

Socioeconomic Determinants of Menstrual Hygiene Practices among Secondary School Adolescent Girls in Redeemer's University Staff School, Ede, Osun State, Nigeria

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Abstract

Menstrual hygiene practices remain a global health concern; estimates indicate that only 2 out of 5 schools (39%) provide menstrual health education, and less than 1 in 3 schools (31%) globally have bins for menstrual waste in girls' toilets, with 1 in 5 schools in least developed countries (17%), and only 1 in 10 schools (or 11%) in sub-Saharan Africa (World Health Organization, 2024). Despite increasing awareness, menstrual hygiene practices remain a public health challenge, especially in low and middle-income countries. The study assessed the socioeconomic determinants of menstrual hygiene practices among secondary school adolescent girls at Redeemer's University Staff School, Ede, Osun State, Nigeria. A descriptive research design was used for the data analysis, while inferential statistics were used for the relationship between the variables; reliability co-efficient ranged between 0.711 to 0.759; and 125 adolescent girls were randomly selected for the study. Findings showed that sociological factors such as limited access to water and soap (76 (85.4%, $p = 0.058$) significantly influenced menstrual hygiene practices (52.0%). Similarly, economical factors had a significant relationship with menstrual hygiene practices, as some of the respondents, 19 (59.4%, $p = 0.000$), saved out of pocket to buy sanitary pads. The study concluded that awareness on menstrual education, improved sanitary conditions, and accessibility to free or subsidized sanitary pads should be strengthened.

Keywords: Adolescents, Economic factors, Menstrual knowledge, Menstrual hygiene practices, Sociological factors, Reproductive health

Introduction

Globally, menstrual hygiene is a vital aspect of women's reproductive health, affecting a significant population, particularly the approximately one billion adolescents and young women in their reproductive years (Soeiro, R. E., Souza, R. T., Nakamura, R. M., Bento, S. F., Surita, F. G., Cecatti, J. G., & Costa, M. L., 2023). Effective menstrual hygiene practice is essential for mitigating health risks and enhancing quality of life. However, disparities in awareness and practices persist due to some determinants, such as socioeconomic factors and resource accessibility, including adolescent schoolgirls not having access to a clean toilet or other dedicated private space to change menstrual products in school, limited access to menstrual products, and unequal access to water and soap (WHO, 2024). Menstrual hygiene refers to the practices employed by adolescent girls in managing their periods, which are important for promoting physical well-being, optimal self-confidence, and menstrual health in general. In Africa, menstrual hygiene challenges are

pronounced, with cultural taboos, limited accessibility to menstrual hygiene products, and inadequate clean toilet facilities being key barriers (Olusegun, 2024). In Nigeria, factors like stigma from peers, misconceptions, disposal medium, income, access to menstrual products, menstrual education, and inadequate facilities affect adolescent girls' hygiene practices (Kasali, A. T., Ishaleku, D., Idoko, B., & Oche, I. D., 2025). Affordability of sanitary products is one of the major socioeconomic barriers (Junaid, S. B., Khandekar, J., & Sadrudin, S., 2021), especially in economically disadvantaged areas, where the cost of sanitary pads or other menstrual hygiene products is prohibitive. This often leads to the use of unhygienic materials like cloth or rags, increasing the potential risks of reproductive tract diseases and other health-related complications (Elhage Hassan, M., Doumat, G., Daher, D., Al Tannir, A. H., Hassan, B., Chidiac, C., ... & Fouad, F. M., 2022). The challenges faced by menstruating girls encompass more than a basic lack of supplies or infrastructure; some are constrained by cultural taboos and

discriminatory social norms due to a lack of information about menstruation, which leads to unhygienic and unhealthy menstrual practices (Kasali et al., 2025). Addressing these socioeconomic barriers is pivotal in improving menstrual hygiene practices among adolescent school girls. Consistent with previous studies,

economic, social, cultural, and many other factors significantly influence menstrual hygiene practices. These connections provide a continuous need to strengthen school health services that promote menstrual health education and advocate for menstrual space for adolescent girls. The study employed the Social Determinants of Health as its theoretical

