

Coping with Menstrual Hygiene Challenges Faced by School Going Adolescents at Mukono Primary School, Kayonza Sub-County, Kanungu District

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Abstract:

Background: Adolescence is a crucial period in the life of a girl child because of its unique features. Menstrual hygiene has been an issue of global importance as far as girl child education is concerned. Studies have revealed that girls generally have insufficient knowledge regarding menstruation prior to menarche, and that most of them do not know the source of menstrual blood. More than 70% of primary school going adolescents miss 3 days every month, about 11% of the total school days per term due to menstruation. This is associated with increased school dropouts rates and poor academic performance. Thus the purpose of the study was to examine challenges and establish ways of coping with menstrual hygiene challenges among primary school going adolescents such that school attendance during menses can improve.

Materials and Methods: Descriptive design was used to establish ways of coping with menstrual hygiene challenges; data collection was done using in-depth individual interviews. A total of nine (09) participants were selected using a purposive sampling technique, and the data collected was analyzed using thematic content analysis.

Results: Themes generated from challenges included personal attributes such as pain, teasing by boys and fear of sharing menstrual issues with guardians, teachers and friends. Another theme was resources which had the categories of; lack of pads, no designated room for changing, lack of water to use after changing. Ways of coping were either positive, like confidence, use of menstrual charts, speaking about menses among others and then negativity included hiding from others and not telling answers in class.

Conclusion: Adolescents faced numerous challenges in their menses and coped through school absenteeism and less class participation which is associated with poor performance in class. Therefore, interventions to improve school attendance and class room participation are crucial for better outcomes of academic performance among adolescent girls.

Key Word: Menstrual Hygiene; Menstruation; Menstrual cycle; Adolescents, Challenges, Coping mechanism

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I. Introduction

Adolescence is a period in life when an individual is neither a child nor an adult. This period is characterised by a spurt in physical growth and psychological changes coupled with changes in social perception^{1,2}. Specific to adolescent girls, the most striking change and related issues are; onset of menstruation, menstrual hygiene management as well as ways of coping with menstrual challenges respectively. Appropriate menstrual hygiene management among adolescents is been hindered by taboos, cultural beliefs and secrecies surrounding menstruation. Women and girls experiencing menses have been described as impure, dirty, contaminated and sometimes exempted from social gatherings³.

Globally, about 15-20% of schools going girls have been reported to have missed school due to issues related to menstruation and its management^{4,5}. Meanwhile in some of the developed countries, menstrual hygiene management has already been incorporated in to the school curriculum in that matters related to menstruation are taught as one of the components for all the students including boys⁶. It has been reported that women/girls usually stay in isolation during the time when they experience their menses because discussing menstrual hygiene issues with parents, peers, and teachers or friends is associated with shame and fear as well as embarrassment^{7,8}.

In the sub Saharan Africa, studies have also revealed that many school going adolescents miss school and others get humiliated by their counter parts (boys) just because they have soiled their clothes with menstrual blood accidentally⁹. In other related studies in SSA, it has also been noted that girls and women isolate themselves during menses, some of the school going girls report not participating in co-curricular activities because they are in their menses and this makes it easy for the boys to get to know about them (girls), thus been associated with stigma¹⁰. Relatedly, appropriate menstrual hygiene management is more effective for girls who are supported by their peers as it gives them morale not to miss school¹¹.

Specific to Uganda, enough literature suggests that school absenteeism among adolescent girls is highly associated with menstruation and its management⁷. Most girls miss about eight (8) days of the total school days per term due to menstrual problems silently as they can't easily and freely share with their peers, colleagues, parents and teachers about menstruation and its management¹⁰. And majority of these absentees abscond school due to abdominal cramps during menses, fear of been laughed at by the boys and lack of sanitary pads to change at school. This might be so because studies in Uganda have revealed that menstruation is still a taboo, a private matter; shrouded in myths and negative beliefs; causes trauma/silent suffering on the side of the girls and even women. This causes school-going girls to absent themselves from school or even drop out entirely thus leading to missed opportunities in life and failure to enjoy their right to education¹². On a certain note, studies have revealed that when girls share their menstruation issues with peers including boys easily, there is likelihood of reduced absenteeism during menstruation¹⁰.

However, there is paucity of data regarding issues related to breaking the silence about menstruation, ways of coping with menstrual hygiene related problems despite the fact that many NGOs and the government have come up with ideas of making reusable pad, giving sanitary pads for free to some of the school going girls and provision of WASH services in some schools. Studies have also shown that despite the availability of these sanitary pads at school, few girls come for their utilization; a case in point might be that there are some barriers to easy sharing of information on menstruation and its management coupled with inappropriate ways of coping with the same issue amongst the adolescents^{7,8,10}.

