 2018). These challenges are not homogeneous. The social taboo against menstruation was harsher in certain communities than in other communities (Gold-Watts *et al.*, 2020; Amatya *et al.*, 2018). This negative assessment of menstruation leads to negative experience among girls in

menstrual hygiene management (Fennie, Moletsane and Padmanabhanunni, 2022).

In the context of sub-Saharan Africa (SSA), it is evident that there is a prevalent lack of knowledge and unease among parents, relatives, and teachers when it comes to engaging in conversations pertaining to menstruation with both female and male students. Moreover, menstruation is deeply entrenched in a culture of silence, surrounded by various beliefs, taboos, and even societal disgrace. Menstruating females are subjected to a variety of limitations pertaining to food consumption, school attendance, performance of domestic tasks, and participation in social gatherings (Al Omari, Razeq, & Fooladi, 2016).

Further, most of studies have identified that most girls in Africa face many challenges in managing menstrual hygiene. Among these challenges are psychological challenges. The psychological challenges are related to cultural taboos and stigmas associated with menstruation,

which hindered girl students from seeking advice from parents and teachers on appropriate menstrual health management practices (Hennegan *et al.*, 2019). In relation to that Al-Omari *et al.*, (2016), asserted that menstrual hygiene management is influenced by social and cultural beliefs that shape attitudes towards menstruation. Understanding the girl student's experiences connected to local menstrual beliefs and practices provided insights to develop an intervention on various constraints and restrictions, and pressures in a particular sociocultural context. In each society, there are sociocultural norms and prescriptions regarding the knowledge, attitudes, preferences, and behaviors of people which impact school attendance (Hennegan *et al.*, 2019).

In the context of Hindu culture, menstruation is regarded as a state of religious impurity and ceremonial uncleanness. Females engage in the practice of many socio-cultural taboos during the menstrual cycle. In addition to ensuring legitimacy, these taboos serve to assist women in upholding menstrual cleanliness as a necessary measure to prevent reproductive health issues (Selvi & Ramachandran, 2012). According to Santina *et al.* (2013), empirical evidence suggests that female students in Lebanon did not adhere to the entirety of the prescribed menstrual hygiene practices. Instead, their menstrual practices were influenced by the prevailing sociocultural beliefs prevalent in Lebanese society. Notably, these students refrained from showering during the initial three days of menstruation as well as throughout the entire duration of their menstrual cycle. Furthermore, their activity limitations encompassed both physical (70.3%) and social (18.2%) engagements.

Moreover, research has indicated that in the context of Tanzania, female adolescents exhibit a detrimental disposition towards the management of menstruation hygiene. The observed outcome can be related to the pre-existing knowledge that the girls possessed about menstruation, as well as the conducive educational environment provided by the school (Sommer & Sahin, 2013). According to Guya, Mayo, & Kimwaga (2014), research findings indicate that female students often experience feelings of self-consciousness and embarrassment during menstruation due to the inadequate facilities at educational institutions, leading to a perception of unpleasant body odor. That's why there is a need to do more studies in this area.

2. Literature Review

2.1 Theoretical framework

Feminist perspectives represent opinions with a need to seek social justice for women's interests, which includes

violence against women, reproductive health rights, employment and discrimination. This study is built on the theoretical framework constructed by Simone De Beauvoir's *Second Sex* (1953). According to this work, women are viewed as the inferior sex, and all issues about women including menstruation are viewed as less important at all levels of society.

When it comes to menstruation, Simone de Beauvoir explores how society has often viewed it as a marker of a woman's difference from men and has used it to justify treating women as inferior or less capable. She argues that the menstrual cycle has been pathologized and used as a basis for claiming that women are emotionally unstable or unfit for certain roles, including political leadership or intellectual pursuits. De Beauvoir's feminist perspective challenges these notions and argues that women should not be defined solely by their biology or reproductive capacity. She calls for the recognition of women as individuals with agency and the right to make choices about their lives. She advocates for the liberation of women from the constraints of societal expectations based on their sex. De Beauvoir's feminist perspective emphasizes the importance of women having access to resources, education, and healthcare. Ensuring that women have access to sanitary products, pain relief, and healthcare during menstruation is a practical way to support women's well-being and autonomy (De Beauvoir 1953).

