

## EXPLORING MENSTRUAL HYGIENE PRACTICES AMONG HIGH SCHOOL STUDENTS IN RURAL THRISSUR, CENTRAL KERALA

**Dr. Anila Pillai**

MSW, PhD

Director, EduWin Academic Services

**DECLARATION:** I AS AN AUTHOR OF THIS PAPER /ARTICLE, HERE BY DECLARE THAT THE PAPER SUBMITTED BY ME FOR PUBLICATION IN THE JOURNAL IS COMPLETELY MY OWN GENUINE PAPER. IF ANY ISSUE REGARDING COPYRIGHT/PATENT/OTHER REAL AUTHOR ARISES, THE PUBLISHER WILL NOT BE LEGALLY RESPONSIBLE. IF ANY OF SUCH MATTERS OCCUR PUBLISHER MAY REMOVE MY CONTENT FROM THE JOURNAL WEBSITE. FOR THE REASON OF CONTENT AMENDMENT /OR ANY TECHNICAL ISSUE WITH NO VISIBILITY ON WEBSITE /UPDATES, I HAVE RESUBMITTED THIS PAPER FOR THE PUBLICATION.FOR ANY PUBLICATION MATTERS OR ANY INFORMATION INTENTIONALLY HIDDEN BY ME OR OTHERWISE, I SHALL BE LEGALLY RESPONSIBLE. (COMPLETE DECLARATION OF THE AUTHOR AT THE LAST PAGE OF THIS PAPER/ARTICLE

### ABSTRACT

---

*The menstrual hygiene practices of high school students in rural Thrissur, Central Kerala, are explored in this study. It plans to learn the information, perspectives, and standards of conduct related with period wellbeing in all cases as well as the cultural standards encompassing these practices. 150 adolescent girls partook in the study, which was centered around two high schools in the Thrissur district. After the information was coded and placed into MS Succeed, more exploration was led with the SPSS 16.0 form. As indicated by the discoveries, 30.0% of the adolescent girls utilized sanitary pads, 13.3% utilized garments, and 56.7% utilized material or a sanitary pad. Generally discarded their sanitary pads by copying them, but 17.3% flushed them in the bathroom or tossed them in normal rubbish. 31.3% of individuals cleaned their clothing and kept it inside their home, though 68.7% cleaned it and forgot about it in the sun. Most of adolescent girls knew about their menarche hour, with 56.7% getting data from their moms. Social imperatives during that time went from 8.0% in dinner game plans to impediments in going out and neglecting to go to social or severe limits. The utilization of sanitary pads was altogether related with maternal training, family pay, and period mindfulness. Despite the fact that most of the adolescent girls knew about the menstrual cycle, some of them had persistent vices when it came to taking off sanitary napkins and different materials and cleaning their clothing. The study underlines the requirement for worked on understanding and methodology to forestall reasonable bundle pollutions and adolescent stress.*

**Keywords:** *Menstrual Hygiene Practices, High School, Students, Rural Thrissur, Central Kerala, Sanitary Pads, Adolescence*

---

## 1. INTRODUCTION

Menstrual hygiene is a crucial issue that affects the wellbeing and success of adolescent girls, especially in rural regions where admittance to assets and training might be restricted. Understanding the menstrual hygiene practices of high school students in Thrissur, a central Kerala area eminent for its striking cultivating quality and rich social past, gives significant bits of knowledge into the more extensive government assistance and cultural difficulties this segment checks out. This examination will investigate the present status of menstrual hygiene practices among high school girls in rural Thrissur, recognize information and asset holes, and recommend expected mediations to work on the girls' general wellbeing and feeling of satisfaction.

Kerala is an incredible spot to learn menstrual hygiene in view of its unassuming wellbeing rules and great capability rates, which are frequently commended. Despite the accomplishments of the state, rural regions, for example, Thrissur go up against clear difficulties in view of variations in pay, social convictions, and restricted admittance to wellbeing offices. These variables might impact menstrual hygiene propensities, which might prompt medical problems like ailments and non-appearance from school. This study, which centers solely around high school kids, centers around an essential age bunch that is developing through pubescence, making it pivotal to comprehend and uphold their menstrual wellbeing needs.