Locally, there is sufficient literature that denotes that adolescent girls do miss school, lack knowledge, have poor perceptions and inappropriate practices regarding menstruation and its management.

The government, non-governmental organisations, humanitarians and many other concerned people have launched campaigns regarding the solutions to issues arising during this crucial period in the life of a girl child but school absenteeism remains a major issue. It is therefore, based on this background that there is need to establish the relationship between school absenteeism, knowledge, attitude and practices regarding menstruation and its management as well as identifying ways of coping with menstrual challenges among school going adolescents so as to bridge this gap.

Despite the concerted struggles by the government of Uganda, non-governmental organisations, United Nations agencies, grassroots women's organizations, multinational feminine hygiene companies, and social entrepreneurs, and many other humanitarians including individuals like Stella Nyanzi to address issues related to menstruation and its management, over 70% of all primary school going children in Uganda do miss up to 11% of their school days termly. Girls have reported issues associated with menstruation such as use of non-absorbent and uncomfortable menstrual cloth and inadequate provision of sanitary materials, water, sanitation and hygiene (WASH) facilities in schools, social stigma, and lack of support from caretakers among others⁶. Much has been done about knowledge, attitude, practices and perception related to menstrual issues but still the problem of school absenteeism during menses persists. The major aspects of challenges and coping mechanisms have been considered less.

Challenges with sharing information on menstruation and its management, and establishing appropriate ways of coping with menstrual hygiene challenges remains a gap¹³. From observation, most girls who have reached their menarche in this area have dropped out of school, and anecdotal evidence has it that those still in school at least miss three days monthly and the reason for this absenteeism is not known. It is also not known if there could be any challenges faced by girls during their menses, which may also prevent them from easily sharing issues related to menstruation with peers, colleagues, even parents and teachers and fail to attend school as well. Also, ways of coping with these challenges need to be identified such that the gap of continuous absenteeism among girls could be addressed. This has compelled the researcher to conduct this study to identify challenges and ways of coping with menstruation and its management.

Aim of the Study

The aim of this study was to establish ways of coping with menstrual hygiene challenges among school going adolescents at Mukono primary school.

Specific Objectives

To explore challenges faced by primary school adolescents during menstruation.

To establish ways of coping with menstrual hygiene challenges and its management among school going adolescents at Mukono Primary school.

Research Questions

What are the challenges faced by primary school adolescents during menstruation?

What are the ways of coping with menstrual hygiene challenges and its management among school going adolescents at Mukono primary school?

Significance of the Study

“As we prepare to move into the programming phase targeting the SDGs, there is need to formulate targets and indicators to guide the entire processes involved therein. This necessarily calls for a baseline survey to determine the current status regarding the set indicators”^{14,15,16}. Menstruation is an integral and normal part of human life in women and girls, indeed of human existence. Menstrual hygiene is fundamental to the dignity and wellbeing of women and girls and an important part of the basic hygiene, sanitation and reproductive health services to which every woman and girl has a right,

It was envisioned that findings from this study would add to the available information on menstruation and menstrual hygiene management and improve adolescent experience during menstruation, thus enhancing regular attendance of school even if in menses.

Theoretical framework

In relation to research, the theoretical framework is a structure that can hold or support a theory of a research study; it introduces and describes the theory that explains why the research problem under study exists¹⁷.

Liberal Feminism

“Feminism” is about equality of the sexes and activism to achieve such equality for women¹⁸. The UN secretary states “There is no tool for development more effective than the education of girls”. No other policy which is likely to raise economic productivity, lower infant and maternal mortality, improve nutrition and promote health other than girl child education¹⁵. Girls in SSA where Uganda lies bear disproportionately high burdens of inequality right from primary schools and worse in secondary. According to Alison Jaggar (1983), she described liberal feminism as a theory and work that focuses more on issues like equality in the workplace, in education and in political rights with more emphasis on women and girls.

According to this theory, all forms of prejudices, biasness and discriminatory behavior should be done away with and people should be considered equal for the community to be successful. All the boys and girls in education should be given equal opportunities without interference for them to excel in their studies. The liberal feminist seeks to remove all challenges and barriers to girls and women freedom of choice and equal participation in every concerned area. In this regard, therefore, school going adolescent girls should have appropriate ways of coping with menstruation and any barriers to easy sharing of information eliminated, such that they can actively participate in school activities, attend school in uniform during menses.

II. Material And Methods

This descriptive study design was carried out among adolescent studying at Mukono primary school between January 2020 to December 2020. A total of 9 adolescents age 10-19 years were interviewed.

