

“That thing....that problem....that sickness”: Perception and practices towards menstruation in 18 rural primary and secondary schools in Jinja and Mayuge districts.

Baseline Survey Report-August 2017



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AMPLIFYCHANGE

“.....and that thing when it comes, sometimes, some girls don’t know, especially the senior one students, they feel shy, they feel ashamed in class..”

(Senior Woman Teacher: Interview V-rural primary school)

“.....menstruation is when a girl gets sick....she should be taken to a clinic”

(Male participant: Focus Group Discussion IV-rural secondary school)

“.....we lack a private area where girls can go to clean themselves when they start having that problem. So that problem has been challenging. But per now, when a girl gets into that problem we just send her home...”

(Senior Woman Teacher: Interview IV-rural primary school)

Abstract

Introduction: Menstruation is culturally stigmatized natural biological event. In Uganda, adolescent girls in primary and secondary schools miss school due to menstruation. This baseline study was conducted to assess perception and practices of adolescents aged 9-17 years in rural primary and secondary schools in Jinja and Mayuge districts.

Methodology: The survey used a descriptive design employing both quantitative and qualitative methods of data collection. A total of 1102 adolescents, Senior Women Teachers (12), Senior Men Teachers (4), two school administrators (2) and five (5) female parents of adolescent girls were included in the study using a simple random and purposive sampling methods. Permission and informed consent was first sought before collecting data from respondents.

Primary data collection was conducted using a pre-tested semi-structured questionnaire, interview guides and Focus Group Guides (FGD).

Collected data was entered into the Statistical Package for Social Scientists (SPSS), where it was analyzed using descriptive statistics.

Results: Survey findings showed that most adolescents had poor knowledge about menstruation. Nineteen percent of adolescent girls aged 10-14 had never heard the word menstruation, 55.9% did not know how or why women/girls undergo menstruation, 94.5% did not know the source of menstrual blood, while 30.6% of girls and most boys in FGD believed that menstruation is a disease/curse. The major sources of information about menstruation were senior women teachers (SWT) (32%) and mothers (31.9%). Besides providing inadequate and incorrect information to adolescent girls, mothers and teachers were an indirect source of self-stigmatizing beliefs and views about menstruation.

Most girls (39.9%) were using pieces of cloth to manage menstrual flow. Other materials used included sanitary pads, cotton wool, homemade reusable pads, reusable pads donated by NGOs, 2 panties, toilet paper, sitting in the sand and local herbs.

More than half of adolescent girls (58.3%) rated the pain they experience during menstruation from 5-10, 1 being the lowest and 10 being the highest. There were perceptions among some girls (28.1%) that sex cures painful periods and that menstruation means that a girl is ready for marriage (18.1%).

Most schools (15 out of 18) did not have washrooms where girls could change pads and clean themselves during menstruation. A considerable number of girls (11.8%) were not cleaning themselves, while (15.6%) were not changing pads during menstruation.

Less than half (41.6%) or 4 out of every 10 adolescent girls missed school due to menstruation. The number of days missed ranged from 4 to 20 with an average of 9.3 or 3.1 days per cycle and a standard deviation of 2.5. The major causes of absenteeism included inadequate sanitary pads (57.7%), stigma associated with menstruation (43.5%), lack of a place to change and clean (34.2%) and pain associated with menstruation (21.5%).

Most girls (59.3%) who missed school due to menstruation were concerned that it had an impact on their academic performance.

Conclusion: The project should improve access to menstrual health information among adolescent girls and boys, teachers and parents, facilitate production of homemade reusable pads and reduce stigma associated with menstruation.

In addition, CCUG should design and plan for projects to improve access to privacy (washrooms) and water and soap to facilitate timely cleaning and changing of pads by adolescent girls in rural primary and secondary schools.

There is also need for CCUG to engage different stakeholders to advocate for the fulfillment of Menstrual Health Rights in rural primary and secondary school.

Table of Contents

Abstract	ii
Table of Contents	iv
List of Tables	iv
List of Figures	v
Acknowledgement	v
List of Abbreviations	vi
1.0 Introduction	1
2.0 Survey Implementation	1
3.0 Methodology.....	2
3.1 Survey Design, Setting and Population	2
3.2 Sample Size and Sampling Procedure.....	2
3.4 Data Management and Analysis	3
3.5 Ethical Considerations	3
4.0 Findings	3
4.1 Menstrual Health Knowledge	5
4.1.2 Experiences related to Menstruation	8
4.2 Perception towards Menstruation	11
4.3 Stigma Associated with Menstruation.....	13
4.3.3 Practices related to Menstruation	20
4.3.3.1 Enabling environment for Menstruation in schools	21
4.4 Menstruation and School Attendance	23
4.5 Ways of Improving Menstrual Hygiene and Management.....	26
4.5 Discussion.....	27
4.5.1 Knowledge and Perception	27
4.5.3 Practices related to Menstruation	30
4.5.4 Menstruation and School attendance	30
4.5.5 Ways of improving menstrual hygiene and Management in rural schools	32
4.6 Limitations	32
4.7 Conclusion and Recommendation.....	33
4. 8 References.....	34

List of Tables

Table 1: Age and class of respondents	4
Table 2: Hearing and duration of a normal menstrual period	5
Table 3: Source and good points about menstruation	6
Table 4: Age and being taught about menstruation	8
Table 5: Duration and experiences during menstruation	9

Table 6: Respondents perception towards menstruation.....	11
Table 7: Internal stigma associated with menstruation among respondents	13
Table 8: Comparisons for among girls who had started menstruation and those who had not for internal stigma	17
Table 9: External stigma among menstruating girls	17
Table 10: Summary of ratings of stigma experienced by adolescent girls during menstruation	19
Table 11: Absorbent materials used during menstruation	20
Table 12: Washrooms, bathing and disposal of used sanitary pads	21
Table 13: Days missed due to menstruation	23
Table 14: Effect of menstruation on academic performance of adolescent girls.....	25
Table 15: Student’s suggestions on ways of improving menstrual hygiene and Management	26

List of Figures

Figure 1: Whether Menstruation is a normal sexual development	6
Figure 2: Being taught about periods before menarche	7
Figure 3: Source of knowledge about Menstruation	7
Figure 4: Pain management during menstruation	10
Figure 5: Activities that respondents feel should not be done during menstruation	16
Figure 6: Ratings of Internal stigma associated with menstruation	16
Figure 7: Students’ reaction to stigma associated with Menstruation	20
Figure 8: Actions taken in absence of washrooms.....	22

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List of Abbreviations

CCUg	: Community Concerns Uganda
FGD	: Focus Group Discussion
LMIC	: Low and Medium Income Countries
MHM	: Menstrual Hygiene and Management
MoU	: Memorandum of Understanding
NGO	: Non-Government Organization
SMT	: Senior Man Teacher
SPSS	: Statistical Package for Social Scientists
SWT	: Senior Woman Teacher
UNICEF	: United Nations Children's Fund
WHO	: World Health Organization

1.0 Introduction

Menstruation is a normal biological event experienced over much of the lifespan and, thus, is a recurrent feature of women's and girls' lives. In adolescent girls, menstruation marks an important point of transition into womanhood. However, menstruation is culturally stigmatized and women and young girls are discriminated against due to this normal biological event. For example, in some cultures, women and girls are told that during their menstrual cycle they should not bathe (or they will become infertile), touch a cow (or it will become infertile), look in a mirror (or it will lose its brightness), or touch a plant (or it will die) (House et al. 2012).

Most striking is the restricted control which many women and girls have over their mobility and behaviour due to their 'impurity' during menstruation, including the myths, misconceptions, superstitions and cultural and/or religious taboos concerning menstrual blood and menstrual hygiene (TEN, 2007). As such, though previously overlooked, issues related to Menstrual Health Management (MHM) are being recognized as significant contributors to school dropouts among girls (Water Aid, 2013). According to World Health Organization (WHO, 2012), proper MHM entails access to necessary resources: education concerning MHM, menstrual materials to absorb or collect menstrual blood, soap and water), facilities (a private place to wash, change and dry reusable menstrual materials, in addition to an adequate disposal system for menstrual materials)

In Uganda, MHM among girls in rural primary and secondary schools is a challenge. Girls in these settings are less likely to have access to materials and facilities to properly manage menstruation thus resulting in frequent absenteeism from school (Wilson, Reeve, Pitt, Sully & Julious, 2012). In addition, adolescent girls in Uganda are subjected to discrimination and stigma due to stereotypes and misconceptions that have historically developed from misinformation, harmful cultural beliefs and gender inequality (Netwas, 2014).

Community Concerns Uganda (CCUg) with support from AmplifyChange conducted a baseline survey as part of a menstrual health project in 15 primary and secondary schools in Jinja and Mayuge districts.

2.0 Survey Implementation

2.1 Purpose of the Project

The project aims to increase access to information about menstrual health among adolescent girls aged 10-17 years in 15 rural primary and secondary schools in Jinja and Mayuge districts.

2.2 Objectives of the Project

- 1) To increase awareness of menstrual health among 1100 adolescent girls, their teachers and parents to reduce stigma and discrimination associated with menstruation.
- 2) To train 900 peer mentors and 75 teachers in the production of homemade re-usable sanitary pads.
- 3) To initiate 15 health clubs for dissemination of information and support about menstrual hygiene and management in 2 rural primary schools.

2.2.1 Survey Objective

The study aimed at assessing the perception and practices towards menstruation among adolescents in rural primary and secondary schools in Jinja and Mayuge districts.

3.0 Methodology

3.1 Survey Design, Setting and Population

The survey used a descriptive cross-sectional study design employing both qualitative and quantitative methods of data collection. The population included 18 schools of which 15 were primary schools and 3 were secondary schools. The schools were drawn from primarily rural areas in Jinja and Mayuge districts. The survey involved both male and female adolescents aged 10-17 years. It also included Senior Women Teachers (SWT), Senior Men Teachers (SMT), female school administrators and female parents (Key informants) residing near schools that participated in the study. The parents had students in these schools.

