

Menstrual Health in Peril due to Taboos and Stigmas about Menstruation: A Comparative Study in this Context between Two Indian Villages

Stuti Chakraborty
Banaras Hindu University

Abstract:- Menstrual taboos are widespread and universal. Survey of literatures related to the origin and basis of the menstrual taboo reveals that in most cases the reason behind this is patriarchy. The stigmas about menstruation have more serious effects than just squirming at the mention of menstruation or light embarrassment at the drug center. The girls who start their period in the rural areas often have to give up going to school and are forced out of religious services, social interactions, prohibited to touch utensils, water, fruits, pickles. Using sanitary napkins are also difficult for women in rural areas because of the stigmas regarding buying pads from the shop and the disposal of them. The researchers find it important to work on because of the negligence about the matter. This paper attempts to make a modest study on the effect on the adolescent health due to the menstrual taboos and a comparison between the present scenario of the two villages in West Bengal and Uttar Pradesh. Though works have been done on this subject before, this paper attempts to portray a comparative study between a village named Patulia of North 24 Pargana in West Bengal and a village named Babatpur of Varanasi started in Uttar Pradesh. The objectives of the study are to find out the extent of awareness and the level of maintenance of basic menstrual hygiene in terms of family income, to examine the spread of the taboos and stigma regarding menstruation and its impact on the mental and physical health of the adolescent girls in the aforementioned two villages from comparative point of view. The study composes of qualitative and quantitative materials consisting of comparative data collected from two villages. The study is based on data from both primary and secondary sources. The findings were such that both geographical areas try to combat the negative notions of menstrual taboos, in some cases the problems are lesser among the adolescent girls in Banbatpur of Varanasi and while in some cases the problems are lesser in Patulia of North 24 Parganas. Adolescents from both North 24 Pargana and Varanasi are acquainted with the menstrual hygiene but often reluctant about maintaining the same. The proportion of the number of girls believing in the taboos or being forced to follow the stigmas and being bounded by the restrictions are more or less same in both areas and the effect on mental and physical health are almost same both in Varanasi and Kolkata.

I. INTRODUCTION

Menstruation, commonly called as periods, is the natural process of shedding the lining of a woman or adolescent girls' uterus. During menstruation, blood flows from the uterus and passes out of the body through vagina. Girls begin to menstruate usually between the ages of 9 to 14 and stops when a woman is at her late 40s or 50s, which is called menopause. The menstrual cycle provides important body chemicals called hormones, to keep women and girls healthy. Globally 52% of women and girls are of reproductive age around 1.9 billion people (according to the data of WHO). Yet, there is massive taboo and stigma around the topic of menstruation.

Strong stigmas around periods may be affecting everything from the women's and adolescents' physical health to young girls' psychological illness. As the subject of menstruation is most of the time kept silent in the family and even in school mainly in rural areas, often the young girls cannot talk about their discomforts or problems regarding menstruation. In many cases these girls are bullied in the roads, in friend's circle and in school mostly by the boys when they are on their period. Lack of proper sanitation, sufficient water, proper toilets in schools force the menstruating girls to miss school during periods. The stigma and taboo around it causes multi linear problems regarding both physiological and psychological health to them.

According to Jane Ussher, Professor of women's health psychology at Western Sydney University, there is a long history of menstrual taboos across nearly all cultures, and these continue to manifest in subtle and complex ways. According to many these menstrual stigmas are a form of misogyny. . The origin of menstrual taboo is still debated. Freud said it was our fear of blood. Allan Court argued the taboo began in part, because early humans found menstrual blood to have a depressive effect on organic materials. Anthropologist Shirley Lindenbaum theorized in 1972 that taboo was a form of natural population control, limiting sexual contact with "pollution" stigma. The negative taboos regarding menstruation lead us to understand menstrual function as something to be hidden, something shameful. Given that menstruation is still overwhelmingly considered secret women's business, young girls are taught from a young age they have to manage it privately and discretely.