Study Design: The study employed descriptive study design; which according to Lambert (2012) is a recommended design when a clear description of a phenomenon (menstrual hygiene challenges and ways of coping) is required. The study used qualitative methods of data collection to establish ways of coping with menstrual hygiene challenges among primary school adolescent girls of Mukono primary school, one of the rural schools in Uganda. This method was chosen because the problem of school absenteeism versus menstrual issues has not been well understood from previous studies. Much has been done in the aspects of knowledge, attitudes, practices, perceptions, cultural norms surrounding the menstruation among many others, but still young girls continue to miss about 11% of their school going days termly. This method would therefore, seek to have a better understanding of this existing problem, however, it did not necessarily provide conclusive results.

Study Location: The study was carried at Mukono primary school in Kayonza, Kanungu district. It's about 150km from Mbarara, and found within the catchment area of Bwindi community hospital. This site was chosen because about a third of the population in this school is the pygmies who were displaced from the Bwindi impenetrable forest and are still struggling to catch up with the rest of the world. It is evident from previous studies that girls in rural schools are more likely to miss more school days during their menses than their counterparts in urban schools. Menstruation been integral to the life cycle of women, it was important to establish ways of coping with menstrual hygiene challenges in this population. Also, from observations, most of the services aiming at creating awareness about menstruation have not been fully accessed by this population, thus another rationale for choosing this study site.

Study Duration: January 2020 to December 2020.

Sample size: 9 patients.

Sample size calculation: The sample size for this study was determined by a principle of redundancy where additional sampling did not yield new information. According to researchers (Meri, 2013; Sim, Saunders, Waterfield, & Kingstone, 2018; Penner, et al., 2012), 6-14 participants may be enough for semi-structured interviews. Therefore, study had a sample of 9 participants because additional participant never yielded new information or themes as observed in the data¹⁹.

Subjects & selection method: This study population consisted of all adolescent girls aged 10-19, attending school at Mukono primary school in Kayonza sub-county, Kanungu district. These were basically girls in primary seven (7), who had had their menarche. The study used purposive sampling method. This technique was selected because it focused at selecting those individuals whose responses would provide particularly useful information for the research. This is a non-probability sampling method commonly used in health care studies. It is inexpensive, accessible and the method allows the conduct of studies on topics that could not be examined through the use of probability sampling

Inclusion criteria:

1. Female adolescents
2. Those who have reached menarche
3. Aged 10-19 years,
4. Accepted to participate in the study.

1.

Exclusion criteria:

1. Absent during the time of data collection;
2. Sick

Procedure methodology

After approval of research proposal by Faculty review committee, an introductory letter was sought from the faculty/department, and then presented to the head teacher of Mukono primary school seeking for permission to collect data. After administrative clearance by the head teacher, he then contacted the senior woman teacher to identify girls who would be eligible for this study from the school registers. We followed the covid-19 directives before commencing data collection. Purpose of the study was explained to the participants to gain their consent. Every participant was offered a face mask, and social distance of one (1) metre was also observed throughout the period of data collection. The interview guides were basically in English but some questions were interpreted in Runyakitara where the need arose such that no information was left out due to lack of proper understanding. The interviews lasted between 35 and 45 minutes, and were tape recorded and transcribed with the participants' permission. Extensive ethical attention was given to how researcher will protect participants during data collection. Opportunities were provided for participants to reply and liaise with the researcher during this process. Field notes were also taken during the interviews to assist with the transcribing processes.

Research instrument: This study used semi-structured interview guide to collect information from the identified sample size. This was adapted from previous related studies on menstrual hygiene management and ways of coping. As proposed by previous researchers^{17,19}. The interview guides contained content mapping and content mining questions. In this, the content mapping questions allowed the researcher to widen the participants' perspectives, stimulate thoughts and experiences, as well as ensure comprehensive coverage to probe and obtain detailed and clear descriptions of menstruation, its challenges and ways of coping. The questions were presented in form of scenarios after obtaining less information based on the open ended questions.

Statistical analysis

Content analysis was used to analyze data from opinions, feeling and expressions of the participants regarding the ways of coping with menstrual hygiene challenges as well as the challenges. According to (Marshall & Rossman, 2011), analysis of qualitative data involves organizing the data, familiarizing with the data by reading and re-reading the narratives of participants so as to understand the data as a whole. This was then followed by identifying segments/phrases related to the participants opinions, feelings, and expressions regarding menstrual hygiene challenges and ways of coping. Transcripts were read line by line and phrases of similar meanings, differences and contradictions were identified and coded anonymously. Key concepts were identified and merged into categories and themes.