3.2 Sample Size and Sampling Procedure

The survey included a total of 1,102 adolescents of which 473 students (42.9%) had not started menstruation while 629 (57.1%) had started menstruation. The survey used a simple random sampling method where research assistants, blind folded, used a lottery method to randomly select names provided by teachers. In addition, purposive sampling was used to select SWT (12), SMT (4), school administrators (2) and five (5) female parents of adolescent girls. Furthermore, 62 boys, who were randomly selected, were included in 8 Focus Group Discussions (FGD).

3.3 Survey Instruments and Data Collection Methods

1. The study used a pretested semi-structured questionnaire designed to address the objectives of the survey. To facilitate comprehension of the tool, the questionnaire was translated into Lusoga for students who had limited understanding of the English Language. The Questionnaire was individually administered to students by a team of trained Research Assistants through a face-to-face method.

2. A Key Informant Guide was designed and used to collect qualitative data from SWT, SMT, school administrators and parents through an oral interview method. The collected data was recorded verbatim using an audio recorder.
3. A guide was designed and used to collect data from male adolescents through Focus Group Discussions.

3.4 Data Management and Analysis

After each day of survey administration, collected data was checked for completeness and coded. It was later stored in spring files. Data was entered into the Statistical Package for Social Scientists (SPSS version 22), where it was cleaned and analyzed using descriptive statistics.

Qualitative data was first transcribed verbatim and then checked by re-listening to the audio while re-reading the transcripts at least 5 times before it was thematically analyzed. A master sheet was developed for each group (teachers, parents and adolescent boys), which was used to make assessments of key issues raised in comparison with quantitative data obtained from pupils and students. The data is presented in narrations.

3.5 Ethical Considerations

Ethical clearance was sought from school administrators weeks before the data collection process began.

CCUg signed Memorandums of Understanding (MoUs) with the schools after comprehensive explanations about the project. In addition, respondents received an explanation of the purpose and nature of the project, confidentiality of the information and the voluntary nature of their participation. Verbal consent was sought from teachers, students and parents before collecting data from them.

4.0 Findings

This section presents findings in accordance with the survey objectives. They are organized according to demographic data, menstrual health knowledge, perceptions towards menstruation, stigma associated with menstruation, practices related to menstruation and its impact on school attendance.

4.1 Demographic Data of Respondents

Table 1: Age and class of respondents

Age	Frequency (n=1102)	Percentage (%)
10 years	85	7.7
11 years	127	11.5
12 years	135	12.3
13 years	233	21.1
14 years	212	19.2
15 years	138	12.5
16 years	85	7.7
17 years	87	8.0
Class		
Primary Three	29	2.6
Primary Four	172	15.6
Primary Five	246	22.3
Primary Six	330	29.9
Primary Seven	98	8.9
Senior One	47	4.3
Senior Two	34	3.1
Senior Three	146	13.2

The majority of respondents (21.1%) were aged 13 years and the mean age was 13 years. The highest number of students (29.9%) were studying in Primary six while the smallest number (3.1%) were studying in Senior two.

4.1 Menstrual Health Knowledge

4.1.1 Knowledge of students about Menstruation

Table 2: Hearing and duration of a normal menstrual period

Hearing about Menstruation	Frequency (n=1102)	Percentage (%)
Yes	891	81
No	211	19
Age of girls who had never heard about menstruation	Frequency (n=211)	Percentage (%)
10 years	66	31.3
11 years	64	30.3
12 years	48	22.7
13 years	29	13.7
14 years	4	1.9
Duration of normal menstrual period	(n=891)	
2-7 days	433	48.6
3-5 days	147	16.5
4-8 days	86	9.7
2-5 days	17	1.9
1-4 days	16	1.8
7-10 days	13	1.5
8 days and above	14	1.6
I don't know	165	18.5

Most respondents (81%) had heard of menstruation, although a significant minority (19%) had not. Respondents had a mean age of 11 years and a standard deviation of 1.1. Clearly, a significant number of girls (211) aged 10-14 years had never heard about menstruation. Among the boys who participated in the survey through FGD, though most had heard of menstruation, they associated it with some kind of sickness that necessitates girls to often be taken to health facilities for treatment.

“...menstruation means a girl is sick, so she should be taken to a hospital or clinic”. (Male Participant: FGD II-rural primary school)

“...if a girl starts menstruation in class, she should be taken to the hospital for treatment...” (Male Participant: FGD II: rural primary school)

On the duration of a normal menstrual period, less than half of respondents (48.6%) were aware that the duration of a normal menstrual period is 2-7 days.

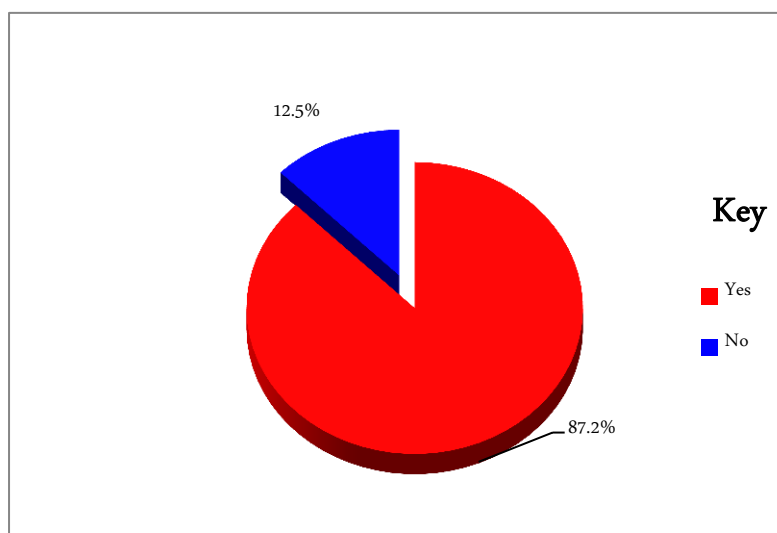
Table 3: Source and good points about menstruation

Source of Menstrual Blood		
Vagina	487	54.7
Private Parts	29	3.3
Anus	28	3.1
Labia	17	1.9
Stomach	65	7.3
Uterus	47	5.3
Ovary	24	2.7
Eggs	2	0.2
I don't know	170	19.1
Others	22	2.5
Good Points about Menstruation		
Sign of fertility	115	12.9
Sign of womanhood	18	2.0
Sign of good health	29	3.3
Shows that you are not pregnant	23	2.6
Cleanses the body	106	11.9
Sign of normality	51	5.7
Sign of Maturity	27	3.0
It has no good point	170	19.1
I don't know	267	30.0
Others	85	9.5

Just over half (54.7%) of respondents mentioned that menstrual blood comes from the vagina while the fewest (0.2%) said it comes from eggs.

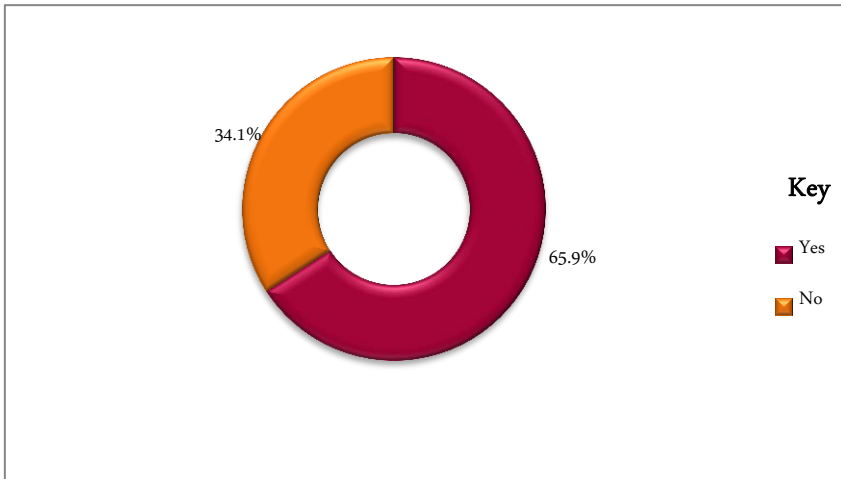
Nearly a third of respondents (30%) were unaware of any positive aspect concerning menstruation.

Figure 1: Whether Menstruation is a normal sexual development (n=891)



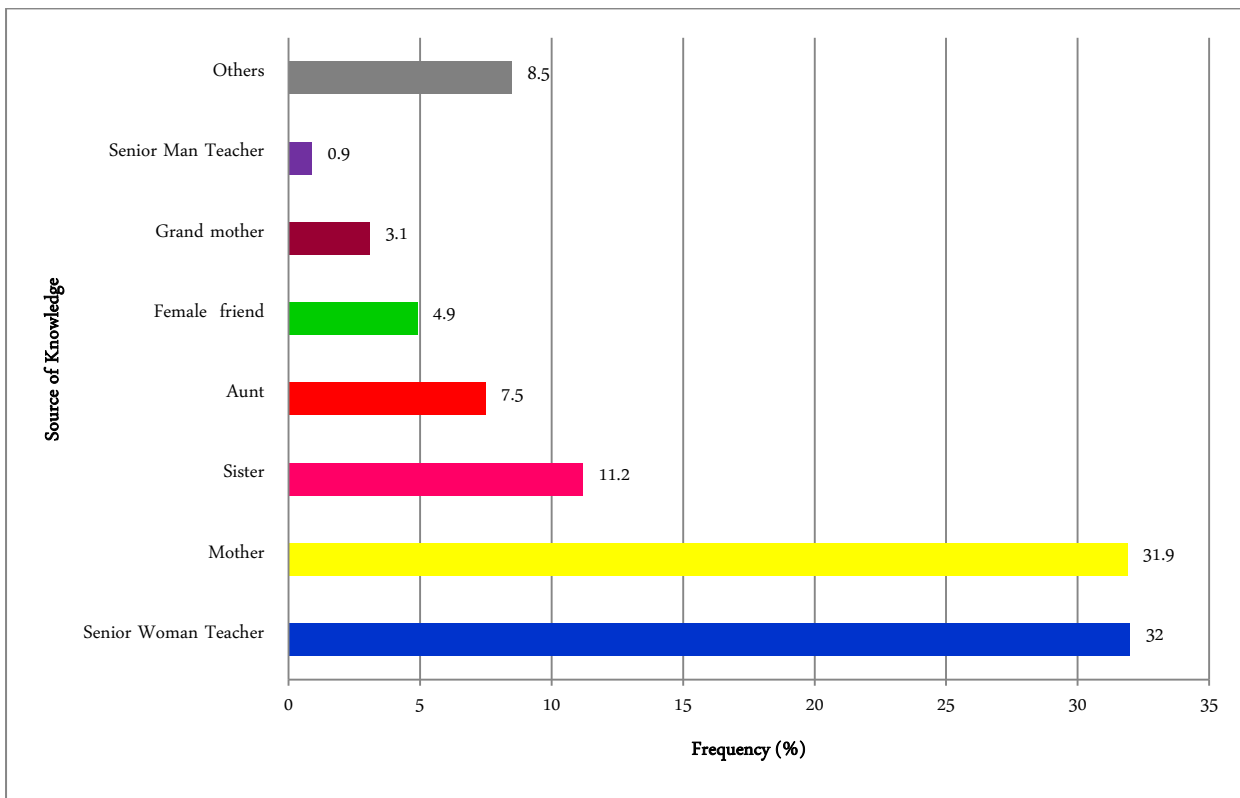
The largest number of respondents (780, or 87.2%) agreed that menstruation is a normal sexual development stage among girls and women, although a small but significant number (111, or 12.5%) disagreed.