2.2 Empirical Review

2.2.1 Empirical Review on Social cultural and belief

Fennie *et al.*, (2022), conducted a study to assess girl students' perceptions and cultural beliefs about menstruation and menstrual practices: A scoping review. Menstruation is experienced differently among school-going adolescents in various cultures and social contexts. This scoping review summarizes the emerging evidence on adolescent girls' perceptions and cultural beliefs about menstruation and menstrual practices. A search was conducted via relevant databases and journals for the period 2004 to 2020. The 35 articles included in the review represented adolescent girls' perceptions and cultural beliefs about menstruation and menstrual practices. Narrative analysis revealed that cultural perceptions and beliefs, economic and institutional resources and primary sources of information influenced the experience of menstruation and its management. Menstruation remained shrouded in secrecy and shame for many girls, leading to absenteeism from school. These findings underscore the need to further explore cultural practices and beliefs about menstruation that influence school attendance and long-term educational prospects of adolescent girls.

The study conducted by Amatya et al. (2018) centered on the examination of the phenomenon of menstrual exile as it pertains to female students residing in the far-western region of Nepal. This study aimed to evaluate the lived experiences of exiled Nepalese female students in the far-western Achham area of Nepal, with a specific focus on assessing the safety and sanitation conditions of their living places during menstruation. A self-administered survey was utilized to collect data from a sample of 107 female students in two local schools located in Achham. The results indicated that a significant proportion of the female participants ($n = 77$, 72%) engaged in the practice of seclusion during their menstrual period. Specifically, 3 participants (4%) reported being secluded in traditional sheds, while the bulk of participants, 63 (82%), reported being secluded in livestock sheds. Additionally, 11 participants (14%) reported being secluded in courtyards located outside their homes. Out of the total number of girls ($n = 30$, 28%), a subset chose to remain indoors, while adhering to various forms of menstrual taboos.

Another study by Selvi and Ramachandran (2012), looks at Social-cultural Taboos concerning Menstruation: A Micro level study in the Cuddalore District of Tamil Nadu. In general, in each society, there are sociocultural norms and prescriptions regarding the knowledge, attitudes, preferences, behavior of people. In Hindu culture, menstruation (a reproductive health element) is considered religiously impure and ceremonially unclean. Therefore, this paper attempts to examine such practices in the study area and the factors influencing the practice of social taboos. The study was based on the primary data collected from 600 sample respondents from rural and urban areas chosen by using a systematic sampling method. Statistical tools like the chi-square test are attempted to test an association between the factors. The results show that a very strong practice attitude among the women is evident in keeping them away from religious and ceremonial participation. Except for religious and ceremonial related taboos, women do not seem favorable to the practice of other social taboos.

Thapa, Bhattarai, and Aro (2019) study examined the topic of menstrual blood and emphasize the importance of proper hygiene practices for its management. This study aimed to explore traditional menstruation behaviors and the contextual elements influencing them in rural communities located in far-western Nepal, utilizing a qualitative case study approach. It involved the implementation of a qualitative case study methodology in the Achham district of Nepal. Data collection involved conducting semi-structured interviews with a total of four women, three men, and two female community health volunteers. The collected data was subsequently subjected to thematic analysis for the purpose of analysis. The study revealed that there is a certain degree of progress in the diminishment of

cultural beliefs and behaviors, albeit at a somewhat sluggish pace. Furthermore, the results indicated that a significant number of women in Nepal, particularly those residing in the rural regions of far-western Nepal, are compelled to adhere to detrimental menstrual habits due to the socio-cultural circumstances that shape their existence. The implications of the study's findings are significant for the development and implementation of future community-based treatments focused on menstruation health. These programs should be designed to align with the cultural background, beliefs, and practices of the local community.

3. Methodology

This study employed exploratory research design to have a better understanding of the existing problem but did not provide conclusive results as suggested by Kothari (2011), and it adopted a qualitative research approach. It also adopted triangulation techniques to guide data collection efforts.

3.1 Sample Size and Sampling Techniques

The study employed a purposeful sampling technique to choose sample units (girl students, head teachers and DEO) from the overall population. A total of 29 individuals were purposefully chosen. The secondary schools were purposefully selected in Dodoma city such as school Z, school H, school R and school J.

3.2 Data Collection Methods

The study used interviews with a total of six girl students from each secondary school. The study's key informants were the District Education Officer (DEO) and head teachers. The data was obtained through the application of direct observation and in-depth interviews. The data gathered was analysed qualitatively applying content analysis techniques.

3.3 Ethical Considerations

To attend and encourage the wellbeing of the respondents, the researcher applied for the ethical clearance at St John's University of Tanzania Ethical Review Committee. The research was certified as ethically compliant and ethical clearance certificate was issued to the researcher earlier to get data collection work.

4. Result and discussion

This section presents the findings and analysis of the study. A single research question was utilized as a guiding framework for the obtained findings.

The following research objective was stated: To determine how social cultural and beliefs affect girl students' menstrual hygiene management.