Word and phrase repetitions, commonly used words/phrases were put together for example, stomach pain, waist pain and back pain was phrased as menstrual pain, lack of pad, I don't have what to use, I use torn pieces of clothes were put together as lack of pads and so forth.

Ethical considerations:

Research proposal was presented to the faculty review committee (FRC), faculty of medicine, MUST. After acceptance, an introductory letter was then obtained from the administration (research coordinator), from the department of nursing seeking for ethical clearance. Administrative clearance was obtained from the head teacher on the prepared assent form to confirm consent on behalf of the pupils since the study participants were below the legal age of signing a legal consent according to the constitution of Uganda. In short, the participants assented after obtaining consent from the head teacher. Anonymity was ensured throughout the interview as the participants were encouraged not to mention names during the interviews. Confidentiality was also highly guaranteed through restricting data access to only those who were directly involved in the study. In addition, no study subject was coerced nor forced while participating in data collection. Lastly but not least, participants were guaranteed freedom to decline participating in the study in case they were not interested to proceed.

III. Result

The findings have been presented in tables; however, the expressions of some of the participants have been presented the way they were mentioned. This included the socio-demographic data and themes generated from challenges and coping mechanisms.

Social demographic characteristics

The socio-demographic characteristics indicated that most (56%) of the participants were aged 14-17 years and majority (67%) had their first menarche at the age of thirteen.

One participant belonged to the Moslem community as the majority were Christians.

Eight of the nine participants stayed with caretakers who earned money through farming and majority (44.4%) stayed with both real parents.

Table 1 Social-demographic characteristics

CHARACTERISTICS	FREQUENCY(N=09)	PERCENTAGE (%)
Age bracket		
10-13	3	33
14-17	5	56
18 & above	1	11
Age at menarche		
12	2	22
13	6	67
14	1	11
Religion		
Moslem	1	11
Christian	8	89
Caretaker		
Both parents	4	44.4
Mother alone	3	33.3
Guardian	2	22.2
Care takers source of income		
Farming	8	89
Business	1	11

Challenges faced by school going adolescents during menstruation

After thorough data analysis, the study generated 3 themes, two of which were under challenges; personal attributes and resources. A theme generated from ways of coping was coping mechanism which was positive and negative.

Table no 2 Themes from challenges faced by adolescents

Theme	Categories
Personal attributes	Menstrual Pain
	Fear of too much bleeding
	Lack of knowledge
	Teasing by boys
	Fear of sharing with male parents/guardians
Lack of resources	Lack of pads
	No rooms for changing pads
	No water for use after changing

Theme 1: Personal Attributes

This theme emerged from 5 Category s which included; menstrual pain, lack of knowledge, teasing by boys, fear of too much bleeding and fear of sharing with male guardians, parents and colleagues.

Category 1: Menstrual Pain

The greatest challenge that most adolescents went through was “menstrual pain”. Most of the participants reported waist pain, stomach pain and back pain as a major challenge they go through during their menstrual periods as captured in this excerpt;

“I felt waist pain the first time I started menstruating, I could lie on my stomach because the pain is too much.....the pain always stops me from going to school”..... (P2).

Some of the participants described the pain as stomach pain as well as a pain due to malaria.

This is seen in the narrative statement below;

..... “When I start my periods, I get a lot of stomach pain.....sometimes I would even thin that I have malaria, because I would also get the pain in my head too”..... (P6).

Category 2: Fear of too much bleeding

A major challenge experienced by adolescents was fear of sudden too much bleeding during menses. Some of the participants feared that menstruation makes one to lose a lot of blood. This fear of periods led them not to go to school because they feared fainting in class due to less blood in their body. This is been reckoned in the excerpt below;

.....”The first day I had my periods, I feared..... I still fear that I will faint because of little blood. Sometimes the teachers take us for P.E in the pitch, since they don’t want anyone to miss and you feel like fainting”..... (P4)

Category 3: Lack of knowledge

Lack of knowledge about the onset of menses even after menarche was a great challenge. Participants exclaimed that their menses don’t always happen on the same dates of the month as they had learned in science, this confuses then and they fail to notice hence end up soiling their uniforms with blood. This makes them embarrassed before their friends and later they miss school such that people can first forget the incidence.

..... “Some girls are not aware of when their periods are going to start, when they start abruptly, they dirty the uniform and get ashamed”..... (P1)

Category 4: Teasing by boys

Girls experienced a challenge of teasing by their counterparts. Boys did not only laugh at girls during their menses, but also gave them bad names. This made them to miss school while others continued attending with fear and anxiety as explained with these quotes.