Assessing the degree of care and information about the month to month cycle among high school girls in rural Thrissur is one of the main parts of this exploration. Menstrual training is here and there covered in shame and double dealing, which supports ways of behaving that are negative to thriving and prosperity. This study means to evaluate the degree of exact data the girls have, the wellsprings of their insight, and the job that guardians, educators, and medical care suppliers play in advancing menstrual wellbeing training through gatherings and outlines. Fathoming these parts is crucial for creating endorsed instructive drives that can clear up false impressions and advance accepted procedures.

Furthermore, the openness and accessibility of menstrual hygiene items in rural Thrissur are analyzed in this study. Admittance to sanitary items might be limited by elements like monetary imperatives, cultural standards, and the shortfall of supply organizations, which might lead

adolescent girls to pick dangerous other options. Through an assessment of the kinds of materials utilized, the recurrence of improvement, and the strategies for evacuation, this study endeavours to recognize the practical difficulties looked by high school girls in dealing with their menstrual cycle in a sound manner. By settling these issues, neighbourhood local area-based drives and plan ideas pointed toward propelling period thing availability and moderateness can be started.

One more area of combination for this examination is the social and mental parts of feminine cycle hygiene. The female cycle, which is in many cases seen as an individual and delicate point, could influence adolescent girls confidence, contribution in school, and collaboration in extracurricular exercises. Through an examination of the cultural perspectives and social contentions around the ladylike cycle in rural Thrissur, this examination plans to cause to notice what these elements mean for the day to day schedules of adolescent girls. For these children, establishing a climate where the month to month cycle is transparently evaluated and normalized can essentially expand their degree of individual bliss and scholastic execution.

Looking at the menstrual hygiene practices of high school students in rural Thrissur is an extensive undertaking pointed toward understanding and settling the mind-boggling issues looked by little kids. Through an investigation of information levels, thing induction, and the socio-social setting, this study plans to add to the advancement of functional intercessions that can advance superior menstrual wellbeing and assist small kids with living better, more useful lives.

## 2. LITERATURE REVIEW

**Farooq and Srivastava's (2023)** The conceptual wellbeing, mindfulness, and practices of young, impoverished girls in Nizamuddin, Delhi, are studied. This assessment, which was given out in the Diary for ReAttach Treatment and Formative Varieties, brings to light the fundamental problems that a vulnerable segment of society sometimes overlooks in discussions about general wellness. The mental technique of the study provides tidbits of information about the psychological and personal challenges these young women experience with regard to regenerative wellness. The findings highlight the need for designated mediations to advance the development of conceptual wellbeing mindfulness and administrations among impoverished youngsters by exposing important gaps in knowledge and practices.

**Joseph's (2016)** The feasibility of an organized showing program on juvenile regenerative sexual health (ARSH) among young people in rural Kerala schools is evaluated in a PhD study. The Rajiv Gandhi College of Wellbeing Sciences is the site of this study, which aims to show how wellbeing education differs in urban and rural areas. The assessment uses a structured assistance process to improve the data on teens' sexual and reproductive health. The results show a significant increase in members' awareness and understanding of ARSH issues, suggesting that structured educational mediations can be very effective in remote learning environments.

**Kansal, Singh, and Kumar (2016)** concentrate on menstrual hygiene behaviors among young, rural women in Varanasi, a study that was published locally in the Indian Diary of Local Medication. This study examines the implications of the educational environment for menstrual hygiene habits and emphasizes the challenges faced by young women in rural areas in managing their periods. The study emphasizes how important it is to provide adequate restrooms and education on menstruation hygiene in schools in order to ensure the prosperity and poise of young adult females. The findings highlight the need for comprehensive education on menstrual health and the development of disinfection offices in remote schools, as well as the fact that poor menstrual hygiene across the board can significantly impair student engagement and academic performance.