Consequently the menstrual taboos can lead to significant challenges in menstrual management, adverse reproductive health outcomes, social ostracization, disease, and even death. Common misconceptions related to menstruation according to WASH survey:

1. Do not use sanitary pads, use cloths
2. Do not eat rice during menstruation.
3. Do not take pain killers; they might have long term effects on the body.
4. Do not eat fruits; they might cause cold and result in stopping the blood flow.

The changes that accompany the onset of puberty both psychological and physical are significant for any young girl making the transition into womanhood. However if these changes are accompanied by social stigma, poor menstrual hygiene and inadequate self-care are major determinants of morbidity and other complications among this age group, the effects can be significantly detrimental to their young impressionable minds as well as their overall health. Some of these problems include urinary tract infections, scabies in the vaginal area, abnormal abdominal pain, absence from school, and complications during pregnancy.

In many areas of developing countries, a culture of silence surrounds the topic of menstruation and related issues. As a result, many young girls lack appropriate information on menstrual hygiene. Alarmingly, the stigmas and taboos surrounding menstruation regularly and adversely affect most women, especially young girls. About 9 in every 10 girls missed a day or two of school every month during menstruation, mainly due to physical discomfort as well as their fear of staining clothes. Almost 6 girls in 10 reported high restrictions related to religious activities and a majority of them feel embarrassed because of these. According to studies done by the Geneva-based Water Supply & Sanitation Collaborative when the young girls start menstruating, most of them miss five days of school during each monthly menstrual period because of the lack of proper toilets. Menstrual shame among the young school going girls often lean to body shaming. Shame about menstruation might even extend to and influence a woman's feelings about her body. Such kind of menstrual shame might relate to self-esteem, dieting choices, and general well-being. Strong stigmas around periods may affect everything from gender inequality and economic disparity to the prevalence of serious diseases like cervical cancer. Fredrickson and Roberts (1997) discussed women's body shame is a part of the complex of self-objectification that can lead to increased body monitoring, disordered eating, unipolar depression, sexual dysfunction and a general reduced response to internal body states. Attitudes towards menstruation are often adopted just as young women are first learning about and exploring their sexuality, it is important to promote healthy attitudes towards menstruation instead of shame.

Paying attention to the adolescent girls of school going age, UNESCO estimates that one in 10 African girls, for example, miss at least one day of school a month, leading to a higher drop-out rate. A survey in India found nearly 25% of girls drop out of school permanently when they reach puberty, because they have no toilet at school or any sanitation facility to use during menstruation. Apart from this, religious stigma is very vivid across almost all culture where the menstrual blood and a menstruating woman is always considered as impure. Kena Holkar observed that a large majority of women consider their bodies as impure/unclean during the time of menstruation. They are prohibited from entering into temples, mosques, and gurudwaras and they are not supposed to touch any holy book. They cannot touch utensils or even pickles. Swapna Mazumdar, in her writing in The Tribune, opined that the silence and shame around the menstrual cycle have caused severe problems for girls. In a survey conducted in 2011, it was revealed that in north India, over 30% of the girls interviewed dropped out of school after they start menstruating. Reproductive Tract infections (RTI) were common to more than 70 per cent women who were unable to maintain hygiene during their menstrual cycle. This kind of cultural neglect of menstrual hygiene is reflected in policies as well because a larger number of adolescent girls (between 12-18 years of age) miss five days of school due to lack of toilets for girls. Since menstruation is looked upon as a taboo subject in most Indian societies, it is rarely spoken about. And because of this, and the lack of proper sanitation facilities, health and hygiene take a back seat. According to studies done by the Geneva-based Water Supply & Sanitation Collaborative Council (WSSCC), in India at least 23 percent of girls leave school once they start menstruating, or miss five days of school during each monthly menstrual period because of the lack of proper toilets. According to another survey done by AC Nielsen and Plan India, out of a total of 355 million women who are in the menstruating age, only 12 percent use sanitary napkins. Around 88 percent of women, especially from the rural areas of the country, still use rags, leaves, or even sand and ash during their periods, as they do not have access to affordable sanitary napkins, and because of the stigma attached to buying them. In some instances, women and girls are not allowed to take bath for the first two days of their menstrual cycle.