Figure 2: Being taught about periods before menarche (n=891)



Of the 891 respondents who had previously heard of menstruation, less than two thirds (587, or 65.9%) had been taught about menstruation before their first period.

Figure 3: Source of knowledge about Menstruation (587)



Less than a third (188, or 32%) of respondents got information about menstrual hygiene from Senior Women Teachers.

4.1.2 Experiences related to Menstruation

Table 4: Age and being taught about menstruation

Age at which respondents had their first period	Frequency (n=629)	Percentage (%)
9 Years	11	1.7
10 Years	29	4.6
11 Years	145	23.1
12 Years	184	29.3
13 Years	140	22.3
14 Years	89	14.1
15 Years	26	4.1
16 Years	5	0.8
Whether respondents were taught about menstruation before first period		
Yes	407	64.7
No	222	35.3

Most female students (29.1%) experienced their first period at about age 12, with a mean age of 12 years and a standard deviation of 1.7. Most respondents (64.7%) had previously been taught about menstruation before their first period. However, according to qualitative data obtained from key informants, the information taught about menstruation was often inaccurate.

For example, some teachers provided wrong information about the age at which girls start menstruation and intimated that during health education, they advise girls who are 11 years of age or older and who have not started menstruation that they are abnormal.

“...when we meet them, especially from P.5 onwards, we tell them that menstruation is normal, so if a girl who is in that stage has not started menstruation, we tell them that she is abnormal. So when she starts menstruation, she knows that it is normal.” (Female Teacher: Interview VIII-rural primary school)

“.....we teach them that when they are 11 and above years, they are supposed to start their periods. So they are supposed to know that it is normal. So, in case one does not get their periods, then they are abnormal.” (SWT: Interview XVI-rural primary school)

This is in contrast to what actually happens as data presented in the above table shows that 40 respondents or 6.3% of students who had started menstruation, had their first period before 11 years. Furthermore, 444 students (70.5%) had their first period when they were aged 12-16 years. This disconnect between girls’ actual age at the onset of menstruation and the information teachers provide may mean that younger students between the ages of 9-10 years are not taught about menstruation prior to their first period, while girls age 12 and over may experience unnecessary fear and distress, believing that it is abnormal to start periods after age 11.

“We got a case of a girl in primary three who had her first period in school. She was so scared and started crying. ‘I am sick and blood is coming from my private parts’, she cried...” (SWT: Interview XIII-rural primary school)

“There was a case of a primary four girl who had her first period at school and she did not know what to do. She did not know what was happening and she started crying...everyone was concerned, the whole school was concerned...and when boys got to know that she had her first period, they started laughing at her...” (SMT: Interview XVIII-rural primary boarding school)

Table 5: Duration and experiences during menstruation

Duration of Menstrual Period	Frequency (n=629)	Percentage (%)
2 days	41	6.5
3 days	262	41.7
4 days	186	29.6
5 days	72	11.4
6 days	21	3.3
7 days	36	5.7
8 days and above	11	1.7
Experiences		
Abdominal Pain	443	70.4
Headache	176	28.0
Nausea	3	0.5
Vomiting	18	2.9
Heartburn	1	0.2
Moodiness	8	1.3
General body weakness	17	2.7
Loss of appetite	10	1.6
Itching of breasts	22	3.5
Others	82	13.0
Pain ¹ rating as experienced during menstruation		
1	85	13.5
2	46	7.3
3	60	9.5
4	71	11.3
5	77	12.2
6	54	8.6
7	58	9.2
8	59	9.4
9	64	10.2
10	55	

Less than half (41.7%) of respondents said their periods take 3 days. The average duration of

¹ Pain was rated using a scale of 1-10, as 1 was considered the least pain experienced and 10 being the worst pain experienced.

respondents' menstrual periods was 3 days with a standard deviation of 1.3. The majority of students (70.4%) reported experiencing abdominal pain during their periods. Although most students (13.5%) rated the pain experienced during menstruation at 1, the average pain rating was 5 with a standard deviation of 2.8.

Most teachers reported that many students experience excessive pain during menstruation and that sometimes, they cannot attend class. Excessive menstrual pain was also mentioned as a cause of absenteeism among menstruating adolescents.

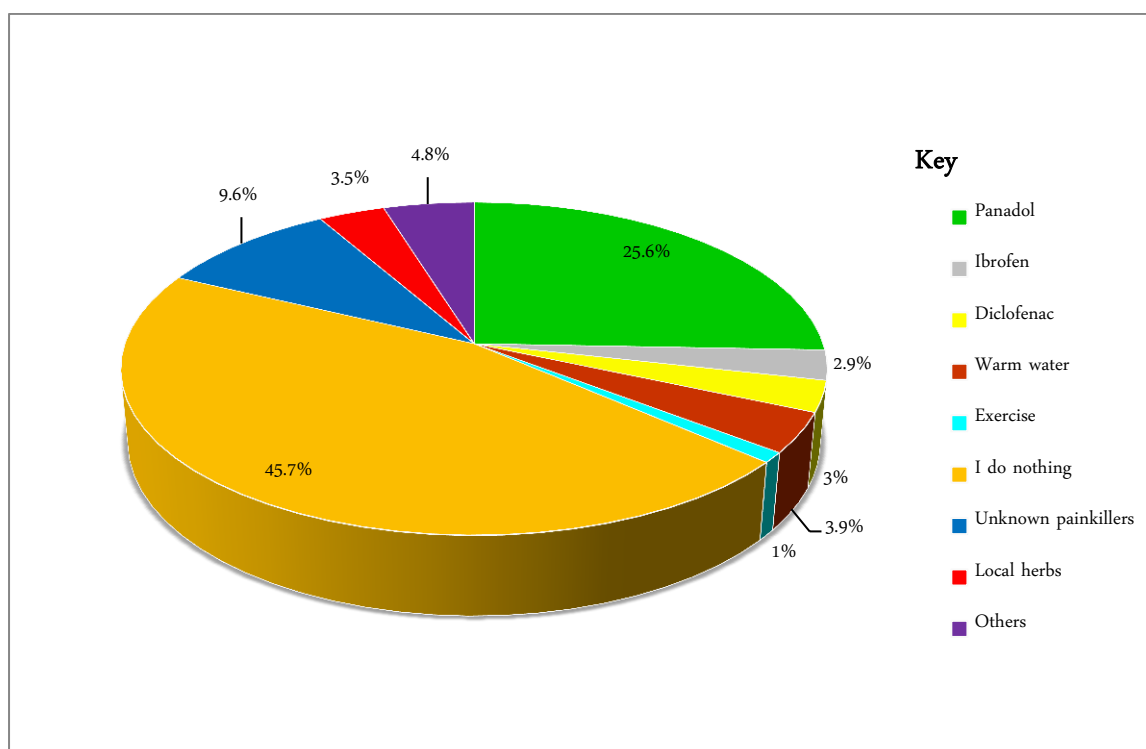
“.....the pain they feel during menstruation, some children have excessive pain they can't even sit in class to study, it is like they are sick.” (SMT: Interview XVIII- rural primary boarding school)

“....sometimes girls experience a lot of pain that we even hire a boda boda to take them home.” (SMT: Interview XV-rural primary school)

“With the pain that they experience, some students don't understand themselves; others are scared and don't know how to manage it.” (SWT: Interview XI-rural secondary school)

“Some girls are scared to come to school. Some don't come because of excessive pain.” (SWT: Interview XVI-rural primary school)

Figure 4: Pain management during menstruation (n=628)



Most respondents (287, or 45.7%) do nothing to manage pain associated with menstruation. However, 161 (25.6%) stated that they use panadol, 18 (2.9%) use ibuprofen, 19 (3%) use diclofenac while 60 (9.6%) use painkillers whose names they don't know. Data obtained from key informants complemented the above information although the painkillers were only available in few schools.

“...we give them panadol, flagyl² and sometimes warm water to reduce on the pain associated with menstruation.” (SWT: Interview IX-rural primary school)

“We provide them with panadol at school. But sometimes, girls who go back home, they go without, they get used to the pain.” (SWT: Interview XIV-rural primary school)

It is evident that poor pain management during menstruation contributed to some girls missing school. One key informant revealed that girls use pain associated with menstruation to cover up for fear of being stigmatized during menstruation.

“Others create that thing of saying I am feeling pain when really, they are not feeling pain, but because they feel small to be in their friends, they create that thing of feeling pain just as an excuse to stay home” (Female Deputy Head Teacher: Interview IV-rural primary school)

4.2 Perception towards Menstruation

A total of 891 participants who had previously heard about or had started menstruation were assessed for this section.

