Knowledge And Impact Of Analgesics Drug On Menstrual Period Of Female Nursing Students Of Igbinedion University Okada, Ovia North East, Edo State, Nigeria.

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ABSTRACT

Menstruation is normal process in a girl's transition to womanhood. Lack of awareness thereof, before menstruation and stigmatizing menstrual hygiene management (MHM) perception and experiences predominate in low resource economies and it influences attitude. The main objective of this study is to assess the knowledge and impact of analgesics drug use on menstrual period of female nursing students of Igbinedion University Okada Edo state Nigeria. A descriptive research design was used for this study. Multistage sampling technique was adopted for this study. The study was conducted by means of a well-self structured questionnaire. It was revealed from the findings that majority of the respondent 90% are informed about analgesics drugs use during menstruation. Majority of the 100% respondent agreed that their mother informed them about menstruation. Almost, 98% of the respondent said it is necessary for female adolescent to experience menarche. It can easily be deduced that a large number of female adolescents are knowledgeable about menstrual pain and menstrual cycle and larger percentage of female students were not happy with themselves during menstrual period because of the discomfort they used to have. It was recommended that there should be a form of sensitization for the female students on the need to overcome menarche stress and anxiety that associated with menstruation.

Keywords: Analgesic drugs, Menstruation and Menstrual Cycle

I. BACKGROUND OF THE STUDY

Menstruation is natural procedures in a girl's transition to womanhood. Lack of awarenessthereof, beforemenstruation and stigmatizing menstrual hygieneman agement (MHM) perception

andexperiencespredominateinlowresourceeconomie sandinfluencesattitude(Swenson, 2018). Most females see menstruation as a blessing and a curse. A blessing in thesense of proper enlightenment by their parents, guardians and the society and a curse due to theignorance of limited knowledge about the experience of their first menstruation which signifiestheflourishingageofadolescentgirls intoadulthood (Swenson, 2018).

Analgesics are among the most commonly used medications and proper use is considered safeand effective (Hancock et al., 2020). According to a survey of ambulatory OTCanalgesicsarethemostfrequentlyusedindividual productsamongU.S.FoodandDrugAdministrationregulated medications, with 17-23% of the population using such medications in a given week (Kaufman et al., 2020). Furthermore, women reported greater OTC analgesic usethan men (Kaufman et al., 2020; Koushede et al., 2020) but analgesic use across the menstrualcycle and the effects of OTC analgesics on hormones and ovulatory function in premenopausalwomen have not been investigated. Given that OTC analgesics are readily available, commonlyused to treat dysmenorrhea, and little is understood about their potential effects on reproductive function, sought to investigate both the acute and chronic effects of daily-measured OTCanalgesicuseonreproductivehormonesandovula toryfunctioninhealthy,eumenorrheic,premenopausal women with carefully timed, repeated measures of blood hormone concentrationsacrossthe menstrual cycle.

Adolescents are aged between 10 and 19 vears and constitute one-sixth of the worlds' population(WHO, 2019). Adolescence signals the transition from childhood, to adulthood, and associatedwithrapidpubertaldevelopmentandsexual maturation(Kaur, 2018). During pubertal developmen t,psychological,cognitive,hormonalandphysicalcha ngesoccurwithdiversevariations in individuals, because of environmental, nutritional and genetic factors (Fatunmbi,2017). Adolescence heralds menstruation, a rite of passage for girls that signals the transition towomanhood (Coast, 2019). The menstrual cycle has three phases; the follicular, ovulation andluteal (secretory) phases, regulated by hormones (Kaur, 2018). Menstruation sheds twothirds of the endometrial lining. The intensity and duration of menstrual flow vary (between 3-5 days andoccasionally up to seven days) in individuals and at different life phases. The resultant wasteduring menstruation is termed menses, periods, or monthly bleeding that need to be consideredandmanagedwith dignity(Aburshaid, 2017).