Using this as a leading objective, four other sub-objectives were mentioned to measure respondents' views.

4.1 Social gathering

This sub-section aimed to find how social cultural and beliefs affecting girl students on the implementation of MHM. Social gathering is an interaction among a diversity of individuals of all abilities in small, medium and large groups for social and community purposes. A great benefit of social gatherings is meeting new people. Whether it's a formal or casual gathering (Floyd, 2017). In this study, social gathering proved to be a challenge to adolescent girls when they are menstruating, most of them are not allowed to gather with others in different social activities including parties and worshipping. Others are limited from going to school when on menstruation because they fear leakage or odor during social interactions. According to UNICEF (2013), stigma and taboos around menstruation contribute to girls' negative experiences and hinder their educational and social participation. According to a study by UNESCO (2018), social gatherings can pose challenges for maintaining privacy during menstrual hygiene tasks, potentially leading to discomfort and anxiety. Concerns about odor or leakage during interactions with others can lead to self-consciousness and affect social participation. The availability of private spaces in public settings can greatly impact individuals' confidence and ability to manage their menstruation effectively.

Findings show that menstruation is regarded as a dirty and shameful event that must be taken secretly. In Tanzanian taboos, girls are not allowed to gather and interact with others because of fear of leakage of blood during the menstrual period. On the other hand, during FGD with the students, one of the girls from Z secondary school reported that:

“Social culture and belief affect me because I am not allowed to go to school and when I am at home I am not allowed to stay in front of people instead I stay in my bedroom until I finish the MP...if I did, I would destroy our tradition and I would be punished with high fever” (interview on 17/07/2023 Z secondary school).

Another girl reported that:

“When I am in menstruation period, I am not allowed to go to a party

because there is a gathering of different people...so I violate traditions and customs ...by doing so, I would be punished with rashes on my face” (interview on 17/07/2023 Z secondary school).

During the interview, one of the girls from R secondary school reported that:

“I am not allowed to enter the classroom...when I am in menstruation period, I usually stay in the dorm because my mother told me that... it was a secret...if I did, I would destroy our tradition and I would be punished with stomach pain” (interview on 29/05/2023 R secondary school).

The findings above, echo Keatman, Cavill and Mahon (2017), in a study conducted in Sri Lanka, whose findings revealed that knowledge attitude and practice (KAP) study of 23 of over 1,000 students found that 60% of parents do not allow their daughters to go to school during their period. Selvi and Ramachandran (2012), look at Social-cultural taboos concerning menstruation: A Micro level study in the Cuddalore District of Tamil Nadu. The results show that there was a very strong practice attitude among the women that is evident in keeping them away from religious and ceremonial participation. Surprisingly, this practice is comparatively high among urban respondents.

This implies that some social, cultural and belief affect adolescent girls on the implementation of MHM. As shown in the interview, one of the students admitted that, she was not allowed to interact with others, she was not even allowed to go to school until she finished her menstruation period. Also, another interview shows the girl was not allowed to go to the party because if she went, she would violate their tradition and customs and would be punished with rashes on her face. Society needs to be educated on the proper ways on MHM for adolescent girls to abandon those traditional beliefs.

4.2 Avoid talking

This sub-section aimed to find how social cultural and beliefs affect girl students on the implementation of MHM. Talking about personal subjects like periods (menstruation) can make parents and girls feel a little uncomfortable. But girls need reliable information. Helping girls understand their bodies will help them make good decisions about their MHM. In this study, talking about periods proves to be a challenge to adolescent girls. Most of them are not allowed

to share anything about menstruation instead of instructing the members of the family. According to UNESCO (2018), avoiding conversations about menstruation can perpetuate the stigma around it. This can hinder the open sharing of information and experiences, making it difficult for individuals to seek advice or support when needed. When talking about menstruation is discouraged, individuals might lack proper education about menstrual hygiene practices. This can lead to misconceptions and improper hygiene routines. In a study by Hodges (2020), many low- and middle-income countries have very limited education in schools about menstruation. Classroom teachers are unwilling to discuss menstrual hygiene management, particularly male teachers, due to the taboos associated with menstruation in these settings. In addition to that, the MHM of adolescence is a particular concern because, in low- and middle-income settings, myths, taboos, and socio-cultural restrictions create barriers for adolescent girls to acquire information about menstruation. This limits their daily and routine activities, and has the potential to negatively affect their self-esteem, reproductive health, and schooling (Hodges, 2020).

Obstet Gynecol (2015), revealed that girl students and their parents and guardians frequently have difficulty assessing what constitutes normal menstrual cycles or patterns of bleeding. Adolescents and parents or guardians may be unfamiliar with what is normal and adolescent girls may not inform their caretakers about menstrual irregularities or missed menstrual (ObstetGynecol 2015).