..... “Boys in my school laugh a lot whenever they see a girl with blood on the skirt”. I got to know that when these girls were menstruating, I felt shy”..... (P9)

.....”Some of these boys even call us names like moon girl, adolescent, it makes me uncomfortable”..... (P4)

Category 5: Fear of sharing with male parents/guardians/teachers

Talking about menstruation with male guardians or teachers was a challenge for adolescents because they didn’t feel the need to tell them yet they don’t go through menstruation. This is captured in the excerpt below;

.....“I find it easy to talk to my mother or my close female friend but not my father.....I fear he might even think am pregnant.....(P1)

Theme 2: Lack of Resources

The theme emerged from 4 Category s which included lack of pads, lack of water for washing, inappropriate disposing places and lack of designated room for changing.

Category 1: Lack of pads

Participants whose care takers could not afford to buy pads regularly faced this challenge. They reported that their mothers couldn’t buy for them pads to use during their menses. Some of them also reported that they have never received any help from government to distribute pads. These have been explained in the extract below;

..... “I always lack pads during my periods..... my mother occasionally sells some foodstuffs to buy me one packet of pad which is sometimes not enough I end up using pieces of cloth as pad”.....(P5).

.....”No...we have never been provided with sanitary pads at school. I have ever heard that schools in town have pads ...but for us here, the teachers always talk about it but it has not reached us yet”..... (P3).

Category 2: No rooms for changing pads

Participants reported that they didn’t have a convenient place where they can easily change the used pads. This made it hard for them to come to school with clean pads knowing well that they will not be comfortable while changing as explained in this statement;

.....“You see....., if we had where to change the pads, it would be easy to carry it in the bag and then go to school... we change in the toilet, when you are bleeding a lot and keep going to the latrine again and again, it becomes easy for the boys to know that you are in your periods which makes me feel bad”..... (P7)

Category 3: No water for use after changing

Being a day school, adolescents reported that there was no water for use after changing pads. Henceforth, it is hard for them to come with clean pads to school.

.....”we cannot easily change our pads when we want because there is no water for washing”..... (P3)

Category 4: Inappropriate disposing facilities

The school had no appropriate disposing places for the used pads. This made adolescents uncomfortable as they couldn't dispose off in the bucket put in an open place where others are seeing. They had reliable information that used pads should not be put in the pit latrine. These have been explained in the statements below;

.....“Hmmm..... see that place where we are supposed to throw our used pads, that small bucket in an open place, no... I can't go there”..... (P6 &P8)

.....“Latrine.....ahhhh the senior woman teacher and other teachers told us not to put used pads in the latrine”..... (p8)

Ways of Coping with Menstrual Hygiene Challenges

Data analysis yielded one major theme; coping mechanisms in relation to the ways of coping with menstrual hygiene challenges.

Table no 3Theme from Coping mechanisms

Theme	Categories
Coping mechanisms	Confidence
	Being open to colleagues and teachers
	Appropriate use of menstrual charts
	Active participation during menses
	Hide away from others
	Don't tell answers in class

Theme: Coping mechanisms

This theme was developed from the following categories; confidence, being open to colleagues and teachers, active participation during menses, appropriate use of menstrual charts, not telling answers in class and hiding away from others.

Category 1: Confidence

This is a positive way of coping with menstrual hygiene challenges where participants were confident as far as menstrual challenges are concerned. Confidence in this study was defined as the ability of the menstruating girl to talk about menstrual hygiene challenges with anyone without fear.This is captured in the statements below;

.....“All I know is that their mums went through it.....so I don't care even if they know about my periods. In future their daughters will also go through the same, and you know it's usually the fathers work to provide everything”. Some of the boys are good, and they make you feel easy after talking to them proudly about menstruation.....” (P2).

Category 2: Active participation during menses

Responses from the participants indicated that they cope up with the stress of menses by being active (participating in physical activity ,class activity) as this gives them the chance not to be recognized by the boys as the menstruating girl.

.....I always make sure i mention answer in class, go for P.E such that no body gets to know that i have periods..... Usually the stubborn boys know that we dont participate in P.E if we have periods so i confuse them like that.(P3)

Category 3: Being open to the colleauges

Participants mentioned openness to other people as a better coping mechanism when faced with menstrual hygiene challenges. Discussing challenges with colleagues and teachers was categorised as a positive coping mechanism because it gave pupils opportunity to attend classes even duiring their menses, this was basically important for those who lacked pads.

.....”When you talk to the matron about problem of periods, she can take you to her home, give you pads and you change immediately, then go back to class”..... (p6).