Table 6: Respondents perception towards menstruation

Statement	True	Not Sure	False
I don't understand how or why girls/women undergo menstruation	55.9	12	32.1
It is harmful for a girl/woman if she runs or plays during menstruation	51.1	7.8	41.1
Menstruation means I am ready to start a relationship	18.9	8.4	72.7
Menstruation means I am ready to start sex	13.9	7.4	78.7
Sex cures painful menstruation	28.1	11.4	60.5
You cannot get pregnant if you play sex during menstruation.	22.8	17	60.2
Menstruation indicates that I am ready for marriage	18.1	9.5	72.4
Menstruation is a period of suffering for girls and women	30.9	7.9	61.3
Menstruation is a disease/curse	30.6	8.8	60.4

The information presented above shows that more than half (498, or 55.9%) of respondents reported that they don't understand how or why girls/women undergo menstruation, while another 107 (12%) were not sure about it.

Slightly over half of respondents (455, or 51.1%) agreed that it is harmful for a girl/woman if she runs or plays during menstruation. This was something which male participants interviewed under FGD also perceived to be true.

² Note: Flagyl is an antibiotic – not a painkiller. It is used to treat certain infections, including chlamydia and other STDs. This is a clearly inappropriate and potentially harmful use of this medication as provided by teachers which may cause future drug resistance among students.

“...when a girl is in her periods, she is not supposed to play football....” (Male Participant: FGD VI-rural primary school)

“...during menstruation, girls are not supposed to play with boys....” (Male participant: FGD III-rural secondary school).

In addition, there was a general perception among male participants that during menstruation, a girl's body is weak and therefore she is not able to engage in activities that may require standing or use of a lot of energy, like playing.

“...during menstruation, a girl's body is weak, so she should not do anything while standing..” (Male participant: FGD IV-rural primary school)

Less than three-quarters (648, or 72.7%) of students disagreed with the statement that menstruation means that a girl is ready to start a relationship. However, 124 (13.9%) agreed that menstruation means a girl is ready to start having sex. Furthermore, a considerable number (250, or 28.1%) said sex cures painful periods. It is worth remembering that 287 students (45.7%) were not using anything to manage pain associated with menstruation although 290 (46.1%) rated the pain they experience during menstruation from 6-10. Without proper education about menstruation and pain management, it is likely that some students may have sex as a way of curing pain associated with menstruation.

In addition, some adolescent boys perceived menstruation as readiness to get pregnant among girls. With such perceptions, girls are at risk of early pregnancies due to misconceptions about pain management during menstruation

“Menstruation is period when girls are ready to get pregnant.” (Male Participant: FGD II-rural secondary school)

Less than a third (275, or 30.9%) of adolescent girls perceived menstruation as a period of suffering for girls and women which could be related to pain and stigma associated with menstruation. In addition, 273 girls (30.6%) believed menstruation is a disease/curse. This was explained by a key informant

“They can tell you that I was sick, I was sick....she will not tell you that she was in her periods, she will say, I was sick.” (SWT: Interview IX-rural primary school)

A similar perception was held by boys

“...menstruation is when a girl gets sick....she should be taken to a clinic” (Male participant: FGD IV-rural secondary school)

In addition, some teachers also equated menstruation to a disease among girls and women, something which is abnormal, a problem and some sort of sickness. Girls therefore obtained incorrect information about menstruation from SWT/SMT since they were their main source of information about menstruation.

“.....and that thing when it comes, sometimes to most of them abruptly when they don't know, especially the senior ones, they feel shy, they feel ashamed in class..” (SWT: Interview V-rural primary school)

“Some girls miss school during menstruation. They don't attend school for 2-3 days because they are sick with menstruation.” (SWT: Interview XVI-rural primary school)

“One girl in primary five got that problem when in class and we didn't know immediately and some boys abused and laughed at her when they saw her uniform stained with blood....” (SMT: Interview I-rural primary school)

“.....girls need privacy for example, they need a basin, jerrican and soap, and we don't have a safe place where girls can go to wash themselves when they are in that problem.” (SMT: Interview I-rural primary school)

4.3 Stigma Associated with Menstruation

The survey sought to measure stigma associated with menstruation experienced by adolescent girls in primary and secondary schools. Stigma was divided into internal and external.

4.3.1 Internal Stigma associated with Menstruation

Table 7: Internal stigma associated with menstruation among respondents

Statement	True	Not Sure	False
I feel dirty during menstruation because I lack sanitary materials to use.	61	0.7	38.3
I am embarrassed to speak about menstruation with anyone	52.2	2.1	43.7
I believe girls should not discuss menstruation with boys/men	73.9	3.9	22.2
If you go to the garden or climb a tree during menstruation, crops/fruits will die.	38.2	26.2	35.6
Girls should not use the latrine during menstruation because they may become barren	17.3	20.7	61.9

Of the 629 students who had started menstruation, 385 (61%) said they feel dirty during menstruation because they lack sanitary materials to use. This was also emphasized by key informants who stressed that the lack of adequate materials like pads and extra uniforms at school makes girls whose periods

start at school feel dirty. This was explained as a cause of stigma and absenteeism among menstruating girls.

“There are some dirty girls, who every time they experience menstruation, they have blood stains. At least they can have blood stains for only one day when the period starts without them knowing, but for them every time they have their periods, their uniforms are stained with menstrual blood and everybody gets to know that they are in their periods. So they discriminate them because they are dirty.” (SWT: Interview XI-rural secondary school)

“...when a girl’s uniform gets dirty because of that blood, that girl will think that maybe they will laugh at me. Then another thing, they don’t have materials to use. If a child is not having pads, she cannot automatically come to school, because she will feel small at school, how can she come to school when she is not padding herself well?” (Female Deputy Head Teacher: Interview XIV-rural primary school)

Table 7 also shows that more than half of respondents (483, or 52.2%) indicated that they feel embarrassed to speak about menstruation with anyone. In addition, nearly three-quarters of respondents (659, or 73.9%) believed girls should not discuss menstruation with boys/men. This could be partly due to indirect influence of SMT/SWT who often teach girls only about menstruation leaving the boys out. As such, boys are less informed about menstruation and are a great source of stigma experienced by girls during menstruation. Many informants revealed that the fear of boys laughing at girls made them to stay home during menstruation.

“.....we have never taught boys about menstruation, they don’t need to be taught...”(SMT: Interview XV-rural primary school).

“We only teach the girls about menstruation, though I don’t know whether the boys have knowledge about it.” (SWT: Interview VI-rural primary school)

“Boys laugh at girls whose uniforms are stained with menstrual blood...” (SWT: Interview XII-rural primary school).

With such treatment, it would be surprising that girls would openly discuss menstruation with boys. Boys are kept in the dark about menstruation and have a poor understanding of why and how it happens or what to do to manage menstrual blood.

“...menstruation is when a girl knocks herself on something and she bleeds³...”(Male participant: FGD II-rural primary school)

“ “...girls use pampers during menstruation to stop menstrual blood...”(Male participant: FGD-III rural primary school)

³ There is a figurative local term in Lusoga-‘omughala okwekontola’, which literally means a girl knocking herself on something. However, it is used to mean menstruation. This may indicate that the lack of education about menstruation led this male participant to take the literal meaning of ‘omughala okwekontola’

Many respondents (340, or 38.2%) believed that if a girl went to the garden or climbed a tree during menstruation, crops/fruits would die. This relates to the fact that menstrual blood is viewed as impure and dirty. According to female parents, impurity of menstrual blood may affect the growth of fruits on a tree, crops in the garden like ground nuts, beans or even contaminate food.

“...when a girl is in her periods, she is not allowed to pass through a groundnut garden or they will not pod...” (Female parent III).

“...it is true, menstrual blood is impure, it is dirty, it can cause a whole garden of ground nuts to fail to flower. So a girl is not allowed to pass or dig in such a garden during her periods...” (Female parent II).

Parents admitted that they often caution girls not to pass through other people’s gardens during menstruation initiating a cycle of self-stigmatization among adolescent girls. It is no wonder that male participants also held a view that girls were not supposed to climb trees during menstruation.

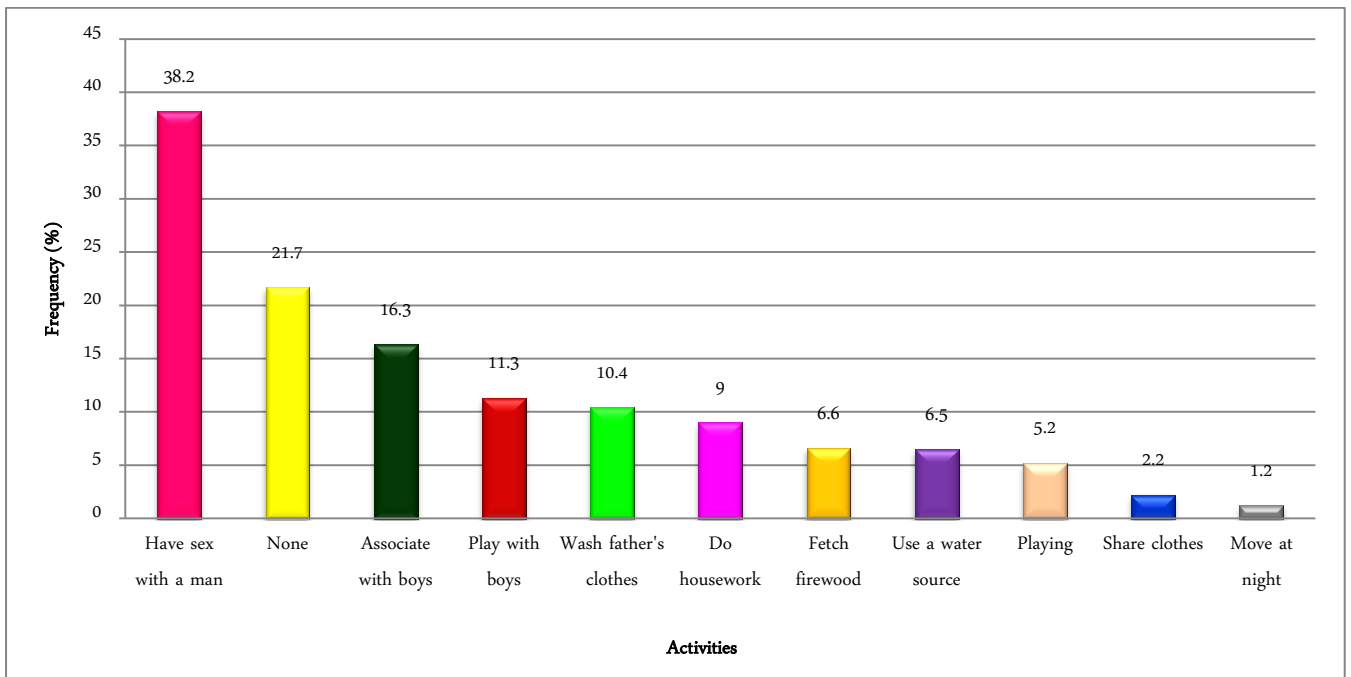
‘When a girl is in her periods, she is not supposed to climb a tree..... or ride a bicycle. This is because her bladder has not opened.’ (Male participant: FGD V-rural primary school)

Some adolescent girls (154, or 17.3%) believed girls should not use the latrine during menstruation because they may become barren. This partly explains why girls studying from schools without washrooms refused to use toilets as reported by teachers.