Sinu Joseph, creator of Mythri, in an innovative animated video to spread awareness on menstrual hygiene for adolescent girls said that, pretending it (menstruation) never happened, won't make it go away. When we don't talk about it, we miss the signs that need attention. What is perfectly normal becomes a big deal and women quietly acquire low self-esteem for what is natural. Taboo around menstruation is started to be seen as a threat to health and many people are willing to break this silence. Menstrupedia, launched in 2012, is an online portal that focuses on busting menstrual myths and providing correct information. Co-founder of the portal, Aditi Gupta, has created comic books based on her own

experience of facing stigma while growing up, to guide girls about growing up and menstruation.

In India, recently, there has been an increasing recognition of the importance of menstrual hygiene. Ministries recognize that MHM can improve young women's health, nutritional status and well-beings as well as their school enrolment and retention, potentially conferring long term health, social and economic benefits. Menstrual hygiene day is an annual awareness day on May 28 to highlight the importance of menstrual hygiene management. It was initiated by the German based NGO WASH united in 2014 to break the taboos surrounding menstruation and aims to raise awareness of the importance of good menstrual hygiene management worldwide and benefit women and girls worldwide.

II. OBJECTIVES

In this backdrop, the present paper modestly attempts to make a comparative study between two villages in two States of our country in respect of

- The extent of awareness and the level of maintenance of basic menstrual hygiene in terms of the family income;
- The spread of the taboos and stigma followed by the young girls regarding menstruation in terms of religion; and
- The impact of the stigma around menstruation on the mental and physical health of the adolescent girls.

III. DATA AND METHODOLOGY

This research paper tends to study the different taboos that young girls follow during their menstruation and their impact on the menstrual health and hygiene of the young school going girls. It is a comparative study between two villages Patulia in the district of North 24 Parganas in West Bengal and Babatpur in Varanasi district of Uttar Pradesh. The total population of West Bengal according to 2011 census is 9.03 Crores and total population of the Patulia village (census, 2011) is 16, 979 of which 8,352 were females (49%). There are total 3 girls' high schools in Patulia of which 2 schools were chosen randomly for doing the survey. 15 adolescent girls of the age group between 13-22 years were chosen from class 8,9 and 10 from each school by the method of purposive sampling. On the other hand, the total population of Uttar Pradesh according to 2011 census is 20.42 Crores, total population of the village is 2,293 (based on census, 2011) of which 1,084 were females (47%). There are 2 girls' high schools in total in Babatpur village which were chosen for the survey. 15 adolescent girls of the age group between 13-22 years were chosen at random from classes 8, 9 and 10 from each school again by the method of purposive sampling. The sample frame of the study was the female students who are of menstrual age of class 8, 9, 10 of the four schools 2 each from Patulia and Babatpur respectively. Thus in this study the sample size is 60, equally divided into 30 from the village of west Bengal and the rest of 60 that is 30 from the village of

Varanasi. The sample size is chosen based on the level of significance and power of test.

Keeping in view the objectives of the study, the following testable hypotheses are set:

A. Hypotheses set to fulfill the first objective:

- There is a relation between place and the use of sanitary pads by adolescent girls.
- There is a relation between income of parents and the use of sanitary pads by adolescent girls.
- There is a relation between place and the frequency of going for gynecological checkups and understanding the importance of it.
- There is a relation between income group of parents and the frequency of going for gynecological checkups and understanding the importance.
- There is a relation between place and attending workshops and awareness campaigns on menstrual hygiene.

B. Hypotheses set to fulfil the second objective:

- There is a relation between place and the discomfort of people to discuss about menstruation
- There is a relation between religion and the discomfort of people to talk about menstruation.
- There is a relation between place and the taboos, stigmas followed by the adolescent girls regarding menstruation.
- There is a relation between religion and the taboos, stigma etc followed by the young girls regarding menstruation.