During Focus Group Discussion with the students, one of the girls from H secondary school reported that:

“I am not allowed to share anything about menstruation with others...my parent say, it is for older people...but at school, there is a FEMINA club that we use to discuss with my fellow students...it confuses me sometimes”
(interview on 26/07/2023 H secondary school)

In another interview, one girl from Z Secondary School reported that:

“I am not allowed to talk with boys or men...the day when I want to buy a sanitary pad, I have to find a shop where a woman sells, because my grandmother told me that, when I am in menstruation period a man should never find out even if he is my father”
(interview on 17/07/2023 Z secondary school).

The study finding is similar to Hodges (2020), who argues that societal taboos and silence around menstruation can contribute to misinformation, discomfort, and negative perceptions about menstruation. Lack of open conversation can hinder the dissemination of accurate information, proper menstrual hygiene practices, and access to support. Promoting open dialogue can reduce stigma, improve education, and foster a more inclusive environment. UNICEF (2013) found that, in societies where menstruation is not openly discussed, girls may lack proper information about menstrual hygiene practices and reproductive health.

This implies that some social and cultural beliefs affect adolescent girls on the implementation of MHM. As found during the interview, one of the students stated that she was not allowed to talk about menstruation with others because it was for older people. So, it is difficult for adolescent girls to get proper MHM information which may affect their self-esteem. Sharing of information by adolescent girls helps them to increase self-awareness about MHM.

4.3 Avoid touching and cooking

This sub-section aimed to find how social cultural and beliefs affect adolescent girls on the implementation of MHM. There are some social, cultures and beliefs that prohibit adolescent girls from touching, eating or cooking in public. By doing so, she was bound with the traditions and customs that they believed in. According to the study conducted by Rizvi and Ali (2016) some of the common socio-cultural beliefs in various castes in Nepal related to menstruation including not touching a male member of the family, plant, tree or fruit during menstruation, not consuming dairy products, eating alone during menstruation, not entering the kitchen or places of worship, not visiting relatives, nor attending social or religious gatherings. A study by Hodges (2020) state that in some cultures, it is a taboo for women and girls to bathe during their periods, touch a cow, or look in a mirror; they are excluded from water sources and cooking activities. A study by Sommer *et al.*, (2015) in Ethiopia found that bathing during menstruation was believed to lead to heavier menstrual bleeding because of touching water. Formerly, menstruating women and girls in western Uganda were prohibited from drinking milk because it was believed to affect milk production from cows.

In this study, the findings show that menstruation leads to many restrictions related to touching things and cooking. Tanzania taboos associate menstruation with myths and beliefs which leads to the belief that damage would occur when menstruating girls touch things, cook or eat something that is not allowed when an adolescent girl is menstruating. For instance, menstruating girls are not allowed to enter the field, sow the seeds and pick green

vegetables. Doing so, could lead to their rotting or dryness. Also, adolescent girls were not allowed to eat eggs or drink milk and they were not allowed to prepare food in the kitchen. During Focus Group Discussion with the students, one of the girls from Z secondary school reported that:

“My mother prevented me from entering the field when I was in menstruation period... if I did, I would be punished by getting heavy bleeding...but here at school, I study agriculture ...it confuses me” (interview on 17/07/2023 Z secondary school).

Another interviewee reported that:

“My mother told me, I should not enter the tomato field when I am in my menstrual period...if I enter, all tomatoes will change and start to bleed” (interview on 17/07/2023 Z secondary school).

During the interview, one girl reported that:

“I am not allowed to plant and harvest when I am in menstrual period...if I did, all crops will wither” (interview on 17/07/2023 Z secondary school).

During the interview, one girl from H secondary school reported that:

“I am not allowed to eat eggs and drink milk when I am in menstruation period...if I did, I will get a high fever” (interview on 26/07/2023 H secondary school).

Again, another interviewee reported that:

“I am not allowed to cook anything until I finish up MP... if I did, all people who eat the food I cook, will get sick” (interview on 26/07/2023 H secondary school).