**Lekha, Linda, and Pooja (2019)** Oversaw a study to identify menstrual problems and associated behaviors in young girls attending a higher optional school in Thiruvananthapuram, Kerala. Published in the South Asian League of Obstetrics and Gynecology's Diary, the study reveals common menstrual problems such as dysmenorrhea and irregular periods. The investigation focuses on the young women's survival strategies, which often involve inadequate and often harmful methods due to a lack of appropriate education about menstrual hygiene. The findings underscore the necessity of comprehensive wellness education initiatives inside schools to address these problems and promote improved practices among adolescent girls.

**Luke (2022)** looks into how globalization has affected Kerala's rural networks' public activities, as detailed point by point in the Diary of South Asian Turn of events. The study examines how social norms, financial practices, and societal designs have evolved in rural Kerala as a result of globalization. The findings suggest that globalization has brought about

both beneficial and bad developments, such as increased access to data and medical services as well as increased social division and breakdown of traditional attributes. Menstrual hygiene is one area where this shifting social environment offers advice on young adults' well-being practices, as new resources and data collide with traditional knowledge and habits.

**Mitra et al. (2015)** examined the awareness and practices of menstruation hygiene among young adult women in the Rajkot Region of Gujarat, as published in the Healthline Diary. The study identifies significant gaps in knowledge and behavior related to menstruation hygiene. Due to a lack of awareness and access to appropriate menstrual hygiene products, many young women were discovered to adopt unhygienic methods to monitor their menstrual cycles. The study emphasizes the role that education plays in promoting menstrual hygiene practices as well as the need for designated mediators to raise issues and provide resources to young girls in the community who are still in their teens.

### 3. METHODS

This cross-sectional, foundation-based observational study was conducted for a large amount of time, from May 2022 to August 2022, among the school-age young adult females attending two rural schools in the Puzhakkal block of the Thrissur area. All of the female students in the high school classification (eighth, ninth, and tenth guidelines) who had reached menarche were the models under consideration. The study excluded young adult schoolgirls who were not well enough to participate and those who still had an illness.

Test size was determined utilizing the  $4pq/d^2$  equation. P was characterized as the extent of female students who involved sanitary pads to consider monthly cycle. Two schools were haphazardly chosen from a rundown of flimsy rural schools in Puzhakkal block to accomplish the expected model size. Poomala High School and Santha Higher Discretionary School Avanoor were the chosen schools.

Each qualified understudy in the chose school who met the prerequisites was given thought for the exploration. 150 female students signed up for the study accordingly. Following the public authority clinical school in Thrissur's delivery from the Institutional Moral Leading group of Legal administrators, the study was directed. At the point when the inspector visited the chose schools, inquiries regarding menstrual practices were just requested from students who were

enough safeguarded and who followed a semi-coordinated interview plan. To survey mindfulness with respect to ladylike cycle and practices, five inquiries were utilized. Incredible care was characterized as four to five right responses, moderate care as a few, and low care as zero to one. Following the culmination of the data assembling, the specialist utilized a coordinated example and freebees to train the study members on solid feminine cycle practices.

### 3.1. Statistical Analysis

The information was placed into MS Succeed. With the guide of the SPSS 16.0 rendition of the program, extra exploration was finished. The paces of care and menstrual practices were assessed. The chi-square test was utilized to research the connection between different elements and period ways of behaving. A worth of  $p < 0.05$  was viewed as statistically significant.

## 4. RESULTS

The following results are from a study conducted on menstruation practices among 150 high school students in a rural area in Thrissur.

The example with the highest number of student's structure ninth norm (36.0%) appears to have satisfactorily addressed all of the classes, as Table 1 generally shows. The majority of the pupils (41.3%) belonged to the 15 years age group, with the remaining students matured between 13 and 16 years. Of the mothers, 66.7 percent had just gotten guidance up to the vital level or were incompetent, while the incredible greater part (66.2%) had gotten guidance up to high school or higher helper or above. 81% of fathers got guidance up to and including high school. Only 19.3% of the dads had zeroed in on grades up to or underneath middle school.