C. Hypothesis set to fulfil the third objective:

- There is a relation between the different stigmas regarding menstruation and the effect on the mental and physical health of the girls.

This study is a comparative one in terms of the effects of taboos and stigmas on menstrual health of adolescent school going girls. A descriptive study is used to describe the characteristics of population being studied. In this work the relation between different factors causing taboos and stigmas regarding menstruation and their impact on menstrual health are taken into consideration and, therefore, this work may be considered as a descriptive one.

Beside this the study has been done with the help of the survey of literature and content analysis from various papers, newspaper articles, data of ongoing programs of governmental and non-governmental organization of menstrual health and hygiene. This study is based on the qualitative data. The above stated hypotheses are tested using Pearson's Chi-square test of these qualitative data. With the help of Statistical Package for the Social Sciences (SPSS) 20, 21 TRIAL VERSION IBM SPSS the chi-square tests have been calculated. For the chi-square test cross tables have been made and the data has also been represented through bar graphs.

IV. ANALYSIS OF DATA

The analysis of the data that has been taken from the 60 samples collected from the two villages namely Patulia and Babatpur from West Bengal and Uttar Pradesh respectively reveals some inferences. In this study mainly the focus was on observing the relation between place, income, religion and other variables concerning taboos and stigmas that affects menstrual hygiene of the young adolescent girls. The findings are as follows:

- There is no relation between the place and the knowledge about menstruation. The scenario of the knowledge about menstruation among the young girls are same in both the villages. Most of the girls come to know about it when or after it occurs, very few of them have idea about the process previously before it takes place in life. From literature survey it is known that On Yatra , a menstruation tent was set up in the places visited for campaigning. After interviewing young girls who were convinced we come to know that many women were dying of cancer when they started bleeding.
- While studying the relation between the variable, place and the person from whom they get the knowledge of menstruation, it shows that there is relation between the two. It varies according to the difference in place. The information has been gathered that from a survey it had been inferred that 73% of the mothers or female relatives had told the young girls nothing about it before it occurred.
- In course of searching for the relation between place, income group of parents and the use of sanitary pads, it is found that there is a relation between the places or geographical areas and the use of sanitary pads. On the other hand while searching the relation between income group of parents and its effect on the use of sanitary pads, it is reported that there is no relation between different income groups of the parents and the stigma on using sanitary pads. According to a survey done by AC Nielsen and Plan India, out of a total of 355 million women who are in the menstruating age, only 12 percent use sanitary napkins. Around 88 percent of women, especially from the rural areas of the country, still use rags, leaves, or even sand and ash during their periods, as they do not have access to affordable sanitary napkins, and because of the stigma attached to buying them. In some instances, women and girls are not allowed to take bath for the first two days of their menstrual cycle.
- While studying about the stigma of using clothes, the focus was on how the clothes is used during menstruation and its relation with religion and place. The study shows on the one hand there is no relation between the difference in geographical place and the different use of the clothes , on the other hand there is positive relation between religion and the stigma of using clothes in different ways. The hygiene-cancer link backed up by a 2003 study, found that reusing cloths was associated with a 2.5 times greater risk of serious cervical problems compared to clean clothes or menstrual pads. Study also says that poor menstrual

hygiene, caused by practices like reusing old cloths or using sand, leaves or sawdust to absorb menstrual blood, seems to be linked to India's dramatically elevated rate of cervical cancer.