The onset of menstruation represents a landmark event in pubertal development of the adolescentgirl. Menstruation, andthe menstrualcycleare characterized by variability in volume,patternand regularity, which at the earlier stages of the development oftheadolescent can createemotional discomfort particularly to the poorly informed girl. Studies have shown that althoughmost girls viewed themselves as being prepared for menstruation, having 'discussed this withtheir mothers', obvious misconceptions on the true physiological process and characteristics ofmenstruation and the menstrual cycle is evident from these studies (Abiyoye-Kuteyi, 2018). There isa tendency forgirlstoassociatea variety of negative physicalandpsychologicalchanges on their body with menstruation — a situation found to be more marked in blackscompared towhitegirls. This may indicatean imbibition and internalization of cultural mythsandstereotypesassociatedwithmenstruationin manycultureswhichundoubtedlyinfluence menstrualpracticesamongstgirlsintheseculturesparticularlyamongstthosewhohadnoformaleducatio n on reproductivebiology(Drakshayani, 2019). This study has been undertaken amongst nursing of Igbinedion University student EdoStateNigeriatodeterminetheirattitudestowardsm enstruationwithaviewtoidentifyinginformation and practice gaps, and misconception on menstruation requiring address. This wasexpected to enable the incorporation of correct and appropriate information on menstruation andmenstrual practices into the reproductive health education

programmes of school of nursing inNigeria. Statementoftheproblem:Thisstudywillfillagapinthel iterature withinthe Nigerian contextby investigating attitudes and beliefs of the experience menstruation thereby, adding to the body of knowledge. Furthermore, this studywillprovideacontextualandtheoreticalundersta ndingofmenstruationinNigeria,particularly Southern Nigerian women's attitudes and beliefs of experience of menstruation.Literature highlights how the negativity surrounding menstruation and menstruation is a productof socio-cultural processes and cultural attitudes, possibly resulting in a form of social controlover women (Chadwick, 2018). The medicalization of the female reproductive body also raisesissues of control. negative attitudes menstruation, as well as restrictions and secrecy surrounding women and menstruation. These issues are, in turn, assaulting womenpsychologically, degrading their self-esteem, and creating a feeling of shame, thus highlightingthe need to explore the factors associated with the attitudes and beliefs of the experience ofmenstruationwithin the west African context especially Nigeria.. Studyingmenstruationmayprovidetheopportunitytot racethepatternsofmodernizedpatriarchal domination over women's reproductive bodies and experiences (Cindoglu & Sayan-Cengiz, 2010). It may also provide an understanding of the factors attitudesandbeliefsassociatedwithmenstruation.andt heimplicationsofmenstrualsymptomsonemotional and physical wellbeing, which is fundamental to the promotion of menstrual health(Wong & Khoo, 2019). Since very little attention has been given to the Edo state context, this study aimed to bring to light the factors present in nursing student of the experience of the use ofanalgesicdrugs menstruationinIgbinedion University, Okada

II. METHODOLOGY

Nigeria, West Africa.

A descriptive research design was used for this study to determine the knowledge and impact of analgesics drug use on menstrual period of female Nursing students of IgbinedionUniversityOkada ResearchSetting was Igbinedion University Okada, a small community inOvia North East Local Government Area of Edo state Nigeria. Thetargetpopulationconsists of490nursingstudentsinIgbinedionUniversityOkada .EdoState. Multistagesamplingtechnique wasadoptedforthisstudy. The sample size wasdeterminedusing Yamnaneformular. Theresearcherusedaconfidencelevel of0.10.

Sample size of 100 students was used for the study.Instrumentfordatacollection by means of a well-structured questionnaire. The questionnaire wasdesigned by the researcher. The questionnaire consists of 20 closed ended questions organizedinto3 sections as follows: ABC

The instrument was scrutinized by my supervisor who critically assessed the relevance of variousitemsin the questionnaireto establishfactandcontent validity. Aninstrumentissaidtobereliableifthereisconsistency ofmeasurement. Thereliability of the instrument was achieved throughtest and retestmethod. **Methodof**

DataCollectionPermission for data collection was obtained from the school management and the head of department of Nursing. The questionnaire was distributed to selected 100 participants; All the students are taught in English language and this made the understanding of the questionnaire very easy. Methodsof DataAnalysis, the researcher used statistical package for social science (SPSS)version 17.0 and results were presented using descriptive statistical tools such asfrequency, percentages, tables, at 0.05 level of significance.