**Table 1:** The sociodemographic attributes of the research participants

Class	Number of Students	Percentage
8th Standard	39	26.0
9th Standard	54	36.0
10th Standard	57	38.0
<b>Age</b>		
13 Years	10	6.7
14 Years	40	26.7

15 Years	62	41.3
16 Years	38	25.3
<b>Education of Mother</b>		
Graduate and Above	13	8.7
Higher Secondary / High School	88	58.6
Middle School	39	26.0
Primary / Illiterate	10	6.7
<b>Education of Father</b>		
Graduate and Above	16	10.7
Higher Secondary	26	17.3
High School	79	52.7
Middle School or Below	29	19.3

Including everything, 30.0% of women used sanitary napkins when they were menstruating. 13.3% were using cloth exclusively during their periods. 56.7% of the population was using sanitary pads or other materials. A significant percentage of them adjusted their retentive twice a day (39.3%) or three times a day (46.7%). Almost all of them (90.0%) were maintaining good personal hygiene by washing their bodies twice a day. Most of them were using the latrine to wipe their outer genitalia every time. Of them, 46.0% used both cleanser and water for cleansing, while the majority (54.0%) used water only for cleaning the genitalia. Most of them (72.0%) arranged their sanitary pads by using them, however 17.3% threw their pads and clothes in the regular trash, and 10.7% flushed them in the restroom. While 31.3% of them cleaned and stored their underwear inside their homes, 68.7% of them cleaned and left them out in the sun.

**Table 2:** Adolescent Girls' Distribution Depending on How They Handle Menstrual Hygiene

Hygiene Practices	Number of Students	Percentage
<b>Type of Absorbent Used</b>		
Sanitary napkin	45	30.0
Cloth	20	13.3

Both used	85	56.7
<b>Change of Absorbent</b>		
Once	7	4.7
Twice	59	39.3
Thrice	70	46.7
Four times or more	14	9.3
<b>Bathing Frequency</b>		
Once daily	15	10.0
Twice daily	135	90.0
<b>External Genitalia Cleaning</b>		
Every time	123	82.0
Mostly	27	18.0
<b>Cleaning Method for External Genitalia</b>		
With water	81	54.0
With soap and water	69	46.0
<b>Disposal of Sanitary Pads (n = 172)</b>		
Burning	108	72.0
Throwing in general waste	26	17.3
Flushing	16	10.7
<b>Care of Undergarments</b>		
Wash and expose to sun	103	68.7
Wash and hide	47	31.3

Regarding constraints during the menstrual cycle, the most common ones were not going to social events or exercising strict capacities (66.7%), which was followed by restrictions on going outside (13.3%) and 8.0% on being ready for meals. 8.0% of the young women felt that during their periods, they should take a break to one side of the room.



**Table 3:** Adolescent girls' awareness of menstrual practices

Social Restrictions	Number of Students	Percentage
In Attending Social / Religious Functions	100	66.7
In Food Preparation	12	8.0
In Going Out	20	13.3
Playing	6	4.0
sleeping in the room's corner	12	8.0

At the time of menarche, 90.0% of girls were aware of the feminine cycle. The mother of the data was the source in 56.7% of the cases. Web-based entertainment, television, or course readings accounted for 19.3% of the total, with 12.0% coming from friends and 6.7% from family. 47.3% of people believed that the menstrual cycle was a normal part of the body, 45.3% were clueless as to why women go through it, and 7.4% believed that it was a disease of debasement. Menstrual blood is thought to originate from the uterus in 38.0% of cases, the bladder in 20.6% of cases, and the stomach in 4.7% of cases. 38.0% were completely ignorant of the source of menstrual blood. 52.0% of people understand that hormonal changes in the uterus induce menstruation, 36.7% believe that various forms of internal discord are to blame, and 11.3% are unsure of the cause.