Category 4 Appropriate use of the menstrual charts

Participants mentioned the need to use the menstrual charts taught in science to ensure that they know when their menses are likely going to begin. This has been reckoned in the statement below;

.....“I think we should follow the charts that they taught us when we were studying menstruation, me I think it will make us to know when to start periods.....We could draw it on a paper and put in our rooms and keep reading it every day” (p2)

Category 5 Hiding away from other people

This is a negative coping mechanism because it made students stay home during menses or fail to participate in class or PE.

Participants thought it is important that girls hide away from the rest during menses to avoid being embarrassed. They suggested that instead of being laughed at, its better you hide, run back home and come when periods are over. This has been stated as underneath;

.....“I suggest girls to stay home or hide away from others during menses.....the problem is seeing you with dirty uniform that has blood.....it is very ashaming.....”(P3)

Category 6: Don't tell answers in class

Participants noted that while giving answers in class, they are usually required to stand up thus there is possibility of seeing their uniform soiled with blood;

.....“We should not be telling answers in class because the boys will see us with dirty uniform” (blood stained uniform)..... (p5)

IV. Discussion

Gender inequality, discrimination, cultural taboos, poverty and lack of basic services often cause girls' and women's menstrual health and hygiene needs to go unmet²⁰. School going adolescent girls may face stigma, harassment and social exclusion during menstruation. All of this has far-reaching negative impacts on the lives of those who menstruate: restricting their mobility, freedom and choices; affecting attendance and participation in school and causing stress and anxiety¹⁶.

Challenges experienced by adolescent girls during menses

Personal attributes: These included menstrual pain, fear of too much bleeding, lack of knowledge, teasing by boys and fear of sharing with parents, teachers and colleagues. The findings of this study indicated that menstrual pain was one of the challenges experienced by adolescents during menstruation. This finding is in line with the findings of (Giovanni, 2012; Mason et al, 2017) who found out that one out of every four women in menses experienced menstrual pain, some of them had emotional perception of fear bleeding too much during menses. This was especially observed when there is need to go for PE. Still under this theme, was the challenge of lack of knowledge, where adolescents didn't know when their periods are likely going to start. Once they start without their notice, girls end up getting embarrassed because of soiling their uniform with blood. This is in line with results of (Miuro et al, 2018) which indicated that lack of knowledge and confidence in issues related to menstruation was present for both newly-menstruating and experienced girls was a challenges. Some of the girls were teased by boys during their menses and others failed to share menstrual hygiene issues with parents, teachers and colleagues. Similar findings are revealed by (Mason et al, 2017) in which boys noted that girls don't share anything about their menses with them, they usually isolate themselves from them.

These findings are contrary to the results of (Benshaul, Gomez, Naome, Chai, & Nyanza, 2020; Gibson, & Yamakoshi, 2019) which revealed that there is no need to buy sanitary pads secretly even when being seen by men.

Lack of Resources for use during menses: This theme explains inadequate access to materials and facilities that are needed for the effective management of menstruation. These included lack of pads, no rooms for changing used pads. Participants explained lack of pads to use during menses, and lack of private rooms to change used pads as a major challenge that prevents them from attending school. Similar findings are noted in the study of (Trinies, Caruso, Sogoré, Toubkiss & Freeman, 2015; Trinies, Caruso, Sogoré, Toubkiss & Freeman, 2015; Schmitt, et al, 2017) where it was noted that Adolescents are faced with challenge of inadequate access to sanitary pads during their periods. However, this is contrary to most of the literature that talks about availability of reusable pads for girls. For example a press release by (Nakibuuka, 2019), aired out that most adolescent girls in Karamoja sub-region are able to make the reusable sanitary pads hence lack of pads is not a challenge to them. However, it seems most of these projects are at the moment concentrated in the northern part of the country because none of the participants mentioned about the distribution of sanitary pads or training on making of reusable one in this community. Lack of water for use after changing and inappropriate changing places, were aired out by participants as a major challenge especially in day schools. This was basically for the few who managed to have pads. They failed to change the used ones and didn't have access to water for washing hands after changing. This was described as uncomfortable as they thought that their hands could smell after touching on a used pad. These findings are comparable to results of (Restogia et al., 2019) which portrayed lack of dustbins for disposing used pads and soap for washing as challenges faced by menstruating girls. When disposed inappropriately, the used menstrual material can cause environmental degradation since

most of them are partly made of non-biodegradable materials, and this is associated with more costs to the institution.