- Study on the relation between place and the place of dumping clothes or used pads shows that there is association between the different areas and their tendency to dump the napkins. Most people said that they dump their used clothes or pads in the land field, lesser number of people said they dump it in their backyard of the house and rest said they dump it in the dustbin because doing otherwise is not hygienic. Taking the guidance of a study it has been known that nearly 60% of women simply dispose of their used pads and cloths into open field. India needs to confront the sanitary pad waste footprint and begin working to combat it.
- While searching for the frequency of the number of the young girls going for gynecological checkups with the variables of religion and place. The study showed that there is no relation between belonging to different place, following different religion with the frequency of going for menstrual checkups. While some have said that “ going to doctors for menstrual pain or infection is useless, and we won't even get permission for going to doctors for such silly reasons” others have simply said that they don't feel it's necessary to go for checkup or taking medicine for menstruation will harm their good health; their elders have told them so. Only few have mentioned the reason why they had to go for checkups. Regarding attending menstrual workshops and workshops held in school on menstrual hygiene and awareness no such initiative has been taken by governments and NGOs.
- Discomfort of girls to talk about menstruation and other people feeling uncomfortable while discussing about menstruation is also a consequence of the stigma and taboo regarding menstruation. These have been studied in two different villages. In both cases it seems that there is a relation between places and the discomfort of young girls and other people to talk about menstruation. The amount of discomfort varies in two different areas. Rose George says, findings from the 90,000 responses Clue received: 95% of Algerians feel comfortable talking to female family members about periods; 86% of Russian women and girls would hate to talk to a male classmate about them. Some 93% of Pakistanis wouldn't talk to a male family member about it. The result is same in case of drawing relation between religion and the discomfort of people to talk about menstruation. The result shows that there is relation between the two variables.
- While interviewing the young girls about specific rituals or rules they follow during menstruation, they came up with many. Like not taking bath during menstruation, not touching pickle, not going to temple or touch any sacred things, not eating rice or fruits and many. The fact that the taboos regarding menstruation has no such relation with the place according to the result. But the different religion affects the taboos and the stigmas hugely. It has been

discovered from the result that there is relation between religion and stigmas regarding menstruation. From reviewing literature it has been seen that a large majority of women consider their bodies as impure/unclean during the time of menstruation. They are prohibited from going to temples, mosques, and gurudwaras and they are not supposed to touch any holy book. They cannot touch utensils or even pickles. In Iran, menstruation is not just a taboo, 48 percent of girls in Iran think that it's a disease.

- From this study it is found that there is no relation between the two different geographical areas and the frequency of girls missing classes, no cases of school drop outs have been noticed. But after interviewing the girls, the researchers have come to know that in many cases the girls grow negative perception about the process of menstruation as they are often told by the elders that periods is a bad thing. Some girls have also confessed that they feel dirty during this time of month and are shy to go out because they think they might stink and others can make fun of them if they stain their clothes. When they were asked if they eat fruits, milk etc. during periods, many girls answered that they are not allowed to eat half of the nutritional food that body needs the most during this time because of different stigma. Due to lack of proper sanitation facility in school, also in home, girls often go through mild infection after their periods end. In India, say Natasha Khan and Ketaki Gokhale for Bloomberg Business week, girls who start their periods often have to give up going to school, a source of huge economic inequality down the line. In Nepal and West Bengal, says WaterAid, women who are menstruating are forced out of religious services, school and even social interactions. UNESCO estimates that one in 10 African girls, for example, miss at least one day of school a month, leading to a higher drop-out rate. A survey in India revealed that nearly 25% of girls drop out of school permanently when they reach puberty, because they have no toilet at school.
- In case of the variable- place, there is no such relation between the feeling of contamination and the place. But while the relation was drawn based on the variable-religion, there seems to be a relation between the feeling of contamination and the different religion.
- While drawing relation between the different places and the knowledge about the governmental facilities and policies of the government, it has been seen that there is no such relation between the place and the knowledge about the facilities given by the government and its policy on menstrual health and hygiene. The scenario of both villages are same when it comes to the knowledge. Though from research done on the facilities given by the government, it has been found that there is a Menstrual hygiene day on May 28 every year. The government is now focusing on periods more than ever before. Last December, 2015 India became one of the few governments. In the world to issue menstrual hygiene management guidelines. In June 2011 the Government of India launched a new scheme to make sanitary Pads

available in selected rural areas at a subsidized cost of Rs 6 per pack of six sanitary pads by accredited social health activities(ASHAS) who are village based frontline health workers.