“We provide a basin and one of the toilets to girls, but you know girls, they fear, they often don’t utilize it.” (SWT: Interview VI-rural primary school)

It should be noted that most rural primary and secondary schools’ latrines are unhygienic. Most of them are littered with fecal matter with no running water or soap nearby. It may therefore not only be related to the fear of becoming barren that adolescent girls refuse to utilize latrines to change pads and clean themselves, but due to the unhygienic nature of the latrines.

Figure 5: Activities that respondents feel should not be done during menstruation (n=891)

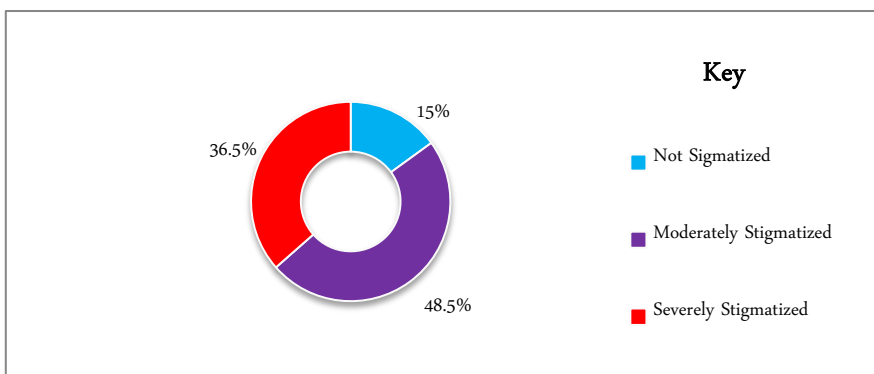


Note: Respondents mentioned multiple answers

Most commonly, respondents (340, or 38.2%) said girls/women should not have sex with a man during menstruation, while a few (11, or 1.2%) said girls/women should not move at night during menstruation. According to female parents, having sex during menstruation was considered a taboo due to the ‘uncleanliness’ of girls/women during that period.

4.3.1.1 Ratings for Internal stigma associated with menstruation

Figure 6: Ratings of Internal stigma associated with menstruation (n=891)



Nearly half of adolescents (432, or (48.5%) held internally stigmatizing beliefs and perceptions about menstruation.

Table 8: Comparisons for Internal Stigma between girls who had started menstruation and those who had not for internal stigma

Ratings of Internal Stigma	Started Menstruation (n=629)	Not Started Menstruation (n=262)
Not Stigmatized	17.8%	8.4%
Moderately Stigmatized	60.9%	18.7%
Severely Stigmatized	21.3%	72.9

Most adolescents who had not started menstruation held more internally stigmatizing beliefs as compared to those who had started menstruation. A majority of them (191, or 72.9%) were rated as severely stigmatized for internal stigma. This may be related to inadequate knowledge and experience about menstruation among students who had not started menstruation and negative experiences observed in those who have started menstruation.

4.3.2 External Stigma associated with menstruation

External stigma was assessed among adolescents who had already started menstruation (629).

Table 9: External stigma among menstruating girls

Statement	True	False
Some students don't want to associate with me during menstruation	27.2	72.8
Male students tease me during menstruation	25.8	74.2
I am not allowed to use the water source ⁴ during my periods	21.8	78.2
I am not allowed to fetch firewood or cook during menstruation	22.4	77.6
I fear to stand up and give an answer in class during menstruation because of worries of leakage and pain	41.5	58.5
Some students and teachers say abusive words about my body during menstruation	14.8	85.2

Less than a third of respondents (171, or 27.2%) reported that some students don't want to associate with them during menstruation, which may be based on the premise that when a woman/girl is having her period, she is not fit to associate with other people, especially men/boys. However, this contradicts what most adolescent boys report. According to them, girls should not be segregated from other people during menstruation.

⁴ This included tap, borehole, spring or well.

“It is not right to discriminate girls during their periods....” (Male participant: FGD IV-rural primary school).

“It is not good because a girl is a child like us, so we are not supposed to discriminate her” (Male participant: FGD IV-rural primary school)

“Just as other people, they are human, they should not be discriminated.” (Male participant: FGD V-rural secondary school).

However, some male participants felt that a girl should be segregated from boys during menstruation because girls may make them dirty with their menstrual blood.

“They are supposed to be segregated. It is right to segregate them from others. She looks sickly, with blood. It is important to segregate menstruating girls from other people.” (Male participant: FGD III-rural secondary school).

“I also think they should segregate her because she is menstruating, even if it were my sister.” (Male participant: FGD VI-rural secondary School).

It is not surprising that 162 adolescents (25.8%) said male students tease them during menstruation while 137 (21.8%) stated that they are not allowed to use the water source during periods. This may be due to the fear that girls may contaminate the water source with menstrual blood if they use it during menstruation.

Furthermore, 141 adolescents (22.4%) mentioned that they are not allowed to fetch firewood or cook during menstruation. According to adolescent boys, menstruation was viewed as some sort of sickness which weakens girls and they may not be able to participate in household chores like cooking. They reasoned that such chores could weaken a girls' body which may worsen her state. However, female parents held a different view. To them, it is not right for a girl to cook during menstruation because she may contaminate the food with menstrual blood. If the girl should cook, no one should know that she is in her periods.

“Girls should not cook food during menstruation because such a house chore may affect her....” (Male participant: FGD VIII-rural primary school)

“During periods, it is not advisable for a woman/girl to touch food, she may contaminate it with menstrual blood...and if a man/boy realizes that he has eaten food prepared by a woman/girl who is in her periods, he may get traumatized.”(Female parent V)

Less than half of adolescent girls (261, or 41.5%) reported that they fear to stand up and give an answer in class during menstruation because they worry of leakage and pain. SWTs and SMTs also explained that girls don't pay attention in class during menstruation because they are pre-occupied with fear that their uniforms are soiled with blood while others are suffering with pain. In addition, there was a general consensus that most girls don't have access to pads during menstruation, something which causes them shame and stigma.

*“Of course when they are in that period of menstruation, they don't concentrate in class.....”
(SMT: Interview III-rural primary school)*

Others reported that when girls start menstruation in class, they experience stigma from boys who laugh at them, sometimes leading them to escape from school while others may eventually drop out.

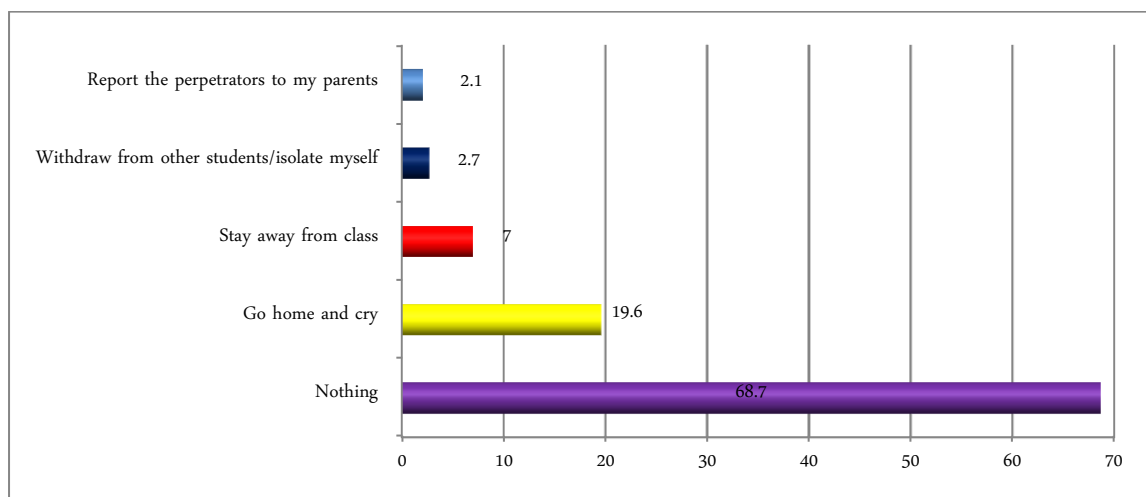
“This term, we have experienced two cases. One case; there was a girl in primary five, this girl started her periods in class, so we did not know immediately, some boys started laughing at her, so she escaped and later we got to know that she did not come back to school. The school did not make follow-up of that case. She may have dropped out.....” (SMT: Interview I-rural primary school)

Table 10: Summary of ratings of stigma experienced by adolescent girls during menstruation

Type of stigma	Frequency (n=629)	Percentage (%)
Internal Stigma		
Not Stigmatized	112	17.8
Moderately Stigmatized	383	60.9
Severely Stigmatized	134	21.3
External Stigma		
Not Stigmatized	299	47.5
Moderately Stigmatized	231	36.7
Severely Stigmatized	99	15.7
Overall Stigma (Both Internal and external)		
Not stigmatized	147	23.4
Moderately Stigmatized	383	60.9
Severely Stigmatized	99	15.7

Overall, more than half (60.9%) of adolescent girls who had started menstruation were experiencing stigma associated with menstruation.

Figure 7: Students’ reaction to stigma associated with Menstruation (n=629)



Most adolescent girls (432, or 68.7%) were not taking action about the stigma they experienced due to menstruation.