Coping mechanisms: The coping mechanisms were either positive or negative. **Positive coping mechanisms included the following;** confidence, being open to the colleagues and female teachers, appropriate use of the menstrual chart and active participation during menses. Similar findings are seen in studies by Mason, et al., (2017; Patel et al, 2019; Chinyama et al, 2019 & UNICEF, 2018) that found that girls and boys though there is no need to hide issues of menstruation from anyone since it's a natural God given thing. Despite the fact that adolescents mentioned this as an appropriate coping mechanism, it was evident on their faces that they may not be in position to employ such mechanisms due to the challenges that they go through during menses. In relation to use of menstrual charts/drawing them in their rooms, this seemed an appropriate way because during teaching of the physiological aspects involved in menstruation cycle, the different phases of the cycle are usually drawn together with the hormonal changes that occur. These include phases in the ovarian cycle; folliculogenesis, ovulatory and luteal phases and changes in the endometrium which includes, menstrual, proliferative and secretory phases. Appropriate knowledge of this can easily help one to know when menses are going to start. Despite being a great suggestion to keep girls aware of their menses, this finding was contrary to results indicated that that most of the participants did not know the source of menstrual blood and phases of the menstrual cycle. It could be possible that even adolescents in this study did not use the menstrual charts to help them know when to start menses, because this was more of a proposal than the actual accomplishment to be taken to improve school attendance. For active class participation, participants proposed that they could cope up with the stress of menses by being actively participating in physical activity and class activity) as this gives them the chance not to be recognized by the boys as the "menstruating girl". This suggestion is different from the finding of (Mugendi, 2014; Miiro et al, 2018; Kansime, Hytti, Nalugya, Nakuya, Namirembe, Nakalema, Neema, Tanton, Alezuyo, Musoke, Torondel, Suzanna, Ross, Bonell, Seeley, & Weiss, 2020) who found out that class participation during menses was very low among adolescents and some of them even dropped out of school due to several challenges they go through.

As negative coping mechanism, adolescents coped through hiding away from other people and not telling answers in class to avoid embarrassment. They explained the need not to be seen by others once you are in your menses. Similar findings were noted by (Mason et al, 2017; Kaur, et al, 2018) where the participants suggested that menstruating girls should not sit near boys in class, should not go the places of worship, should not drink water from the school borehole. Such seclusions from the community are a common misconception about menstruation because menstruation itself is not a contagious disease that can be spread from one person to another. These actions therefore need to be improved such that school attendance among girls during menses can improve and thus they can compete equally with boys at school at the same level. These similarities are attributed to the fact that studies were both conducted among participants of similar age categories.

V. Conclusion

Adolescents faced numerous challenges in their menses and uniquely the lack of knowledge due to irregularity of the cycle which is common among new girls who have had their menarche. Henceforth, they coped through school absenteeism and less class participation which is associated with poor performance in class and increased school dropout rates. There were basically no practiced coping mechanisms but rather suggestions of ways of coping with menstrual hygiene challenges.

Recommendations

This study therefore recommends the following;

1. Incorporation of the psychological aspects of menstruation and its management to the curriculum, instead of only teaching the physiology;
2. Improved sanitary facilities for management of menstrual hygiene in day schools to improve school attendance during menses;
3. The study further recommends large-scale studies on the reproductive health effects of poor menstrual hygiene practices to fully understand the effects of menstrual hygiene management beyond school attendance and academic performance

References

- [1]. Patel, S. M. , Shefalee, P. V., & Archana, M. D, (2019). A Study on the Knowledge, Attitude and Practices Regarding Menstrual Hygiene among Adolescent Girls in Schools in a Rural Area of Goa. *Journal of Clinical and Diagnostic Research.*, 13(6), pp. 7-10.
- [2]. Wilbur, J., Belen, T., Shaffa, H., Therese, M., & Hannah, K, (2019). Systematic review of menstrual hygiene management requirements, its barriers and strategies for disabled people. *PLoS ONE*, 14(2), pp. 1-2.
- [3]. Ali, G. (2019). Period taboo. *Why can't we talk about menstruation*, 24 February, pp. 1-5.
- [4]. Shah, V., Helen M. N., Fatou, S., Yamundao, J., Ebrima, C., Omar, K., & Belen, T, (2019). A rite of passage: a mixed methodology study about knowledge, perceptions and practices of menstrual hygiene management in rural Gambia. *BMC Public Health*, 19(277), pp. 1-15.