Ethical permission was gotten from the university ethical committee to carry out the study.

III. DATA ANALYSIS

The collected data were analyzed using descriptive stati

sticsinIBMSPSSStatisticssoftwareVersion 23x86.Results

Socio-DemographicCharacteristic

Thequestionnairesadministeredatrandomwerecompl etedby100nursingstudents'oflgbinedion University Okada. In terms of the age distribution of the respondents in Table 1: 90% of the respondents were 17-18 yearsandabove, while 10% of the respondents were 14-16 yearsof age. Religion distribution of the respondents in Table 2: shows that 80% of the respondentswere Christians, 13% were muslin, 3% were traditional and 2% belongs to other religions. However 2% of the respondents fail to indicate their religion. In Table 3: the tribal distribution

of the respondents shows that 40% were Binis, 1% was Y or ubas, 30% were Ibos, and 29% were

fromothertribes. Asshownin Table 4:71% of the respon dentswerenotlivingwiththeirparents, living with their parents and 4% failed to indicate they living with their parents or not. Interms of marriage statu sasshowninTable5:88% of the respondents were single, 10% were married while 1% did not indicate whether married, single ordivorced. For the state of origin distribution in Table 6: 40% of the respondent were from EdoState,30% werefromImo Stateand 30% werefrom other states.

Table1:Ageof thecorrespondent

		Frequency	Percent	ValidPercent	CumulativePercent
Valid	17-	10	10.0	10.0	10.0
	18yearsabove	90	90.0	90.0	100.0
	Total	100	100.0	100.0	

Table2:Religion ofthecorrespondent

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		Frequency	Percent		CumulativePer cent
Valid	Christainity	80	80.0	81.6	81.6
	Muslim	13	13.0	13.3	94.9
	Traditional	3	3.0	3.1	98.0
	Others	2	2.0	2.0	100.0
	Total	98	98.0	100.0	
Missing	System	2	2.0		
Total		100	100.0		

Table3:Tribeof thecorrespondent

		Frequency	Percent	ValidPercent	CumulativePercent
Valid	Bini	40	40.0	40.0	40.0
	Yoruba	1	1.0	1.0	41.0
	Ibo	30	30.0	30.0	71.0
	Others	29	29.0	29.0	100.0
	Total	100	100.0	100.0	
	Total	100	100.0	100.0	

Table5:MarritalStatusof thecorrespondent

		Frequency	Percent	ValidPercent	Cumulative Percent
Valid	.00	1	1.0	1.0	1.0
	Single	88	88.0	88.0	89.0
	Married	10	10.0	10.0	99.0
	11.00	1	1.0	1.0	100.0
	Total	100	100.0	100.0	

Table6:Stateof originofthecorrespondent

					Cumulative
		Frequency	Percent	ValidPercent	Percent
Valid	Edo	40	40.0	40.0	40.0
	Imo	30	30.0	30.0	70.0
	Others	30	30.0	30.0	100.0
	Total	100	100.0	100.0	

Knowledgeof femalenursingstudentstowards theuseofanalgesicduringmenstrualperiod

The descriptive analysis performed on the questionnaire subsection on the second (Knowledge offemale nursing students towards the use of analgesic during menstrual period) in Table 8: showsthat 89% of the respondent from Igbinedion University nursing students have knowledge on theuse of analgesic drugsduring menstrualperiodwhile11% didnotknowthatanalgesicdrugcould be used during menstrual period. In addition, 79% of the respondent indicated that theirparentsinformedthemabouttheuseofanalgesicdr ugsduringmenstrualperiodwhile21% of the respondents agreed that they were informed by a nurse as shown in Table 9:. Moreover, asshown in Table 10: 77% of the respondents have started

using analgesics drugs before thequestionnaire were administered while 23% had not started the of analgesic drugs theadministeringofthequestionnaire.Table11:showst hat32% of the respondents who have started the use of an algesicsfelthappythefirstdayofuse, 13% feltafraid, 18 % feltsad, 18% felt indifference while 19% did not respond to this particular question on the questionnaire. It isshown in Table 12: that 49% of the respondents experienced their first menses at age 12yearsold,39% experienced their sattheage of 13-

15 yearsold, and 12% experienced their sat

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16 – 18 years old. On the reduction of menstrual flow with analgesic drugs as shown in Table 13:78% of the respondents agreed to the fact that analgesic drugs reduces their menstrual flowwhereas 22% believe that analgesic drugs

doesnot reduce their menstrual flow.Inaddition, Table 14: shows that 54% of the respondents believe that the menstrual cramp is hereditarywhile 46% indicated that menstrual cramp is not hereditary.