4.3.3 Practices related to Menstruation

Table 11: Absorbent materials used during menstruation

Materials	Frequency (n=629)	Percentage (%)
Disposable sanitary pads	237	37.7
Pieces of cloths	251	39.9
Cotton wool	66	10.5
Homemade reusable pads	44	7.0
Reusable pads donated by NGOs	11	1.7
Two panties	8	1.3
Sit in the sand	6	1.0
Toilet paper	5	0.8
Local herbs	1	0.2

Most commonly, 251 of girls (39.9%) reported using pieces of cloth during menstruation. According to teachers, most girls come from poor families that are unable to afford the cost of buying sanitary pads for their adolescent girls on a monthly basis.

“Basically, they sometimes use pads, clothes and others toilet paper.” (SMT: Interview XV-rural primary school)

“Only a few use sanitary pads....the others use old clothes. People are very poor here; they cannot afford to buy pads every month.” (SMT: Interview XVIII-rural primary school).

Furthermore, the lack of adequate pads was a cause of anguish among menstruating girls, causing fear if one nears the time of their periods. Although some SWTs encouraged improvising among girls who don't have enough pads, their solutions could barely help.

“.....because they are supposed to use pads, most girls are so scared towards their periods because they can't afford them” (SWT: Interview VI-rural primary school).

“.....this is a rural school, most students cannot afford pads....as a female teacher, we always advise them to have more than 2 handkerchiefs...(SWT: Interview XI-rural secondary school)

In addition, the use of unhygienic materials during menstruation such as rags and dirty pieces of cloth was a concern for some teachers. They asserted that some girls get infections due to using such unhygienic materials.

“.....the materials that they use; most of our children have no support from their families, a child is using dirty pieces of clothes, so they get some infections, yeah, you find a child complaining, serious abdominal pain, when you ask the child, where are you feeling the pain, down here, down here, but it is because of these materials they use..... the dirty pieces of cloth they use during menstruation.” (Female Deputy Head Teacher: Interview XIV-rural primary school)

4.3.3.1 Enabling environment for Menstruation in schools

Table 12: Washrooms, bathing and disposal of used sanitary pads

Availability of Washrooms in schools	Frequency (n=18)	Percentage (%)
Yes	3	16.7
No	15	83.3
Whether available washrooms are equipped with water, soap and changing dress	(n=3)	
Yes	-	-
No	03	100
Availability of place for disposing used sanitary pads in school		
Yes	2	11.1
No	16	88.9

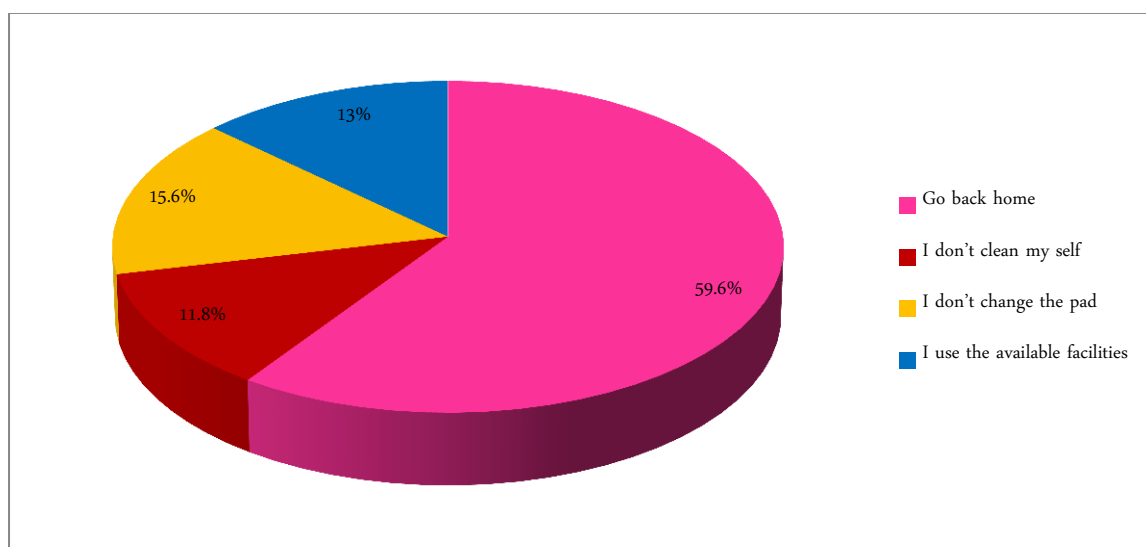
Of the 18 schools included in the survey, 15 (83.3%) did not have washrooms (or a safe place) where adolescent girls can clean and change pads during menstruation while 3 (16.7%) had washrooms/safe rooms. Of these 3 schools, none was equipped with water, soap and changing dresses for students in its washroom. In addition, only 2 schools out of the 18 (11.1%) had a designated place for disposing of used sanitary pads by students and teachers. This was corroborated by teachers who reported that

they frequently send menstruating girls home because schools don't have an enabling environment to ensure proper menstrual hygiene and management.

"We don't have a safe room where girls can clean and change during menstruation. Sometimes when the girls tell us, we can take them to the store....but most times, we send the girls home to clean themselves and change into other clothes." (SWT: Interview XIII-rural primary school).

".....we also have a challenge, because when the students go in that problem, we lack a private area where girls can go to clean themselves when they start having that problem. So that problem has been challenging. But per now, when a girl gets into that problem we just send her home..." (Senior Woman Teacher: Interview IV-rural primary school)

Figure 8: Actions taken in absence of washrooms (n=629)



The majority of students (375, or 59.6%) said they go back home during menstruation in order to clean and change pads. According to some SWT, girls escape from school during times when they are menstruating to seek better hygienic facilities to clean and change pads.

"The main challenge is when these girls experience menstruation..... they know that the school cannot provide any help, so they just escape. But, when we get to know that one is menstruating, we just send her home. So, they come back to school when they have finished their periods." (SMT: Interview I)

Furthermore, 74 students (11.8%) said they don't clean themselves during menstruation, while 98 (15.6%) reported that they don't change the pad. This predisposes adolescent girls to vaginal infections, urinary tract infections and skin rashes. Although parents mentioned that they stress the need for good hygiene among their adolescent girls during menstruation, this isn't what is done due to lack of an enabling environment in rural primary and secondary schools.

"During menstruation, a woman/girl is supposed to take extra care about her hygiene so that she does not draw attention to herself." (Female Parent II)

“In case a girl does not bath or clean herself well during menstruation, she will have a foul smell. So I guess that is why girls are not allowed to easily associate with other students during menstruation.” (Female parent IV)

There were also concerns among SWTs about the inability of girls to clean themselves well during menstruation. It was considered as a sort of irresponsibility on the part of the adolescent girl and her parent. This was thought to be a cause of stigma associated with menstruation.

“.....some girls during menstruation come with very dirty and smelly clothes which are an inconvenience in class, boys laugh at them.” (SWT: Interview XII-rural primary school)

4.4 Menstruation and School Attendance

Table 13: Days missed due to menstruation

Missing school due to menstruation	Frequency (629)	Percentage (%)
Yes	260	41.3
No	369	58.7
Number of days missed due to menstruation last term	(n=260)	
4 days	06	2.3
6 days	22	8.5
7 days	21	8.1
8 days	63	24.2
9 days	75	28.8
10 days	15	5.8
11 days	7	2.7
12 days	32	12.3
14 days	06	2.3
16 days	05	1.9
20 days	08	3.1
Reasons for missing school during menstruation		
Lack of adequate pads	150	57.7
Lack of a place to change and clean myself	89	34.2
Pain associated with menstruation	56	21.5
Stigma associated with menstruation	113	43.5
Inadequate pads and knickers	17	6.5

Note: Respondents mentioned multiple reasons

Less than half of adolescent girls (260, or 41.3%) missed school last term due to menstruation. The number of days missed ranged from 4-20. Of these, the most commonly reported number of missed

days was 9 (reported by 75 respondents, or 28.8%). The average number of days missed per student was 9.3 days (standard deviation of 2.5).

The major cause of absenteeism among girls during menstruation was lack of adequate pads, as reported by 150 respondents (57.7%). This was also echoed by teachers and school administrators. In addition, the poor sanitary facilities in most schools were also a major factor reported. The lack of washrooms, water and soap for girls to change and clean themselves during menstruation forced teachers and school administrators to often give permission to menstruating girls to go home to seek better materials and facilities. There was a general view that girls develop fear towards menstruation because even when they are sent home to seek support towards proper management of menstruation, little support is provided by their parents. Teachers asserted that some parents don't take responsibility to teach or provide their adolescent daughters with enough knickers, pads or painkillers during menstruation.

As such, teachers reported that on average, girls missed 2-4 days each month due to menstruation. This was also reported by boys who stated that when they observe one of their female class mates start menstruation; she misses 2-3 days of school each month.

"Some girls remain at home when they start menstruation; some take 3 days without attending school...." (SWT: Interview VI-rural primary school)

".....then others even if they go back home they cannot afford the pads. Some of them don't appear at school until they are done, because they don't have pads, so they fear to come, because their uniforms will be stained. Actually, there are some cases we know, the moment they start; they will not appear at school (SWT: Interview XII-rural primary school).

"In our class, out of 10 girls, 3 miss school during menstruation." (Male Participant: FGD IV-rural primary school)

Other teachers felt that menstruation is like a 'pass' for girls to miss school. They reported that girls miss school the moment they start their periods till the day they finish.

"Then other girls have refused to embrace menstruation, whenever they go into it.....they tend to stay at home and until that girl moves out of that period, she does not attend school. So we have a lot of absenteeism among girls just because of menstruation.." (Female Deputy Head Master: Interview XIV-rural primary school).

Senior Women Teachers identified stigma associated with menstruation as a major cause of absenteeism (113, or 43.5%), and equated it to an inferiority complex among adolescent girls. Although others explained that boys were also taught about menstruation, they still continued to be a big source of stigma associated with menstruation. Girls missed school because they feared to be made fun of or laughed at in class by boys.

“It is not direct stigma but these girls tend to feel inferior, that kind of inferiority like, they have seen me...they are laughing at me....and we try talking to the boys also.....but still, when these boys realize that that girl is going through this, there is a way they look at that girl and it makes this girl to feel small so the following day, you will not see her at school.” (SWT: Interview II-rural primary school)

“.....i think that thing is inborn, a boy, just knowing that a girl is menstruating, they are like yes, she is in for it, such words...so boys stigmatize girls, they feel small. In fact, the following day, you can't find them coming back to school. They can take like 2-3 days before they come back.” (Female Deputy Head Teacher: Interview XIV-rural secondary school).