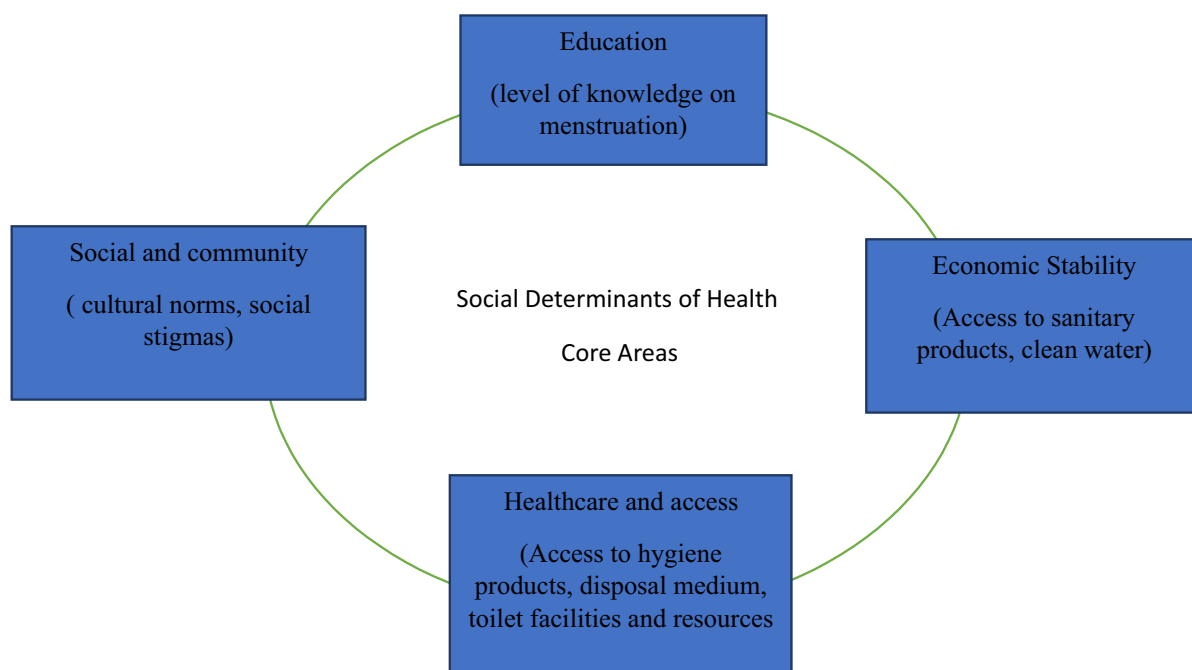


Figure 1. Conceptual Framework

The specific objectives are to:

1. assess the level of knowledge on menstrual hygiene among secondary school adolescent girls at Redeemer's University Staff School;
2. identify possible determinants of menstrual hygiene practices among secondary school adolescent girls at Redeemer's University Staff School; and
3. assess the level of menstrual hygiene practices among secondary school adolescent girls at Redeemer's University Staff School.

Research Questions

1. What is the level of knowledge on menstrual hygiene among secondary school adolescent girls at Redeemer's University Staff School?
2. What are the possible determinants of menstrual hygiene practices among secondary school adolescent girls at

3. Redeemer's University Staff School?
3. What are the menstrual hygiene practices among secondary school adolescent girls at Redeemer's University Staff School?

Research Hypothesis

1. There is no significant relationship between level of knowledge and menstrual hygiene practices among adolescent girls at Redeemer's University Staff School, Ede, Osun State
2. There is no significant relationship between the sociological factor and menstrual hygiene practices among adolescent girls at Redeemer's University Staff School, Ede, Osun State
3. There is no significant relationship between the economic factor and menstrual hygiene practices among

adolescent girls at Redeemer's
University Staff School, Ede, Osun State

Methodology

A descriptive cross-sectional design was used, since this research focused on assessing the socioeconomic determinants of menstrual hygiene practices among adolescent girls in Redeemer's University Staff School, Ede, Osun State. The study utilized a random sampling technique. Adolescent girls who are currently enrolled in the school within the age range of 10-19 years, had obtained consent from their parents, willing to participate and able to comprehend. The research instrument used for data collection in this study was a well-structured self-developed questionnaire. The instrument consists of 28 itemized questions relating to the objectives of the study which were categorized into 5 sections. The instrument's

reliability was assessed by conducting a pilot study involving a sample of 13 female secondary adolescents from Baptist High School as that equals the 10 percent of the total sample size, and the Cronbach Alpha yielded a reliability coefficient index ranging from 0.711 to 0.745. Ethical approval was obtained from Ethics' committee of Redeemer's University and parental consent gained, And a response rate of 100% was deleted to avoid repetition as it is stated in the first paragraph under the discussion of the results