V. CONCLUSION

This study mainly focuses on the scientific explanation of the biological process known as menstruation that every woman of fertile age go through in a monthly order. There are age old stigmas and taboos regarding menstruation in almost every part of the world, in every culture, religion, geographical areas. There are many reasons behind these taboos and stigmas including the socio-economic conditions of the society, the social and cultural background of the people, their religious beliefs and rituals those are patriarchy ridden. Many specialists and theorists gave many reasons behind the stigmas regarding menstruation. The stigmas include, not touching sacred things, not going to religious places, not drinking water, touching rice, fruits, pickles, not taking bath during menstruation. These cause malnutrition among the young girls. The stigmas around this often forbid them to go to medicine shops and ask for napkins to use them, often the pricy sanitary pads is not affordable for the low income group of people. So they often use rags, cloths, newspapers as substitutes. The shame and silence regarding menstruation often forbid them to wash the clothes and to dry them under the sun. They often hide it which is unhygienic and use them again and again. The unhygienic practices due to stigmas surrounding menstruation can cause Urinary Tract Infection (UTII) or cervical cancer. Often women and even young girls are made to live in menstrual huts during their periods, the menstrual huts being filthy, unhygienic and in rural areas often they are raped because they stay in the abandoned places. This study made an attempt to observe the scenario of the two villages named Patulia and Babatpur in West Bengal and Uttar Pradesh respectively and to compare their situation regarding how the different places, religion and income groups of the parents of adolescent girls affect the menstrual health and hygiene of the girls and whether they are combating the stigmas or are still forced to follow the rules and rituals etc.

As a solution of the problems discussed above due to the stigmas and taboos regarding menstruation a few measures like doing menstrual workshops, awareness campaign and so on may be taken. Vending machines can be installed in schools and colleges, along with disposal incinerators, but only where power outages are not an issue and resources are adequate to allow for these items to be accessible to all.

The Ministry of Health and Family Welfare has been implementing this scheme for promotion of menstrual hygiene among adolescent girls in the age group of 10-19 years primarily in rural areas as part of the Rashtriya Kishor Swasthya Karyakram. The scheme has the following objectives:

- To increase awareness on menstrual hygiene among adolescent girls
- To increase access to and use of good quality sanitary napkins among adolescent girls residing primarily in rural areas
- To ensure safe disposal of sanitary napkins in an environmentally friendly manner.
- WaterAid India recognises that menstrual hygiene is fundamental to the dignity and well-being of women and girls and an important part of the basic hygiene, sanitation and reproductive health services to which every woman and girl has a right. They make efforts towards embedding measures within the system to promote menstrual hygiene, and give women and girls the confidence and space to voice their need for improved menstrual hygiene. Our work focusses on integrating menstrual hygiene management into programmes and policies across key sectors including WASH (water, sanitation and hygiene), health, women and girls development, education and rights, from community to the national levels. Their work includes:
 - ACCESS to information to understand the menstrual cycle and how to manage menstruation hygienically;
 - Promote better awareness amongst men and boys (father, husband, teachers, brothers and peers) to overcome the embarrassment, cultural practices and taboos around menstruation that impact negatively on women and girls' lives;
 - Adaptation of existing water, sanitation and hygiene services, to ensure their appropriateness to include water for washing clothes used to absorb menstrual blood and having a place to dry them and having a private space to change;
 - Access to hygienic clothes or disposable sanitary pads;
 - Facilities to hygienically dispose off used clothes and pads; and
 - Training and sensitising key stakeholders (district-level health and frontline workers) to embed MHM within their programmes.
 - WASH United has developed a menstrual hygiene management curriculum to educate about taboos, hygiene and reproductive health. Using our approach of fun, games and positive communication, the curriculum is designed for the training of teachers/trainers as well as of adolescent girls and boys.

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