Table 14: Effect of menstruation on academic performance of adolescent girls

Whether days missed due to menstruation affect academic performance of adolescent girls	Frequency (290)	Percentage (%)
Yes	172	59.3
No	118	40.7
How days missed due to menstruation affect academic performance	(n=172)	
I miss learning important information which affects my performance in tests and exams	93	50.1
I am unable to cope up with missed notes which lowers my grades	79	45.9

Slightly over two thirds of adolescent girls (172, or 59.3%) said days missed due to menstruation affect their academic performance. Of these, more than half (93, or 50.1%) said they miss learning important information which affects their performance in tests and exams while 79 (45.9%) said they are unable to catch up with missed notes which lowers their grades.

According to SWTs, SMTs and school administrators, girls’ academic performance is greatly affected by days missed due to menstruation. When a girl is sent home to access materials and better facilities to manage menstruation, the teachers don’t stop teaching nor do they have any incentive to help girls who miss school due to menstruation.

“...of course the girl's performance is affected. Because when the girl is given permission to go back home, we don't stop teaching. What we do is just tell her to come back the next day if possible. The school does not have any organization for girls who miss school during menstruation. We have never even thought of helping them cover up the work they miss due to menstruation.” (Female teacher: Interview VII-rural primary school).

“If menstruation starts, some students can take 3-4 days without coming to school which makes them to miss many activities that are conducted in classes.” (SWT: Interview XII-rural secondary school)

In comparison with boys, SWTs, SMTs and school administrators reported that girls perform poorly in class because of days missed due to menstruation.

“.....since they are always absent, their performance is not as good as that of boys, actually we have never had a girl being the best in any class. Girls are always on and off....” (SMT: Interview XV-rural primary school).

“...automatically, it does affects the performance of the girls, like we have the primary six class here, most of the pupils we have are girls, but the performance is not so well, why? There is a lot of absenteeism due to menstruation.” (SWT: Interview II-rural primary school)

“...yes, because if a girl has not studied for 7 days, she will lag behind, at the end of the day, if she was to get 60%.....it won’t happen, she will score 20%.” (SMT: Interview XVIII-rural primary school)

4.5 Ways of Improving Menstrual Hygiene and Management

Table 15: Student’s suggestions on ways of improving menstrual hygiene and Management

Suggestions	Frequency (891)	Percentage (%)
Construction of Washrooms equipped with water and soap	210	23.6
Provision of supplementary uniforms	45	5.1
Educating both boys and girls about menstruation	123	13.8
Provision of disposal pads	512	57.5
Training girls in production of re-usable pads	271	30.4
Provision of pain killers	210	23.6
Others	98	11.0

Over half of adolescent girls (512, or 57.5%) suggested that schools/government and other stakeholders should provide them with disposable pads. However, according to teachers and school administrators, this is hard to sustain since each year, a set of students start menstruation. Therefore, educating both girls and boys about menstruation was considered more vital than provision of disposable pads. Although some teachers stressed the importance of having emergency pads to offer to students who start menstruation in school, others indicated that some girls did not even know how to use such pads, hence education being more beneficial.

“NGOs should provide students with education about menstruation because even if they provide them with pads without knowing how to pad and manage themselves, it is useless.” (SMT: Interview XV-rural primary school)

In addition, 271 adolescent girls (30.4%) suggested construction of washrooms to enable cleaning and change of pads during menstruation. Similarly, construction of safe rooms, equipped with water, soap and extra uniforms was nearly a universal suggestion by teachers and school administrators. They felt that it was useless to provide girls with pads without the necessary facilities to often change or clean themselves after use. There was a prevalent theme indicating that if the facilities were available, possibly, they would stop providing permission to girls to go home during menstruation.

Others felt that parents and teachers too, need to be sensitized about their role in supporting their adolescent girls during menstruation.

“There is need to sensitize parents about their role in supporting girls during menstruation. Most of them are not concerned. Some of them don’t even know what sanitary pads are. Some parents force their daughter to come to school without pads while others cannot even provide soap to their daughters to clean themselves at home during menstruation.” (SWT: Interview XII-rural primary school).

“The parents are not sensitized....we are in an environment where the parents are using backcloth and they want their daughters to also use backcloth or sit in the sand. Some of them encourage their children to get lovers who can buy for them pads. The parents are very irresponsible and they are poor parents. (SMT: Interview XV-rural primary school)

....what is more important is that all teachers should be trained about menstruation so that we work together to support girls stay in school...” (SMT: Interview I-rural primary school).

4.5 Discussion

This survey aimed at providing information about the perception and experiences of rural adolescent girls and boys regarding menstruation. Results reveal that there is a general lack of knowledge about menstruation among both boys and girls. Many adolescent boys and girls held stigmatizing views and beliefs about menstruation.

4.5.1 Knowledge and Perception

Although all adolescent girls were aged between 10-17 years, a significant number of girls (19%) aged 10-14 had never heard the word “menstruation”⁵. More than half (55.9%) were not aware of how or why girl/women undergo menstruation, while 51.4% did not know the duration of a normal menstrual period. In addition, 34.1% of girls were not taught about menstruation before menarche.

⁵ This was translated to Lusoga (omughala okwekontola, omughala okubona omwezi, omughala okutandika ensonga da bakyala, okutandika ekibada, omughala okujja mu June)

There was a concern among teachers and school administrators that parents don't take responsibility to teach or provide support to girls during menstruation. Nonetheless, teachers also wrongly believed that only girls aged 11 years and older should be taught about menstruation. This causes fear and shame among girls when they experience menarche, something teachers affirmed had already occurred in schools. Related to the findings, a study by Aniebue (2009) in Nigeria found that almost half of the girls surveyed had no preparation on how to cope with menstruation before menarche. Similarly, Mouli and Patel (2017) asserted that many adolescent girls in Low and Medium Income Countries (LMIC) are often uninformed and unprepared for menarche.

An overwhelming majority of female adolescents (94.5%) did not know the correct source of menstrual blood. In addition, nearly a third (30.6%) of girls perceived menstruation as a disease/curse. Concerning the information known by boys, although many of them had heard of menstruation, FGDs revealed that most of them thought of it as a kind of sickness where a girl has a wound on her body, which draws blood (menstrual blood). They suggested that menstruating girls be taken to health facilities to access health care. This was because boys were not being educated about menstruation as teachers felt that they did not need such information. Furthermore, more than half of girls (55.9%) did not know how or why they undergo menstruation. The results support findings obtained by Abioye-Kuteyi (2000) who found that 10% of post-menarche girls in Nigeria often did not know what menstruation was. However, the current study revealed a higher incidence than that reported in Abioye-Kuteyi's study.

Though most girls (58.3%) rated the pain they experience during menstruation from 5 to 10, it is worth noting that 18.9% believed that menstruation means a girl is ready to have a sexual relationship and 28.1% believed that sex cures painful menstruation. Furthermore, 18.1% perceived menstruation to be a sign of a girl's readiness for marriage – something that was corroborated by boys in one FGD who associated the start of menstruation with readiness of girls to get pregnant. It is not surprising that SWT/SMT reported that boys disturb girls with demands for sex when they learn that they have started menstruation, while some parents encourage their adolescent daughters to get lovers who can afford to buy them pads. Without interventions to counter these spurious beliefs, some adolescent girls will engage in sex earlier than they should with a false hope that it will lessen menstrual pain, hence exposing them to the risk of early pregnancies, marriages and sexually transmitted Infections, including AIDS. The results are related to cultural interpretations of menstruation in Malawi where menarche is linked to a womanhood and physically readiness for sexual activity and marriage (Grant, 2012).

The major sources of information about menstruation were SWT (32%) and mothers (31.9%). Besides providing inadequate and incorrect information to adolescent girls, mothers and teachers were also

an indirect source of self-stigmatizing beliefs and views about menstruation. Some teachers referred to menstruation as ‘that thing’ as if it is an object, ‘that problem’ as if to normalize the challenges that girls go through during menstruation. In addition, female parents reported self-stigmatizing beliefs they pass onto their adolescent daughters. They advised girls to take caution during menstruation; telling them not to pass in beans, ground nuts gardens, climb trees and to restrict their association with boys/men. The findings back up what was posited by Mouli and Patel (2017) when they stated that mothers are the primary sources of information about menstruation among adolescent girls. However, they are not only inadequately equipped but often communicate their own misconceptions about menstruation to girls.

4.5.2 Stigma Associated with Menstruation

More than three-quarters of adolescent girls (82.2%) were experiencing stigma associated with menstruation. Internal stigma, stemming from believing in self-stigmatizing cultural practices, superstitions and false beliefs was more commonly reported than external stigma. Female parents were a good source of self-stigmatizing beliefs while adolescent boys, with little or no education about menstruation, often stigmatized girls who lacked adequate pads during menstruation.

The lack of sanitary pads during menstruation caused both internal and external stigma. More than half of girls (61%) felt dirty during menstruation because they lacked sanitary materials. This caused shame and fear during menstruation and it is no wonder that 27.2% of girls said other students did not want to associate with them during menstruation. In addition, 45.1% stated that they feared to stand up and give answers in class during menstruation because of worries of leakage and pain. Nearly 15% of respondents identified students and teachers as sources of abuse and ridicule during menstruation. A significant number of respondents believed in superstitions about menstruation and engaged in actions which restricted their movement, association, engagement in household chores and schooling. For example, 22.4% said they are restricted from cooking food, 21.8% reported being restricted from using a water source, 16.3% from associating with boys, 10.4% from washing father’s clothes, and 9% from engaging in housework among others. Although most adolescents did not react to this stigma, some took action and went home or stayed away from class until their periods ended. Thus stigma associated with menstruation not only affected schooling and engagement in extra-curricular activities but also undertaking household chores. The results are in agreement with those reported by UNICEF (2014) that adolescent girls in Uganda are subjected to discrimination and stigma due to stereotypes, misconceptions that have historically developed from misinformation, harmful cultural beliefs and gender inequality.