Results

A total of 125 respondents were used for this research which was conducted in Redeemer's University Staff School (RUNSS), Ede, Osun State, Nigeria. 125 responses were retrieved from the respondents and are used for analysis. This translates to a response rate of 100%.

Table 1 showing the demographic characteristics of the respondents

Variable	Categories	Frequency	Percentage
Age	10–12	20	16.0
	13 - 15	67	53.6
	16 - 18	30	24.0
	18 and above	8	6.4
Parental Occupation	Unemployed	12	9.6
	Trader	25	20.0
	Civil servant	41	32.8
	Professional	45	36.0
	Others	2	1.6
Class	JSS1	11	8.8
	JSS2	20	16.0
	JSS3	21	16.8
	SSS1	22	17.6
	SSS2	24	19.2
	SSS3	27	21.6
TOTAL = 125 (100%)			

Table 1 revealed the demographic data of the respondents, with the majority of the respondents, 67 (53.6%) within the 13–15 age group, 30 (24.0%) were within the 16–18 age category. Parental occupation data showed that 45 (36.0%) parents are working as professionals, while 41 (32.8%) have parents who are civil servants, 25 (20%) as traders and 12 (9.6%) as

unemployed. The class distribution among respondents highlights a fairly even spread across different academic levels, 27 (21.6%) in SSS3, 24 (19.2%) in SSS2, 21 (17.6%) in SSS1; among junior secondary school students, JSS3 accounts for 21 (16.8%), JSS2 for 20 (16.0%), and JSS1 for 11 (8.8%). This indicates that the respondents are fairly distributed across

different stages of secondary education, with a slightly higher representation from the senior secondary level.

Research Question 1: What is the level of knowledge on menstrual hygiene among

secondary school adolescent girls at Redeemer's University Staff School?

Table 2: Level of knowledge on menstrual hygiene among secondary school adolescent girls at Redeemer's University Staff School

Variable		Frequency	Percent (%)
Are you aware the average duration of a menstrual cycle is 28 days	Yes	114	91.2
	No	11	8.8
Various menstrual hygiene products available in the market include pads, tampons and menstrual cups	Yes	122	97.6
	No	3	2.4
Menstrual hygiene products should be changed four times daily	Yes	108	86.4
	No	17	13.6
Improper menstrual hygiene practices can result in medical conditions like reproductive and urinary tract infections	Yes	122	97.6
	No	3	2.4
Are you aware of the proper way to dispose used menstrual hygiene products	Yes	120	96.0
	No	5	4.0
Healthy menstrual cycle should be regular with moderate blood flow with absence of severe pain	Yes	99	79.2
	No	26	20.8
Good personal hygiene is very important	Yes	124	99.2
	No	1	0.8
Have you received any education about menstrual hygiene	Yes	121	96.8
	No	4	3.2
Total = 125 (100%)			

Table 2 presents data on the level of knowledge of menstrual hygiene among adolescent girls. A significant majority, 114 (91.2%), were aware that the average duration of a menstrual cycle is 28 days, 122 (97.6%) revealed that there are various menstrual hygiene products, 108 (86.4%) responded that menstrual hygiene products should be changed four times daily, improper menstrual hygiene practices can result in medical conditions 122 (97.6%), aware of proper way to dispose 120 (96.0%), healthy menstrual cycle should be regular without severe pain 99 (79.2%), 124 (99.2%) indicated that good personal hygiene is very important and

121 (96.8%) have received education about menstrual hygiene, while only 8.8% lacked this knowledge. This indicates that most respondents have a basic understanding of menstrual physiology.