From the finding above, similar findings have been reported by Rizvi and Ali (2016) where women and girls in eastern Uganda were forbidden from sowing groundnuts during their periods because it was thought to affect yield while in central Uganda menstruation was regarded as a secret only known to oneself. Santina *et al.*, (2013) discussed changes in the diet were reported by most participants during this period. They avoided food that they

thought had hot or cold effects. For example, meat, spices, pickles, sour items, and carrots were listed as hot whereas cold drinks, ice cream, cold water, and yogurt were considered ‘cold’. In addition, they restricted the consumption of some pulses. The participants reported that these foods affected the rate of menstrual flow, increasing or ceasing it completely. Das (2008), point out that social perceptions include the treatment of women in their own homes and communities. Some women are prevented from entering their house or kitchen to cook while menstruating. A study in Hodges (2020) found that only 21.3% of the 1200 women screened cook during menstruation. This implies that some social and cultural beliefs affect adolescent girls on the implementation of MHM. As shown in the interview, one of the students admitted that she was not allowed to drink milk and eat eggs during menstruation. Also, another girl was not allowed to plant and harvest when she was in her menstrual period, by doing so, she believed all crop would wither. Therefore, misconceptions and myths about menstruation can lead to improper hygiene practices or health risks and affect girls' well-being.

4.4 Avoid physical exercises

This sub-section aimed to find how social cultural and beliefs affect girl students on the implementation of MHM. Regular physical activities can help children and adolescents improve cardiorespiratory fitness, build strong bones and muscles, control weight, reduce symptoms of anxiety and depression, and reduce the risk of developing health conditions such as Heart disease, Cancer, and diabetes (ObstetGynecol, 2015). In this study, most girls reported being prohibited from doing physical exercise during their MP. According to UNESCO (2018) engaging in physical activities can sometimes impact the comfort and effectiveness of menstrual products. Inadequate products might lead to discomfort and concerns about leakage during exercises. Sweating during exercise might necessitate changing sanitary products more frequently. A study by WHO (2004) recommends at least 150 min of moderate or 75 min of vigorous physical activities per week to prevent non-communicable diseases, while children and adolescents between 5 and 17 years should accumulate at least 60 min of moderate-to-vigorous activity. Although environmental factors may influence the ability of either gender to perform physical activity, females might be more affected by sociocultural factors because of their gender roles. Similar to Sundani, George & Sinu (2022), in their study found that girls were restricted from school activities and physical activities such as play, traveling, attending social gatherings, functions, festivals, marriages, worship, food restrictions, entering a temple, kitchen, or other houses, doing household work, taking a bath, attending school, and touching people. Reasons for restriction in physical

activities could be because there is loss of blood when they are involved in physical activity such as running and manual labor would cause more bleeding.

In this study, the findings show that menstruation leads to many restrictions related to physical exercise. African taboos associate menstruation with myths and beliefs which leads to believe that the damage would occur when menstruating girls do physical exercise. Most girls are not allowed to undertake exercise or heavy duties for fear of extreme bleeding and shame when other people saw stains of menstrual blood. During Focus Group Discussion with the students, one of the girls from Z secondary school reported that:

"I am not allowed to play when I am in menstruation period...if I did, I will get extreme bleeding...my grandmother told me" (interview on 17/07/2023 Z secondary school).

These findings resemble findings by Sundani, George & Sinu (2022), that restriction in activity varies from culture and region. In some parts of southern Indian villages, girls were even not allowed to enter their own houses, and they were asked to sit and rest at the house entrance during the menstruation. Girls are considered dirty and impure during periods. There is an association between educational level, activity restrictions and practice regarding menstruation. UNESCO (2018) found that engaging in physical activities can sometimes lead to concerns about product comfort and leakage. Access to facilities and hygiene resources is essential for maintaining cleanliness and comfort before, during, and after exercise. Properly designed menstrual products can enhance comfort and allow for active lifestyles.

This implies that many cultures have taboos surrounding menstruation, considering it impure or something that should be secret. This can lead to feelings of shame and embarrassment among adolescent girls. As shown in the interview, one of the students stated that she was not allowed to play during the menstruation period, believing she would get extreme bleeding. Physical exercise is very important for strengthening the health of human beings, adolescent should be allowed to participate in doing physical exercise to enable their muscles to be active.

5. Conclusion and Recommendations

5.1 Conclusion

The study found that social cultural and beliefs affect girl students in menstrual hygiene management. This study reveals that menstrual hygiene is far from satisfactory

among a large proportion of adolescents in general but more so among secondary school students: while ignorance, false perceptions, unsafe practices regarding menstruation and reluctance of the mother to educate her child are also quite common among them. Thus, the above findings reinforce the need to encourage safe and hygienic practices among girl students and bring them out of traditional beliefs, misconceptions and restrictions regarding menstruation.

5.2 Recommendation

The study recommends that: society must abandon their poor traditional customs which discourage girls from participating in a particular activity when they are in the menstruation period. In some traditions, girls are not allowed to interact with others when they are in a menstruation period. Traditional leaders and female guardians should play a pivotal role in teaching girls about menstruation and resolving challenges among school girls.

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