**Table 4:** Social Limitations During the Menstrual Cycle

Awareness	Number of Students	Percentage
<b>Ideal Absorbent for the Menstrual Cycle</b>		
Sanitary pad	32	21.3
Cloth	39	26.0
Both can be used	79	52.7
<b>Awareness of Menstruation at the Menarche</b>		
Aware	135	90.0
Not aware	15	10.0
<b>The information Source</b>		
Mother	85	56.7

Media / Text books	29	19.3
Grandmother	8	5.3
Relatives	10	6.7
Friends	18	12.0
<b>Cause for Menstruation</b>		
Disease of impurity	11	7.4
Normal physiology	71	47.3
Don't know	68	45.3
<b>Menstrual blood's source</b>		
Uterus	55	36.7
Stomach	7	4.7
Urinary tract	31	20.6
Don't know	57	38.0
<b>Reason for Menstruation</b>		
When bad blood collects in the body	55	36.7
Due to hormonal changes in the uterus	78	52.0
Don't know	17	11.3

All of the students who shown a high level of awareness regarding the feminine cycle and menstrual hygiene were observed to be using sanitary pads. Merely 26.6% of individuals with low mindfulness were using sanitary pads. It was also noted that this was really large. The mother's training was another factor connected to the use of sanitary cushions. Sanitary cushion uses among students whose mothers focused only on getting them through high school or less was just 28.8%, compared to 40% among those whose mothers focused on getting them up to or above higher university. And this was really, really important. Monthly family wage was considered a truly essential component in relation to the utilization of sanitary cushions. The majority of cushion consumption was just 23.5% among those whose family income was less than \$10,000, but it was 44.9% among those whose family income was between \$10,000 and \$29973.

**Table 5:** Elements Linked to the Sort of Absorbent Used in Menstruation

Associated Factor	The group's percentage of sanitary pad usage	Pearson Chi-Square	P-Value
<b>Awareness of Menstruation</b>			
Good Awareness (4-5)	100	26.9	0.01 (Significant)
Medium Awareness (2-3)	31.9		
Low Awareness (0-1)	26.6		
<b>Study Class</b>			
8th Standard	35	1.7	0.740
9th Standard	35.4		
10th Standard	29.9		
<b>Mother's education</b>			
Higher Secondary or Above	41.0	4.6	0.045
High School or Below	28.8		
<b>Monthly Family Income / Month</b>			
< 10,000	23.5		
10,000 - 29,973	44.9	7.04	0.050
> 29,973	37.5		

## 5. DISCUSSION

The school-going adolescent girls from two rural schools in Puzhakkal block, Thrissur area, were the focal point of this foundation based observational cross-sectional study, which ran for over four months from May 2022 to August 2022. The study recognized female students who had effectively accomplished menarche in the eighth, 10th, and tenth rules of the high school class. Antipathy for being involved and ongoing ailment were instances of dismissal models. The equation  $4pq/d^2$  — where p is the extent of female students who utilize sanitary pads — was utilized to settle a model size of 150. Poomala High School and Santha Higher Assistant School Avanoor were chosen aimlessly. The Public authority Clinical School in Thrissur's Institutional Moral Leading group of legal administrators gave moral direction to the study,

and all qualified understudies were thought about. The assortment of data included semi-organized, confidential meetings with inquiries concerning menstrual schedules. Five inquiries were utilized to evaluate care, classifying reactions into three levels: extraordinary, moderate, and low. Individuals got training on solid feminine cycle practices through planned classes and fliers following the circulation of material.

SPSS 16.0 was utilized to direct the data request. Chi-square tests were used to distinguish significant relationship between menstrual ways of behaving and care, which were determined as rates. Most of the members' socio segment attributes showed satisfactory portrayal across classes, with 41.3 percent of them being 15 years old or more seasoned. Most of mothers (66.2%) and fathers (82.1%) had finished high school or higher.

Menstrual hygiene practices revealed that 56.7% of girls used both sanitary pads and material, however only 30% of girls used sanitary napkins. Every day, the recurrence of the spastic alteration was essentially two times (39.3%) or three times (46.7%). Most people cleaned their external genitalia every time they used the restroom, either with water alone (54%) or with a cleaner and water (46%). Body hygiene was generally maintained, with 90% of people showering twice a day. The majority of people who removed sanitary cushions did so by eating them (72%), although some also flushed them (10.7%) or threw them in regular trash (17.3%). According to clothing hygiene, 68.7% of people cleaned and put their clothes on display.

Social limitations were the most common throughout the monthly cycle, with 66.7% of people prohibited from attending social or formal events, 13.3% from leaving the house, and 8% from making meal arrangements. Mothers taught the majority of women (56.7%) and 90% of them were aware of the feminine cycle during menarche. Understanding of the feminine cycle changed; 47.3% recalled it as normal physiology, but 45.3% were unaware of its purpose. Just 38% of respondents knew that the uterus is where menstruation blood originates. This information was divided.