Research Question 2: What are the possible determinants of menstrual hygiene practices among secondary school adolescent girls at Redeemer's University Staff School?

Table 3: Determinants of menstrual hygiene practices among secondary school adolescent girls at Redeemer's University Staff School?

Variable		Frequency (n)	Percent (%)
Which menstrual product do you use for your menstrual cycle?	Sanitary pad	116	92.8
	Towel	4	3.2
	Tissue paper	5	4.0
How often do you change your menstrual product?	Every 3-4 hours	32	25.6
	6-8 hours	42	33.6
	Twice daily	40	32.0
	Once daily	11	8.8
How do you dispose of used menstrual products?	Flush in the toilet	38	30.4
	wash and sundry	15	12.0
	Throw into the bush	27	21.6
	Wrap and dispose in a bin	18	14.4
	Trash in the bin	12	9.6
	Put in a nylon	1	0.8
	Rinse up the blood wrap and trash	7	5.6
	Burn	7	5.6
Do you wash your hands before and after changing your menstrual product?	Often	94	75.2
	Sometimes	13	10.4
	Rarely	13	10.4
	Never	5	4.0
How do you handle menstrual cramps or discomfort?	Over the counter medication	34	27.2
	Heat pads	27	21.6
	Rest	63	50.4
	Others	1	0.8
Total = 125 (100%)			

Table 3 showed that majority of the respondents, 116 (92.8%), use sanitary pads as their preferred menstrual product, 4 (3.2%) rely on towels, while 5 (4.0%) use tissue paper. Regarding the frequency of changing menstrual products, 32 (25.6%) of respondents adhere to the recommended practice of changing every 3–4 hours, while 42 (33.6%) change every 6–8 hours, 40 (32.0%) change only twice daily, and 11 (8.8%) change once daily; disposal practices of used menstrual products vary among respondents; a notable 38 (30.4%) flush their products in the toilet, while 15 (12.0%) wash and dry them, 27 (21.6%) dispose by throwing them into the bush, 18 (14.4%) wrap and dispose of them in a bin; 12 (9.6%) place them directly in a trash bin, 7 (5.6%) rinse the blood, wrap, and trash them, and another 7 (5.6%) resort to burning. A very small percentage, 1 (0.8%), put them in nylon. These findings indicate a need for better education on proper disposal methods to promote hygiene and environmental safety. Hand hygiene practices

before and after changing menstrual products showed that 94 (75.2%) of respondents wash their hands often, while 13 (10.4%) do so only sometimes, and another 13 (10.4%) rarely wash their hands. However, 5 (4.0%) never wash their hands during menstrual product changes, highlighting the necessity for stronger emphasis on the importance of proper hand hygiene to prevent infections. Menstrual cramp management methods among respondents indicate that 50.4% prefer rest to relieve discomfort, while 34 (27.2%) use over-the-counter medications, 27 (21.6%) rely on heat pads, and only 1 (0.8%) use other methods.

Research Question 3: What are the menstrual hygiene practices among secondary school adolescent girls at Redeemer's University Staff School?

Table 4: Menstrual hygiene practices among secondary school adolescent girls at Redeemer's University Staff School

Variable		Frequency (n)	Percent (%)
Sociological Factors			
Some of the sanitary pads makes me develop sores?	Yes	75	60.0
	No	50	40.0
I sometimes feel smelled during my menstrual period?	Yes	65	52.0
	No	60	48.0
I prefer to stay at home when menstruating than to come to school?	Yes	107	85.6
	No	18	14.4
There are no clean toilet facilities to use if I need to clean in the school?	Yes	83	66.4
	No	42	33.6
There are no adequate supplies of water and soap to use if I have to change my sanitary pads in school?	Yes	89	71.2
	No	36	28.8
Economic Factors			
I would have loved to use sanitary pads but they are expensive?	Yes	14	11.2
	No	111	88.8
I use sanitary pads when the flows are heavy?	Yes	68	54.4
	No	57	45.6
I use tissue paper to reduce the cost of buying more sanitary pads?	Yes	7	5.6
	No	118	94.4
Who provides the menstrual products every month?	Self	15	12.0
	Parent	110	88.0
I save my pocket money to buy sanitary pads or menstrual product	Yes	32	25.6
	No	93	74.4