4.5.3 Practices related to Menstruation

Most commonly, adolescent girls reported using pieces of cloth during menstruation to stop menstrual blood from staining their clothes (39.9%). Other materials used included sanitary pads, cotton wool, homemade reusable pads, reusable pads donated by NGOs, 2 panties, toilet paper, sitting in the sand and local herbs. The main reason why girls were using pieces of cloth relates to inability to afford the sanitary pads. According to teachers and school administrators, the majority of girls studying in rural schools in Jinja and Mayuge districts come from poor families that cannot afford the monthly cost of disposable sanitary pads. Similarly, Abioye-Kuteyi (2000) reported that girls in resource-poor countries around the world tend to use old cloths, cotton or wool pieces, toilet paper to manage menstrual bleeding citing reasons of unaffordability of sanitary pads (Chothe, Kubachandani, Seabert, Asalkar, Rakshe & Firke, et al. 2014).

In addition, concerns were raised by teachers and school administrators about the kind of materials that some girls were using during menstruation. They reported that some girls use old and dirty pieces of cloth which were causing discomfort as well as vaginal and urinary tract infections among students.

Of the 18 schools that participated in the survey, only 3 had washrooms and even these had no water and soap. SWTs/SMTs admitted that although they had raised concerns about construction of washrooms during Parents and Teachers' Association (PTA) meetings, school administrators often turned a deaf ear. Teachers and school administrators also admitted that they frequently gave permission to girls who started their periods from school to go home and access better sanitary facilities. However, a considerable number of girls (11.8%) said they don't clean themselves during menstruation while 15.6% don't change pads, which predisposes them to skin rashes and vaginal and urinary tract infections. Although female parents mentioned that they stress the need for good hygiene among their adolescent girls during menstruation, this is not possible due to lack of washrooms equipped with water and soap in rural primary and secondary schools. Earlier findings by Pilliteri (2011) also reported that lack of facilities at school was reported by SWT in both government and private schools in East Africa.

4.5.4 Menstruation and School attendance

Roughly 4 out of every 10 adolescent girls (41.6%) missed school due to menstruation. The number of days missed ranged from 4 to 20 with an average of 9.3 or 3.1 days per cycle and a standard deviation of 2.5. This is equivalent to 11.6% of the 80 days allocated for studying in primary and secondary schools. Nearly all teachers reported that menstruation is a major cause of school absenteeism among

girls in rural primary and secondary schools. The findings are similar to results obtained by Build Africa (2013), which found that that 29.7% of adolescent girls missed a minimum of 4 days per cycle even though the percentage of adolescent girls who missed any amount of school was slightly higher.

Lack of adequate sanitary pads to use during menstruation was the main cause of school absenteeism associated with menstruation, as reported by 57.7% of respondents. There was a dominant theme among teachers that fear of staining school uniforms caused girls to stay home until their periods ended. The pieces of cloth, cotton wool or toilet paper that most girls were using were not effective in preventing leakage of menstrual blood among adolescent girls.

The second biggest factor which caused absenteeism among school girls was stigma associated with menstruation (reported by 43.5% of respondents). Stigma was closely related to lack of sanitary pads and inaccurate education as provided by teachers and parents among others. This was also explained by several teachers who stated that girls fear, feel shy and feel small during their periods. Also reported was a culture of boys laughing at girls whose uniforms are stained with menstrual blood.

The lack of washrooms equipped with water and soap among the majority of rural primary and secondary schools caused 34.2% of girls to miss school during menstruation. Nearly every teacher from the 18 schools admitted that she/he frequently gives permission to girls to go home during menstruation. Another dominant theme among teachers was that girls are afraid to attend school during menstruation because the schools barely provide any support to them. The findings back up results obtained in a study by Boosey, Prestwish & Deave (2014) which found that girls in Western Uganda cited a lack of privacy and washing space as a reason for school absenteeism during menstruation.

Though teachers reported they sometimes provide pain killers like panadol, 21.5% of adolescent girls missed school due to pain associated with menstruation. There was a common theme among teachers that some menstruating girls experience excessive pain during menstruation which stops them from attending classes, while others can barely pay attention in class during menstruation.

The majority of students who missed school due to menstruation (59.3%) felt that the days missed had an impact on their academic performance. They indicated that they missed learning important information and others could not catch up with the missed work, hence negatively affecting their performance in tests and exams. In addition, teachers and school administrators also believed that days lost due to menstruation were a cause of poor performance among girls in comparison to that of boys.

4.5.5 Ways of improving menstrual hygiene and Management in rural schools

Though more than half of adolescent girls (57.5%) suggested that the government/NGOs and other concerned stakeholders should provide them with disposal sanitary pads, this was not seen as sustainable by teachers and school administrators. According to them, there is a need to balance availability of adequate sanitary material, washrooms/safe places with adequate knowledge about menstruation so as to reduce absenteeism associated with menstruation. Most of them believed that providing disposable sanitary pads to students without constructing washrooms/safe places in schools was not going to completely eliminate stigma associated with menstruation. Inasmuch as it is important to enable girls have adequate sanitary pads, it is equally important for them to have access to facilities where they can change and clean themselves.

Worth noting too, is that a significant portion of female adolescents suggested that they should be trained in the production of reusable sanitary pads to use instead of disposable pads which are unaffordable.

There was also a common theme among teachers about the need for them to be thoroughly trained in the provision of menstrual health education and production of reusable pads. This, they thought, would enable them to provide effective education to adolescent girls before menarche and support post-menarche. Nearly 14% of adolescent girls (13.8%) were also concerned about educating boys on menstruation to reduce stigma and discrimination associated with this normal biological event.

4.6 Limitations

1. Some girls especially those in primary level were hesitant to provide the required information during data collection. Due to the sensitivity associated with discussing menstruation, it was a challenge to interview girls without some of them feeling embarrassed to provide responses. In addition, some students may have misreported the days lost due to menstruation. Although 260 girls indicated that they missed school due to menstruation, a slightly higher number, 290, answered the question on whether the days lost due to menstruation affected their academic performance. This happened irrespective of the fact that female research assistants took time building rapport with students, and assured them of utmost confidentiality of their responses before they felt free to answer questions. It is therefore possible that the number of students who missed school due to menstruation may have been higher than 260.

2. There was a problem of low literacy rates among female adolescents who could hardly answer questions in English. However, research assistants translated the questions and conducted the interviews in Lusoga.
3. Due to the fact that Senior Women and Senior Men Teachers selected a pool of students from which researchers used a lottery method to select respondents, there might have been a selection bias.
4. There was a language translation problem during transcribing of recorded audio interviews conducted in Lusoga. However, this was solved by translating words according to context instead of direct translations. For example, a female parent stated that if a man/boy learns that the food he has eaten has been cooked by a girl/women who is in her periods, he will develop gigiina-dentin hypersensitivity (if translated directly in English). However, gigiina or tooth sensitivity meant trauma according to the context.
5. During Focus Group Discussions (FGD), some adolescent boys felt shy discussing menstrual health. In addition, some boys tended to easily agree with what other boys had stated because they seemed less informed, while others were simply embarrassed to discuss menstruation causing dominance bias. Although efforts were made to make them feel comfortable, some of them may not have felt comfortable enough to disclose personal views about menstruation. This implies that some of the views portrayed in FGD discussions might not have been individual but group-based. In addition, since 4 male research assistants conducted the FGDs, there is a likelihood of creating a moderator bias due to the differences in style and personality.

4.7 Conclusion and Recommendation

This baseline survey shows that absenteeism due to menstruation is a big problem among adolescent girls in rural primary and secondary schools in Jinja and Mayuge districts. According to the results, it is a multi-faced problem and interventions to reduce days missed due to menstruation should be balanced. There is need to educate girls, boys and teachers about menstruation in a culturally sensitive way while observing necessary norms. Furthermore, girls and boys should also be trained in the production of reusable pads using clean and safe materials. These interventions should be paired with construction/repair of sanitary facilities equipped with water, soap and changing areas with extra uniforms for use during menstruation. Parents also need to be engaged to provide support for their adolescent daughters during menstruation. Finally, yoga training to reduce menstrual pain should also be conducted and encouraged among school girls.

4.8 References

- Abioye-Kuteyi E.A. (2000). Menstrual knowledge and practices amongst secondary school girls in Ile Ife, Nigeria. *J R Soc Promot Health*: 120:23–26.
- Boosey, R., Prestwich, G.& Deave, T. (2014). Menstrual hygiene management amongst schoolgirls in the Rukungiri district of Uganda and the impact on their education: a cross-sectional study. *Pan Afr Med J*. 2014;19:253.
- Chothe, V. Kubachandani, J., Seabert, D., Asalkar, M., Rakshe, S. & Firke, A et al., (2014). Students' perceptions and doubts about menstruation in developing countries: a case study from India. *Health promot pract* May 15 (3): 319-26.
- Grant, M.J. (2012). Girl's Schooling and perceived threat of adolescent sexual activity in rural Malawi.
- Mouli, V. C, & Patel, S.V. (2017). Mapping the knowledge and understanding of menarche, menstrual hygiene and menstrual health among adolescent girls in low-an middle-income countries. *Reprod Health* 14:30
- Netwas, (2014). Initiatives and Innovations in Uganda for the National Conference on Menstrual Hygiene Management." *The Gender Eye*, August 14, 1-20.
- Pillitteri, S. (2011). School menstrual hygiene management in Malawi: More than toilets. Master of Science project for Cranfield University, UK.
- Ten, V.T.A. (2007). Menstrual Hygiene. A neglected Condition for the Achievement of Several Millennium Development Goals.
- Wateraid, (2013). Her right to education: How water, sanitation and hygiene in schools determines access to education for girls.
- WHO, (2012). Consultation on Draft long list of goal, target and indicator options for future global monitoring of water, sanitation and hygiene. WHO-UNICEF Joint monitoring programme.
- Wilson, E.F., Reeve, J.M.K., Pitt, A.H., Sully, B.G. & Julious, S.A. (2012). Investigating a reusable sanitary pad intervention in a rural setting-evaluating the acceptability and short term effect of teaching Kenyan School girls to make reusable sanitary towels on absenteeism and other activities: a partial preference cluster randomized trial. School of Health and Related Research, University of Sheffield