Table8:Informedaboutanagelsicsdrugusedduringmenstruation

		Frequency	Percent	ValidPercent	CumulativePercent
Valid	Yes No	89 11	89.0 11.0	89.0 11.0	89.0 100.0
	Total	100	100.0	100.0	

Table9:Whoinformedtherespondentabouttheanalgesicdrugduringmenstruation

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		Frequency	Percent	ValidPercent	CumulativePercent
Valid	Parents	79	79.0	79.0	79.0
	Nurse	21	21.0	21.0	100.0
	Total	100	100.0	100.0	

Table 15: Is an algesic drugsnecessary to reduce menstrual pain?

	Frequency	Percent	ValidPercent	Cumulative Percent
Yes	87	87.0	87.9	87.9
No	12	12.0	12.1	100.0
Total	99	99.0	100.0	
System	1	1.0		
	100	100.0		
	No Total	Yes 87 No 12 Total 99 System 1	Yes 87 87.0 No 12 12.0 Total 99 99.0 System 1 1.0	Yes 87 87.0 87.9 No 12 12.0 12.1 Total 99 99.0 100.0 System 1 1.0

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Table 16: Isthe	useoflocalremed	vhetterthanana	lgesicdrugs?
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					Cumulative
		Frequency	Percent	ValidPercent	Percent
Valid	Yes	77	77.0	77.8	77.8
	No	22	22.0	22.2	100.0
	Total	99	99.0	100.0	
Missing	System	1	1.0		
Total		100	100.0		

Impact of An algesics Drugsduring menstrual period

As shown in Table 15: 87% of the respondents believes that analgesics drug is necessary forreduction of menstrual pain, whereas 12% believed it is not necessary. 77% of the respondent areof the opinion that local remedy is better than analgesics, while 22% believe that local remedy isnot better than analgesic as shown in Table 15. Table 17: shows that 89% of the respondentsagreed that analgesic drug stopped their menstrual pain, whereas 10% are of the opinion thatanalgesic drugs do not stop their menstrual pain. Table 18 shows that 46% of the respondentsaccepted the fact that analgesic drug stopped their menstrual pain after 30minutes of intake. 28% accepted that their menstrual pain stop in 1hour after the intake of analgesic drugs. 13% of therespondents believe that their menstrual pain stop after 2hours of taking analgesics drug. 5% believethat theirmenstrual painstop at other times not30minutes, 1hour, or 2hours.

IV. DISCUSSION OF FINDINGS

Themajorityoftheadolescentsinthepresentst udy(90%)havegoodknowledgeabouttheuseof analgesic drug during menstruation as pain-relief method. Analgesic is believed to bring relieffor many types of pain, but unfortunately, it is not practiced by many. It was also shown thatsomestudents(33%)avoidedphysicalactivityduringtheirmenstrualperiodinastudyconducted by Poureslami & Ashtiani, (2020). Traditionally, in our culture, physical activity isminimizedduringmenstruation.

Almost all students (70%) in the present study stated that they seek answers for their menstrual problems from their mothers, and this is a natural phenomenon for countries, such as Sri Lanka, wheremothers and daughters generally have ag oodrelationship.SriLankansocietystillcomprises extended families to a large extent, where parental and grandparental advice is givenchildren. When a girl reaches puberty, males are not allowed to see her until the ceremonialbathing is done. The mother bathes the child at an auspicious time, and she is the one who looksafter the child during menarche. Other sources of help were friends, sisters, healthcare providers, mass media, and teachers. None sought help from their fathers. These findings are in line withother studies, including Lee et al. (2016), who indicated that mothers are the most important people girls turn to for advice regarding menstruation, followed by friends, sisters, the massmedia, teachers, and healthcare providers. The same observation was et al.(2017)regardingurbanIndiangirls.However,Gh attargiandDeo(2018)indicatedthatsomegirlsarereluc tant to discuss menstrualproblems, even with their mothers.