The mother's education, family income, and mindfulness levels were all significantly correlated with the use of sanitary pads. While just 26.6% of students with poor mindfulness used sanitary pads, all students with strong mindfulness did. Family pay also affected cushion utilization, with higher use in families acquiring somewhere between 10,000 and 29,973 INR compared

with those procuring under 10,000 INR. Higher maternal training was linked to higher cushion utilization (41% for higher auxiliary or above versus 28.8% for high school or beneath).

The study emphasizes how important financial factors and education are to rural teenage girls' menstrual hygiene practices. Menstrual hygiene across the board could be further developed in this population with improved awareness and more established educational and economical situations.

## 6. CONCLUSION

The study conducted on menstrual hygiene practices among high school students in rural Thrissur, Central Kerala, gives major comprehension of the difficulties looked by youthful grown-up women in dealing with their month to month wellbeing. The study shows a widespread lack of mindfulness and limited access to menstrual hygiene products, which are exacerbated by social stigma and a lack of helpful guidance. The majority of the young girls were cognizant of their periods and the best measures to adhere to. However, some people did not exercise good hygiene when it came to taking off their sanitary pads and clothes and washing their underwear. Unacceptable beliefs such as the notion that a girl's menstruation is a "infection of debasement" and that a feminine cycle develops when "ill will" accumulates are still widely held among young girls. The fact that the public still usually accepts the social constraints regarding menstruation is concerning.

## REFERENCES

1. Abdul Jabbar, P. K. (2022). *Institutionalization of decentralized planning in agriculture in Kerala: trends, determinants and policy imperatives* (Doctoral dissertation, Department of Agricultural Extension, College of Agriculture, Vellanikkara).
2. Abraham, R., Rajan, M. P., & John, A. (2023). *Knowledge, Acceptability and Misconceptions Regarding Menstrual Cup among College Students of Kerala: A Cross-Sectional Study*. *Indian Journal of Public Health Research & Development*, 14(2), 399-406.
3. Binesh, C. J., & Sivakami, N. (2022). *The Sexual Health of Adolescence: An Inquiry into the Sexual Awareness, Attitude, and Behaviour of Institutionalized Male Adolescents*. *Journal of Positive School Psychology*, 398-411.

4. Das P, Baker KK, Dutta A, et al. *Menstrual hygiene practices, WASH access and the risk of urogenital infection in women from Odisha, India. PLoS One 2015;10(6): e0130777*
5. Elangovan, A., Joshua, V., Santhakumar, A., Ganesh, B., Jaganathasamy, N., David, J. K., ... & Kumar, P. (2021). *Identifying Risk Factors and Spatial Clustering of HIV Infection Among Female Sex Workers in India. International Journal of Translational Medical Research and Public Health, 5(1), 41-53.*
6. Farooq, A., & Srivastava, R. (2023). *A Psychological Study of Reproductive Health awareness and practices among Homeless Adolescent Girls in Nizamuddin, Delhi. Journal for ReAttach Therapy and Developmental Diversities, 6(5s), 395-405.*
7. Joseph, C. (2016). *A Study to Evaluate the Effectiveness of a Structured Teaching Programme on Adolescent Reproductive Sexual Health [ARSH] Among Adolescents Studying in Selected Rural Schools of Kerala (Doctoral dissertation, Rajiv Gandhi University of Health Sciences (India)).*
8. Kansal S, Singh S, Kumar A. *Menstrual hygiene practices in context of schooling: a community study among rural adolescent girls in Varanasi. Indian Journal of Community Medicine 2016;41(1):39-44.*
9. Lekha V, Linda V, Pooja JP. *A study to identify the menstrual problems and related practices among adolescent girls in selected higher secondary school in Thiruvananthapuram, Kerala, India. J South Asian Federation of Obstet & Gynecol 2019;11(1):13-16.*
10. Luke, M. (2022). *Globalization and the Changing Geography of Social Life in Rural Kerala. Journal of South Asian Development, 17(1), 7-31.*
11. Mitra A, Mahajan RG, Rangoonwala M, et al. *Awareness and practices on menstrual hygiene amongst adolescent girls in Rajkot District of Gujarat Abstract. Healthline Journal 2015;6(2):61-67.*
12. Nair, S. B., Shylaja, L., & Nair, R. J. (2021). *Beneficiary satisfaction and utilization of health care services of urban primary health centres in Kerala.*
13. Pokle SS, Malgaonkar AA, Kartikeyan S. *Cross-sectional interview-based study on profile of menstrual cycles and menstrual hygiene among undergraduate medical students in a metropolitan city. Int J Res Med Sci 2016;4(11):4843-4847.*