Table 4 showed that majority of the respondents 75 (60.0%) reported experiencing sores due to certain sanitary pads, while 40.0% did not have this issue. This suggests that while sanitary pads are widely used, some adolescents may be sensitive to specific brands or materials, which could affect their comfort and willingness to use them. Menstrual-related concerns regarding odour were also highlighted, with 65 (52.0%) of respondents sometimes feeling that they smelled during their menstrual period. Desire for absenteeism from school during menstruation appeared a significant issue, as 107(85.6%) of respondents preferred staying at home rather than attending school while menstruating. This implies that majority of the female students would prefer the provision of a more supportive environment that promote comfort and boost morale. 83 (66.4%) of respondents agreed that there were no availability of clean toilet facilities while 42 (33.6%) felt that their school provided clean facilities; 89 (71.2%) of respondents reported a lack of sufficient supplies in school,

while 36 (28.8%) stated otherwise. This suggests that poor sanitation and inadequate availability of hygiene management materials such as water and soap around the toilet facilities could hamper effective menstrual hygiene management for majority of the students while in school. Economically, majority of the respondents, 111 (88.8%) indicated that sanitary pads were not too expensive for them to afford, while only 14 (11.2%) expressed a major concern on the cost of purchase of menstrual pads or products as significant barrier to effective menstrual hygiene management. Hence, this determines their duration of usage of menstrual products, as 68 (54.4%) of respondents reported using sanitary pads only when their flow was heavy, while 57 (45.6%) did not, 118 (94.4%) of respondents stated that they did not use tissue paper to manage menstruation, while only 7 (5.6%) admitted to using tissue paper as an alternative to sanitary pads to cut costs. This suggests that tissue paper is not a common substitute for menstrual

hygiene products among these adolescents, indicating a relatively high level of access to proper menstrual hygiene products but this percentage on tissue paper usage cannot be underrated, considering its predominant significance on possible risks for infection. The sole responsibility for providing menstrual products was dependent on their parents or guardians as agreed by 110 (88.0%) of respondents while 15 (12.0%) had to source their own products. This suggests that for the majority of adolescents, menstrual products are provided without them needing to personally finance them, although a small percentage may have to manage the cost themselves. Financial independence in purchasing menstrual products

was also assessed, with 32 (25.6%) of respondents saving their pocket money to buy sanitary pads, while 93 (74.4%) did not engage in such savings.

Hypothesis Testing

Hypothesis 1

H_0 1: There is no significant relationship between level of knowledge and menstrual hygiene practices among female adolescents at Redeemer's university staff school.

Table 5: Relationship between level of knowledge and menstrual hygiene practices among female adolescents at Redeemer's university staff school.

Variables		Level of menstrual hygiene practice among secondary school female adolescents at Redeemer's university staff school.		Chi-square	Df	P-value
		High	Low			
Level of knowledge about menstrual hygiene among secondary school female adolescents at Redeemer's university staff school.	High	109 (88.6%)	14 (11.4%)	0.256	1	0.613
	Low	2 (100.0%)	0 (0.0%)			
Total		111 (88.8%)	14 (11.2%)			

Result in table 5 above revealed no statistically significant relationship between the level of knowledge and menstrual hygiene practices among female adolescents at Redeemer's University Staff School ($p < 0.613$, $\chi^2 = 0.256$), hence, the null hypothesis is not rejected.

Hypothesis 2

H_0 2: There is no significant relationship between

sociological factor and menstrual hygiene practices among adolescent girls at Redeemer's university staff school.

Table 6: Relationship between sociological factors and menstrual hygiene practices among secondary school female adolescents at Redeemer's university staff school.