In the present study,84% of students said thatpain was a natural thing for them, and 9% believed that it would disappear after marriage. Twenty two percent admitted that they had notsought medical treatment, as they felt embarrassed to discuss their menstruation with anybody. Higher proportion (98%) of adolescents stated that Analgesics is necessary for female to reduce the experience during menses. Interestingly, bathing was perceived to affect pain, as reported

by90% of the students in contrary to our study is the study done by Gayatri (2017) where 95% of the respondents used traditional and cultural influences by elders as their best method for stayinghealthy during their menses. This could be due to traditional and cultural influences by elders. Usuallybathing avoided bymostgirls during the first 3 days of menstruation.

Relationship with other findings

Severalresearchershaveexpressedconcerns abouttheobservationthatpost-menarchegirls, even when they are intellectually well prepared for menstruation, report more feelings of shame, apprehension and disgust and less pride than their pre-menarche peers (Lawal, 2019). If girls are mentally prepared formen arche, then the chances of depression or lowself-

esteemafterexperiencingmenarchedecrease; Ulman has reportedsuch afinding(Ulman, 2019).

Puberty initiation rites heralding menarche are common in many cultures. Paige reflected thatsocieties with the highest levels of social rigidity and male solidarity also have the strongestcodification of menstrual taboos (Adinma, 2018). This may reflect a need to maintain clear sexroles, oftenby controlling women and their fertility. Social and cultural factors impacton adjustment to menses and have an effect on the early experiences of menarche. Certain common features were observed, however, in that most girls reported their mothers as a principal source of information and received some limited education about menses in school with frequent

emphasis on the hygienic aspects of menstruation. Since it is a very sensitive issue, girls prefer toreportsuch things first to thewoman theytrust most (Ali, 2017).

This highlights the need for health education and inclusion of such topics in their school andcollege curricula. Education about the menarche has come a long way in the last 50 years, although it is still given in very few schools and colleges in India. However, in trying to conveymenstruation as normal and natural, and in directing girls to continue with their lives as usual, wehave ignored some of the nuisance aspects of menstruation. Girls are left to find these things themselves, perhaps contributing outfor topostmenarche feelingsof apprehension, shame and disgust. There is a need to acknowledge both positive and negative feelings about menstruation. Inaddition to the facts about physiology and hygiene, girls need an opportunity to talk abouttheir reactions to body changes, looking older, growing up and parental and peer

expectations. Because girls' attitudes and ways of thinking changed uring early adolescence, menstrualed ucation needs to be an ongoing process.

Implication to Nursing Practice;

Itisalreadyknownthatmenstruationisasensit iveissuesurroundedbysocialtabooandsupernatural perceptions. Females, particularly adolescent girls of discussing afraid topicsrelated menstruation. Therefore, we recruited clinical nurses for data collection by consideringthat clinical nurse can have better experience to communicate people regarding sensitive topicswiththerapeuticrelationship.Itisalreadyknown thatmenstruationisasensitiveissuesurrounded social taboo and supernatural perceptions. Females, adolescent girlsoften afraid particularly discussing topics related menstruation. Therefore, we recruited clinical nurses fordata collection by considering that clinical nurse can have better experience communicatepeopleregardingsensitive topics with therapeuticrelationship

Limitation of theStudy; There are several challenges in course of this research project work ranges from time constraintsto financial constraints. The field survey poses another challenge as many of the sawmill workersrefused to give their consent and some could not be reached easily. Other school activities were also a limited factor to thestudy.

Summary; The study was designed to assess the impact of analgesics drug on menstrual period of femalenursingstudents of Igbinedion UniversityOkada. There is need forparent(mother)toeducatetheirfemalechildonthene cessitiesincoping with menarchechallenges.

