Menstrual hygiene knowledge and practices among rural schoolgirls aged 13-20 years in Bulambuli district: Implications for policy

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ABSTRACT

**Introduction:** Many girls are attending school at the time when they experience their first menstrual period. It is important that schools support Menstrual Hygiene Management (MHM) to enable girls manage this natural process hygienically and complete their education. This study sought to establish menstrual hygiene knowledge and practices among rural schoolgirls aged 13-20 years in Bulambuli district to inform policy.

**Methodology:** This was an institutional-based cross sectional study conducted in March 2016. Using purposive sampling, one primary and secondary school from each of the three regions of Bulambuli district (highlands, slopes and plains) was selected. The school with the highest population of girls was selected. 378 respondents were interviewed using an interviewer administered pretested questionnaire. The study also conducted Key Informant Interviews with 25 respondents—a girl prefect/head girl, senior woman teacher/matron/nurse, head teacher, and a parent from each school; and the District Inspector of Schools. Data was transcribed, entered in tabular formats based on themes created out of the study objectives, and key emerging issues were presented as text to support qualitative findings. Data was exported and analysed using STATA version 14. Basic demographic characteristics of participants were presented and continuous variables were expressed as proportions. Categorical data particularly knowledge and practices was measured by operationally defining concepts, translated into observable and measurable elements, scored, expressed as numbers/proportions and presented as tables, graphs and text.

The main study outcome was menstrual hygiene practices either expressed as good or poor. From univariate to bivariate and multivariate analysis, data was interpreted to establish factors associated with poor menstrual hygiene practice. A simple logistic regression model was used to estimate the adjusted odds ratio and 95% confidence interval by assessing for confounders and effect modification. In all analysis, p-value < 0.05 was used and considered as statistically significant.

**Results:** Most respondents 303(80.2%) had heard about menstruation before onset of menarche; 52.1% had adequate level of knowledge on menstruation. KIIs revealed that much of the information girls receive at school is on sex education, teenage pregnancy and HIV.
Most respondents 295(78%) practiced good menstrual hygiene; Majority 263(69.6%) used commercial disposable pads. None of them mentioned tampons, menstrual cups; neither did they know about these methods. Most girls 278(74%) preferred commercial disposable pads because they absorb longer 249 (65.9). KIIIs further revealed that many girls use cloth but are embarrassed to say so. Majority of the respondents 252(66.7%) did not know how to clean re-usable cloth materials and to properly dry/disinfect them for the next use; 77(20.37%) dried them in hidden dump places.

At multivariate analysis, age and class of respondent, father’s education and source of SMM significantly influenced girls’ menstrual hygiene practices. Majority of the respondents 306(81%) said being in their periods did stop them from going to school although some 68 (18%) missed school because of menstruation, citing fear of staining their clothes 27(7%). Most schools did not have any special health programmes that addressed MHM as revealed by KIIIs. No school had emergency SMM supplies at the time of survey, specific programmes involving parents, or Information, Education, and Communication materials on menstruation to facilitate conversation and learning. School absenteeism, especially in the afternoons was reported, as girls run back home to handle their hygiene demands.

**Conclusion:** This study found that rural schoolgirls in Bulambuli district practise good menstrual hygiene albeit with some challenges largely relating to limited school and parental support. This is not unique to many girls their age and in similar, or perhaps even better economic settings. If these are challenges are addressed, absenteeism, which was one major challenge, can be addressed.