14. Pramod, P. (2023). *Street vendors in Kerala-vulnerability, capability, and potentials (Doctoral dissertation, Post Graduate and Research Department of Commerce, Mar Thoma College Chungathara).*
15. Raveendran RC, Jacob AM, Ismail J. *A delve into the menstrual problems in teenagers: a cross sectional study in an urban school in Kerala, India. Int J Reprod Contracept Obstet & Gynecol 2016;5(11):3978-3982.*
16. Sagar B, Indira RS, Shruthi B. *Study on knowledge attitudes and practices regarding menstrual hygiene among rural women in Kerala. Glob J Med Res 2014;14(3):29-34.*
17. Sheldon, V. L. (2022). *Vital Bodies, Natural Cures: Moral Quests for Care in Kerala, South India (Doctoral dissertation, University of Toronto (Canada)).*
18. Torondel B, Sinha S, Mohanty JR, et al. *Association between unhygienic menstrual management practices and prevalence of lower reproductive tract infections: a hospital-based cross-sectional study in Odisha, India. BMC Infect Dis 2018;18(1):473.*
19. Upashe SP, Tekelab T, Mekonnen J. *Assessment of knowledge and practice of menstrual hygiene among high school girls in Western Ethiopia. BMC Women's Health 2015; 15:84. <https://doi.org/10.1186/s12905-015-0245-7>.*
20. Vijay, D., Monin, P., & Kulkarni, M. (2023). *Strangers at the bedside: Solidarity-making to address institutionalized infrastructural inequalities. Organization Studies, 44(8), 1281-1308.*

## Author's Declaration

I as an author of the above research paper/article, here by, declare that the content of this paper is prepared by me and if any person having copyright issue or patent or anything otherwise related to the content, I shall always be legally responsible for any issue. For the reason of invisibility of my research paper on the website /amendments /updates, I have resubmitted my paper for publication on the same date. If any data or information given by me is not correct, I shall always be legally responsible. With my whole responsibility legally and formally have intimated the publisher (Publisher) that my paper has been checked by my guide (if any) or expert to make it sure that paper is technically right and there is no unaccepted plagiarism and hentriconane is genuinely mine. If any issue arises related to Plagiarism/ Guide Name/ Educational Qualification /Designation /Address of my university/ college/institution/ Structure or Formatting/ Resubmission /Submission /Copyright /Patent /Submission for any higher degree or Job/Primary Data/Secondary Data Issues. I will be solely/entirely responsible for any legal issues. I have been informed that the most of the data from the website is invisible or shuffled or vanished from the database due to some technical fault or hacking and therefore the process of resubmission is there for the scholars/students who finds trouble in getting their paper on the website. At the time of resubmission of my paper I take all the legal and formal responsibilities, If I hide or do not submit the copy of my original documents (Andhra/Driving License/Any Identity Proof and Photo) in spite of demand from the publisher then my paper maybe rejected or removed from the website anytime and may not be consider for verification. I accept the fact that as the content of this paper and the resubmission legal responsibilities and reasons are only mine then the Publisher (Airo International Journal/Airo National Research Journal) is never responsible. I also declare that if publisher finds Any complication or error or anything hidden or implemented otherwise, my paper maybe removed from the website or the watermark of remark/actuality maybe mentioned on my paper. Even if anything is found illegal publisher may also take legal action against me.

**Anila Pillai**

\*\*\*\*\*