Conclusion; Impact of analgesics drug use on menstrual period of femalenursingstudentsat the setting wassatisfactory. Negativity surrounding the menstruation which is a normal physiological processcanstill improved be uponbyreproductivehealtheducation byindividuals findings, and society. From the i tcaneasilybededucedthatalargenumbero f

femaleadolescentsare

knowledgeableaboutmenstrualpainandmenstrualcyc leandlargerpercentageoffemale students werenot comfortable with pain that associated with menstrualperiod.

Recommendations; Mothersshould educate their childrenontheimportance of copingwith menarchechallenges which is common in girls. Thereshouldbeaformofsensitizationforthefemalestu dentsontheneedtoovercome menarchestress andanxiety.

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Femalechildrenshoulddeveloppositiveviewoftheme narcheandmenstrualcyclehence it is a normal process in women.

Suggestionforfurtherstudies

;Morestudiesshouldbecarriedoutonthistopictodeter mineotherfactorsthatcontributed to menarchehygieneamongfemalestudents in othercommunities.

REFERENCES

- [1]. Asaq F & Jami H (2016). Experiences and Attitudes Related to Menstruation among FemaleStudents.Pakistan JPsychol Res.;27(2):201–24.
- [2]. Abioye-Kuteyi, A (2018). Menstrual knowledge and practices amongst secondary school girls inIle-Ife,Nigeria. JReprod SocHealth. 120 (1):23-26.
- [3]. Abramovsky L, Augsburg B, Oteiza F (2019). Baseline report: Sustainable Total Sanitation -Nigeria [Internet]. 7 Ridgmount Street London, London WC1E 7AE: The Institute forFiscal Studies; [cited 2019 Aug 23]. 1–149 p. Available from: http://www.ifs.org.uk(Assessedon the 10thOctober, 2020)
- [4]. AburshaidF,AhmadS,AshmaueyA&Moha mmadH.(2017).EffectofPlannedHealthEdu cational Program on Menstrual Knowledge and Practices among Adolescent SaudiGirls.JNurs Heal Stud.. 12(1):74–83.
- [5]. Adinma, E.D & Adinma, J.I (2018). Perceptions and practices on menstruation amongst Nigeriansecondaryschoolgirls.Afr J Reprod Health.;12(1):74–83.
- [6]. Ali F, Aburshaid H, Ahmad SG, Ashmauey AA (2017). Effect of Planned Health EducationalProgram on Menstrual Knowledge and Practices among Adolescent Saudi Girls Keyphrases.iMedPub Journals.;1–8.
- [7]. Aluko O, Oloruntoba E, Chukwunenye U, Henry E & Ojogun E (2018). The dynamics anddeterminantsofhouseholdsharedsanitati oncleanlinessinaheterogeneousurbansettle mentinSouthwestNigeria.PublicHealth[Int ernet].Dec1[cited2018Nov1];165:125–35.Availablefrom:https://www.publichealthjrnl.com/article/S0033-3506(18)30302-0/fulltext#.W9rkAClK_mA.mendeley (Assessed on the 10th October,2020)
- [8]. AlukoO,OluyaO,OlaleyeA,OlajuyinA,Ola bintanT&Oloruntoba-

- OjuI(2016).Knowledgeandmenstrualhygie nepracticesamongadolescentsinseniorseco ndaryschoolsinIleIfe,southwesternNigeria.JWater,SanitHygDev4(2): 248.Availablefrom:http://www.scopus.com/inward/record.url?eid=2-s2.0-84904717486&partnerID=tZOtx3y1(Asse ssed onthe 10th October, 2020)
- [9]. Chandra-Mouli V & Patel V (2017). Mapping the knowledge and understanding of menarche, menstrual hygiene and menstrual health among adolescent girls in low- and middle-incomecountries. Reproductive Health Vol. 14,:.p. 1–16.
- [10]. Chrisler, J.C., & Zittel, C.B (2016).