Variables		Level of menstrual hygiene practice among secondary school female adolescents at Redeemer's university staff school.		Chi-square	Df	P-value
		High	Low			
I prefer to stay at home when menstruating than to come to school?	Yes	93 (86.9%)	14 (13.1%)	2.652	1	0.103
	No	18 (100.0%)	0 (0.0%)			
There are no clean toilet facilities to use if I need to clean up in the school?	Yes	78 (94.0%)	5 (6.0%)	6.654	1	0.010
	No	33 (78.6%)	9 (21.4%)			

There are no adequate supplies of water and soap to use if I have to change my sanitary pads in school?	Yes	76 (85.4%)	13 (14.6%)	3.606	1	0.058
	No	35 (97.2%)	1 (2.8%)			

Result in table 6 above revealed that the Chi-square test values for different sociological factors vary, with the availability of clean toilet facilities showing a value of ($p < 6.654$, $\chi^2 = 0.010$), which is below the conventional threshold of 0.05, indicating a significant relationship, hence, the null hypothesis was rejected. However, other factors, such as preference to stay home during menstruation, and availability of water and soap, have p-values of 0.103 and 0.058 respectively, which are above 0.05, indicating no significant relationship.

Hypothesis 3

H_0 : There is no significant relationship between economic factors and menstrual hygiene practices among female secondary school adolescents at Redeemer's university staff school.

Table 7: Relationship between economic factors and menstrual hygiene practices among female adolescents at Redeemer's university staff school.

Variables		Level of menstrual hygiene practice among secondary school female adolescents at Redeemer's university staff school.		Chi-square	Df	P-value
		High	Low			
I would have loved to use sanitary pads but they are expensive?	Yes	12 (85.7%)	12 (14.3%)	0.151	1	0.698
	No	99 (89.2%)	12 (10.8%)			
I use tissue paper to reduce the cost of buying more sanitary pads?	Yes	3 (42.9%)	4 (57.1%)	15.737	1	0.000
	No	108 (91.5%)	10 (8.5%)			
I save my pocket money to buy sanitary pads or menstrual product	Yes	19 (59.4%)	13 (40.6%)	37.444	1	0.000
	No	92 (98.9%)	1 (1.1%)			

Table 7 above showed a significant relationship between economic factors and menstrual hygiene practices among adolescent girls at Redeemer's University Staff School, Ede, Osun State ($p < 0.000$, $\chi^2 = 15.737$ and 37.444). Hence, the null hypothesis was rejected.

Discussion

The research study was conducted to assess the socioeconomic determinants influencing menstrual hygiene practices among secondary school adolescent girls at Redeemer's University Staff School, Ede, Osun State. The majority of respondents were aged 13 to 15 years. A significant proportion have parents working as professionals or civil servants, while others are engaged in trading or unemployed. A

study by Asumah et al., (2023) indicated that parental socioeconomic status plays a significant role in an adolescent menstrual hygiene. The respondents were fairly distributed across different secondary school levels, with a slightly higher representation from the senior secondary classes.

Findings revealed that there is a high level of knowledge about menstrual hygiene among secondary school female adolescents at Redeemer's University Staff School, as the majority recognized the importance of maintaining hygiene, understand the health risks of poor practices, and are aware of various menstrual products and proper disposal methods. A significant number had received education on menstrual hygiene and demonstrated a strong understanding of

menstrual physiology. This is supported in a study conducted by Agyei (2025) who found that majority of the respondents had high level of menstrual knowledge.

The findings from this study indicated a high level of knowledge about menstrual hygiene among secondary school female adolescents at Redeemer's University Staff School, as most students recognized the importance of hygiene, understand health risks, and are aware of proper menstrual practices. This is in support of the findings by Shumie & Mengie (2022) that nearly two-third of respondents had good knowledge and good practice of menstrual hygiene management. Similarly, Adane et al., (2024) agreed that school girls from Northern part of Ethiopia had a good knowledge of menstrual hygiene practices. In contrast, a study conducted by Alshurafa (2023) revealed that only one-third of the participants had a good knowledge of menstruation. However, the current study suggests an improvement in menstrual health awareness, a well-structured education enhancing the need for continued menstrual hygiene education in schools. Certain sociological factors from this study impacted the adolescent girls' menstrual hygiene, such as desire for absenteeism from school during menstrual cycle, inadequate access to water, soap, and clean toilets, skin sensitivity to certain sanitary pads, and concerns about menstrual odour. This is in contrast with Namuwonge et al. (2025), who found that the main barriers to proper menstrual hygiene practices among Ugandan adolescents were cultural norms and stigma surrounding menstruation, rather than infrastructural challenges. Similarly, King et al., (2025) highlighted social restrictions, such as prohibiting menstruating girls from participating in religious and household activities, as a major concern which negatively influenced the adolescent girls' perception of menstruation and hygiene practices.