- [5]. Michael, R. (2017). *The conversation*. [Online] Available at: <https://www.theconversation-com.cdn.ampproject.org> [Accessed 20 December 2019].
- [6]. Mason, L., Elizabeth N., Kelly, A., Frank, O. O., Alie E., John, V., Richard, R., Kayla, F. L., Aisha, M., & Penelope, A. P-H, (2013). 'We Keep It Secret So No One Should Know' – A Qualitative Study to Explore Young Schoolgirls Attitudes and Experiences with Menstruation in Rural Western Kenya. *LLOS ONE*, 8(11), p. e79132.
- [7]. Miiro, G., Rwamahe, R., Jessica, N.M., Kevin, N., Saidat, M., Juliet, N., Suzanna, F., Belen, T., Lorna, J., Gibson, David, A. R & Helen A. W, (2018). Menstrual health and school absenteeism among adolescent girls in Uganda (MENISCUS): a feasibility study. *BMC Women's Health*, 18(4), pp. 1-13.
- [8]. Budhathoki, S.S., Castro, S.E., Bhattachan, M., Sagtani, R.A., Rayamajhi, R.B., Rai, P., & Sharma, G, (2018). Menstrual Hygiene Management among Adolescent girls in aftermath of Earthquake in Nepal. *BMC womens health*, 18(33), p. 1.
- [9]. Balqis, M., Insi, A., & Mulya, R, (2016). Knowledge, Attitude and Practice of Menstrual Hygiene among High Schools. *Althea Medical Journal*, 3(2), pp. 231-237.
- [10]. Egunyu, D, (2014). A bleeding shame. *why is menstruation still holding girls back*, 28 May, pp. 1-5.
- [11]. Torondel, C., & VanLeeuwen, B, (2018). Improving menstrual hygiene management in emergency contexts: Literature review of current perspectives. *International journal of Women's health*, 10(2147), pp. 169-186.
- [12]. Kansime, C., Hytti, L., Nalugya, R., Nakuya, K., Namirembe, P., Nakalema, s., Neema, S., Tanton, C., Alezuyo, C., Musoke, N.S., Torondel, B., Suzanna, C. F., Ross, A.D., Bonell, C., Seeley, J., & Weiss, H.A, (2020). Menstrual health intervention and school attendance in Uganda (MENISCUS-2): a pilot intervention study. *BMJ Open*, 10(11), p. e031182.
- [13]. Kiapi, E. M, (2019). *Meet the boys championing menstrual health in schools*, Kampala: UNFPA-Uganda.
- [14]. UN, (2012). Millenium development goal number 3: *where do we stand*, 23 october, pp. 1-18.
- [15]. UNICEF, (2008). Girls Education. *Girls education campaigns*, 30 june.
- [16]. UNICEF, (2019). *Guidance on Menstrual Health and Hygiene*. 1st ed. New York: Phil Poirier and designed by Noha Habaieb.
- [17]. Wang'anya, A. A, (2018). Effects of provision of sanitary towels on performance of adolescent girls' in primary schools in Kenya: A case of matungu Sub-county, Kakamega County. *not published*, pp. 91-97.
- [18]. Burrows, A., & Johnson S, (2005). Girls' experiences of menarche and menstruation. *Journal of Reproductive and Infant Psychology*, p. 235-249.
- [19]. Gray, J.R., Grove, S.K., & Sutherland, S, (2017). *Burns and Groves': The Practice of Nursing Research; Appraisal, synthesis and Generation of evidence*. 8th ed. St. Louis Missouri: Saunders Elsevier .
- [20]. Yamakoshi, B, March (2019). *Guidance on Menstrual Health and Hygiene*. first ed. New York: United Nations Plaza.
- [21]. Benschaul, A.T., Gomez, S.A., Naome, H.B., Chai, R., & Nyanza, C.E, (2020). Period Teasing, Stigma and Knowledge: A Survey of Adolescent girls and boys in Tanzania. *PLoS ONE*, 15(10), p. e0239914.
- [22]. Gibson, L & Yamakoshi, B, (2019). *Guidance on Menstrual Health and Hygiene*. First edition ed. New York: UNICEF for Children.
- [23]. Schmitt, M.L., Clatworthy, D., Ratnayake, R., Klaesener, N.M., Roesch, E., & Wheeler, E, (2017). Understanding the menstrual hygiene management challenges facing displaced girls and women: Findings from qualitative assessments in Myanmar and Lebanon. *Journal Conflict and Health*, 11(19), pp. 1-11.
- [24]. Rastogia, S., Aparna, K., & Pulkit M, (2019). Uncovering the challenges to menstrual health: Knowledge, attitudes and practices of adolescent girls in government schools of Delhi. *Health Education Journal*, 78(7), p. 839-850.
- [25]. Chinyama, J., Jenala C., Cheryl, R., Mercy, M., Lavuum, V., Charity, S., Wilbroad, M., Roma, C., & Anjali, S, (2019). Menstrual hygiene management in rural schools of Zambia: A descriptive study on knowledge, experiences and challenges faced by school girls. *BMC Public Health*, 19(16), pp. 1-11.

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