 Menarchestories: Reminiscences of collegestudents from Lithuania, Malaysia, Sudan, and the United States. Health Care for Women International, 19, 303-312.
- [11]. Coast E, Lattof S & Strong J. (20019). Puberty and menstruation knowledge among youngadolescents in low- and countries: a scoping middle-income review [Internet]. 64, International Journal of Public Health. Spr ingerInternationalPublishing.293-304.Available from: http://link.springer.com/10.1007/s00038 $the 10^{th}$ 019-01209-0 (Assessed on October, 2020)
- [12]. CollierJ.LongM&Scally,P (2015)OxfordHandbook ofClinicalSpecialities 6thed.OxfordUniversitypress.
- [13]. Communities B (2020). Research and Learning Brief Improving School Attendance and PositiveFeelingsaboutMenstruationforGirl sinGhanathroughaHolisticMenstrualHealt hand Hygiene Management Approach Key Findings [Internet]. [cited 2020 May 21]. Available from: https://www.unicef.org/wash//(Assessedonthe 10th October, 2020)
- [14]. CostosD,AckermanR,&ParadisL(2002)Re collectionsofmenarche:Communicationbet ween
- [15]. DrakshayaniD&VenkataR.(2019).Astudyo nmenstrualhygieneamongruraladolescentg irls.Indian J Med Sci. 48 (6): 139-143.
- [16]. Fatunmbi O, Usman S, Adesina A, Sunday O, UsmanI & Odesanmi A (2017). MenstrualTraining and Hygiene Management Among Adolescents in South-Western Nigeria: ACross-SectionalStudy. 2(1):106–13.





Volume 5, Issue 1, Jan-Feb 2023 pp 352-362 www.ijdmsrjournal.com ISSN: 2582-6018

- [17]. Fehintola F, Fehintola A, Aremu A, Idowu A, Ogunlaja O & Ogunlaja I (2017). Assessment ofknowledge, attitude and practice about menstruation and menstrual hygiene amongsecondaryhighschoolgirlsinOgbom oso,OyoState,Nigeria.IntJReprodContrace ption,Obstet Gynecol.;6(5):1726.
- [18]. Freeman, M & Sommer, M (2019). Structural factors in uencing menstruating school girls' healthand well-beingin Tanzania. Compare. May; 43(3):323–45.
- [19]. Ghiasi A, Keramat A & Mollaahmadi L, (2018). The relationship between attitudes towardmenstruationandperimenstrualsymp tomsamongfemalestudentsofshahrouduniv ersityof medical sciences, northeastIran. Shiraz EMed J. Aug1;19(8).
- [20]. Jena P, Andalib S, Khuntia S & Mishra A (2017). Spectrum of menstrual disorder and healthconsciousnessofadolescentschoolgoinggirls: Acomparative study between thee xtremes of two socioeconomic group. 4(3):235–9.
- [21]. KatsunoC,GregorioE,LomboyM,NonakaD,HernandezM&EstradaC.(2019).Qualityof publicschooltoiletsandthefrequencyofchan gingsanitarynapkinsamongstudentsinpubli csecondaryschoolsintheCityofManila,Phili ppines.TropMedHealth[Internet]. Dec 11 [cited 2019 Aug 20];47(1):1–10. Available from:https://tropmedhealth.biome dcentral.com/articles/10.1186/s41182-018-0131-8(Assessedon the 10thOctober, 2020)
- [22]. Kaur R, Kaur K & Kaur R. (2018).

 Menstrual Hygiene, Management, and
 Waste Disposal:Practices and Challenges
 Faced by Girls/Women of Developing
 Countries.

 EnvironPublicHealth[Internet].[cited2019
 Apr18]:1–
 9.Availablefrom:https://www.hindawi.co
 m/journals/jeph/2018/1730964/ (Assessed
 on the 10th October,2020)
- [23]. Krosnick, Jon A & Presser S (2016). Question and Questionnaire Design. In: Marsden, Peter V.and Wright JD, editor. Handbook of Survey Research. Second Edi. Emerald GroupPublishingLimited;. p. 263–314.
- [24]. Lawal A, Idemudia E & Balogun S (2019). Menstrual attitude dimensions,