The study showed that most students did not have challenge affording their sanitary pads as menstrual products were majorly provided by guardians or family members, thereby reducing the financial burden on adolescents, and the majority do not need to save their pocket money for these essentials. This implies a major relief

that might have become a burden to them, as well affect their morale during menstruation, and engender possible stigmas that could result into depression. This is supported by Rossouw & Ross (2021) who revealed that families with higher incomes can afford sanitary pads and other necessary products, whereas those with lower incomes often resort to unhygienic alternatives due to financial constraints. This contrasts with Frost (2025), who found that financial constraints in Kenya and Nigeria led many girls to rely on less effective alternatives like rags, tissue papers or cloth materials as menstrual products that were inadequately cleaned. Moreover, the study aligns with Das et al., (2020), who highlighted that government subsidies and affordable menstrual hygiene products through schools helped reduce economic barriers, suggesting that financial support systems can enhance menstrual hygiene management among adolescents.

The study revealed that, the level of menstrual hygiene practice among secondary school female adolescents at Redeemer's University Staff School is notably high, as the majority use sanitary pads, but effective menstrual practice at school remains hampered due to the inadequate structural infrastructures within the school premises. However, there remains a high concern on the prolong use of sanitary pads for 6-8 hours and use of sanitary pads twice daily before changing them, which is a possible risk for reproductive tract infections. Disposal of used pads also affected their menstrual practices as some have to dispose of in the bushes, indicating a need for improved education on proper disposal methods and usage of sanitary pads to enhance overall hygiene practices. This is supported by the study conducted by Melaku (2023), who reported low levels of menstrual hygiene practice in Ethiopia due to inadequate sanitation facilities. The study aligns with Kalambula et al., (2020), who demonstrated that menstrual hygiene education and improved washing and sanitary facilities in schools led to a significant increase in proper hygiene practices, reinforcing the importance of awareness and infrastructure in maintaining good menstrual hygiene.

Conclusion

The study showed that the level of knowledge about menstrual hygiene among secondary school adolescent girls at Redeemer's University Staff School is notably high, most girls have their sanitary pads supplied by their parents, which reflected in their menstrual hygiene practices. Sociological factors such as inadequate access to water, soap, clean toilets, skin sensitivity to certain sanitary pads, disposal methods, prolong use of sanitary pads and concerns about menstrual odor influence menstrual hygiene practices. Economic factors for affordability did not pose financial burden on the adolescent girls as their sanitary pads were not purchased out of their pockets.

Recommendations

Government and school authority:

The government and school authority should prioritize menstrual hygiene management in schools by promoting environment that provide effective support for the adolescent girls, advocate for proper disposal of menstrual products to prevent environmental hazards, and promote hygienic environment. Policies should be implemented to support free or subsidized sanitary pads for students, to encourage 4-hourly change of sanitary pads and support for those who have to purchase menstrual products out of personal savings, though, their number is very minimal but cannot be disregarded. Additionally, menstrual health education should be incorporated into school curriculum to promote awareness and reduce stigma associated with menstruation.

Nurses and Health Professionals:

There should be reinforcement of the school health programs to educate students on proper menstrual hygiene practices. They should provide counseling to adolescents experiencing challenges related to menstruation, such as skin sensitivity to sanitary products and concerns about menstrual odor. Furthermore, they should advocate for the improvement of school health services to ensure menstrual-related concerns are openly and adequately addressed, preventing stigmatization.

Health Institutions:

Health institutions should develop targeted

outreach programs to promote menstrual hygiene awareness in schools and communities. They should also conduct periodic health screenings for adolescent girls to identify and manage menstrual-related health issues. Collaborations with schools should be strengthened to ensure sustainable health education programs regarding menstrual hygiene and reproductive health of the adolescent girls.

Parents and guardians

Parents and guardians should be encouraged to provide continuous support by ensuring their children have access to appropriate menstrual products. Community awareness programs should be reinforced to reduce stigma and cultural misconceptions about menstruation.

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