- Anxiety and BodyEsteeminadolescentgirls.PsycholHea lMed[Internet].;8pp.Availablefrom:https://doi.org/10.1080/13548506.2019.1640885 (Assessedonthe10thOctober,2020).
- [25]. LawanUM, YusufNW, MusaAB(2017). Me nstruationandmenstrualhygieneamongstad olescentschoolgirlsinKano, NorthwesternN igeria. AfrJReprodHealth [Internet].;14(3):201–7. Availabl from:http://www.ncbi.nlm.nih.gov/pubme d/21495614(Assessedonthe10th October.2020)
- [26]. Marván L & Molina-Abolnik M (2017). Mexican Adolescents' Experience of Menarche and Attitudes Toward Menstruation: Role of Communication Between Mothers and Daughters. JPediatr Adolesc Gynecol.; 25(6):358–63.
- [27]. MiiroG,Rutakumwa R,Nakiyingi-MiiroJ,NakuyaK,MusokeS&NamakulaJ,(2 018).Menstrualhealthandschoolabsenteeis mamongadolescentgirlsinUganda(MENIS CUS):Afeasibilitystudy.BMC Women'sHealth.;18(1):1–13.
- [28]. Omidvar S & Begum K (2018). Factors in uniquencing hygienic practices during menses amonggirls from south India-A cross-sectional study. Intern Med Public Heal Int J Collab ResInternMedPublicHeal[Internet].2(12):4

 1123.Available from: http://www.iomcworld.com/ijcrimph/(Assessed onthe 10th October, 2020)
- [29]. Onyegegbu N. (2015). Improvement of Menstrual Hygiene Management among Girls in Schoolsand Communities in Nigeria: A Case for Active Contributions of Various Stakeholders.In:4th AnnualVirtual MenstrualHygieneManagement inSchools Conference.
- [30]. Onyilo G, Ominyi J, Ogunjobi B & Agberemi B. (2018).Menstrual Hygiene Management inSchoolsand Communities in Nigeria. WHO2018.
- [31]. Owonikoko K, Okunlola M, Ogunbode O, Enabor O, Oluwasola T & Arowojolu A, (2016).MenstrualHealthofIn-SchoolAdolescentsinIbadan:Knowledge,A ttitudesandConsequences.Niger Med Pract.;55(5):80–3.
- [32]. Parajuli P, Paudel N & Shrestha S (2017). Knowledge and practices regarding



International Journal Dental and Medical Sciences Research

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- menstrual hygieneamongadolescentgirlsof ruralNepal. JKathmanduMed Coll.;5(1):23–7.
- [33]. Rembeck I & Gunnarsson R. (2016) Improving pre-and post menarcheal 12year-old girls'attitudestoward menstruation.Health CareWomenInt; 25: 680.
- [34]. RocheR,BainR&CummingO(2017).Along waytogo-Estimatesofcombinedwater,sanitationandh ygienecoveragefor25sub-SaharanAfricancountries.ZeebH,editor.
- [35]. PLoSOne[Internet].Feb9[cited2017Jun13];12(2):e0171783.Availablefrom:http://dx.plos.org/10.1371/journal.pone.0171783
- [36]. Sharma, N (2019). Assessment of knowledge and practice regarding menstrual hygiene amongschoolgoingadolescentgirls ofJaipur city.JMedSci ClinRes.;7(7):2808–15.
- [37]. Suhasini K & Chandra M (2016). Factors Inşuencing Menstrual Hygiene Practice

- Among LateAdolescentGirls in an Urban Areaof Belgaum.;4(3).
- [38]. Swenson I & Havens B. (2018). Menarche and Menstruation: A review of the Literature.

 JournalofCommunityHealthNursing.4(4):1
 99–
 210.[Internet]Availablefrom:http://www.tandfonline.com/doi/abs/10.1207/s15327655jchn04043
- [39]. Tang,K,Yeung,D&Lee.A(2015).Psychoso cialcorrelatesofemotionalresponsestomena rcheamongChineseadolescent girls. JAdolescHealth; 33: 193.
- [40]. WHO (2019). Young people: health risks and solutions [Internet]. WHO Media Centre. [cited2019Apr18].Availablefrom:https://www.who.int/news-room/fact-sheets/detail/adolescents-health-risks-and-solutions