

The Challenges of Adolescent Girls Sexual Maturation to Educational Parity in Northern Ghana.

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Abstract

This paper examines the links between sexual maturation and menstrual management and dropout and attendance among adolescent girls in Ghana using the four northern regions as a case study. It focus was to examine specifically public management of school girl's sexual maturation and menstrual hygiene practices and how these affect school dropout and attendance. A multi-site survey was conducted using Purposive, simple random, accidental sampling technique to select the respondents and via that questionnaire and interview guide were used for the data. Northern Ghana was defined to coincide with the four northernmost regions comprising Northern, Brong Ahafo, and Upper East Regions of Ghana. The study revealed that while many factors contribute to girls dropping out of school, the incidence of the drop out is high around the age of puberty suggesting that, there is a connection between girls' dropout rate and the management of the complexities of puberty and maturation. Although not all beliefs are reflected in practices, in many places cultural and religious beliefs prevent girls from participating in worship, sex, domestic chores, dropout, attendance and many social activities, most of these restrictions reflect the mistaken belief that menstruation is unclean and therefore a menstruating girl should limit her contact with others. Given that menstruation can cause inconvenience and pain, and limit women activities, it is not surprising that many girls see menstruation as discomfort and not a sickness, and does prevent some of them from attending school during this period and this widens the gap in education achievement. The onset of menstruation during puberty evokes general negative reaction perhaps because many girls are not prepared ahead for it on time, though majority are aware that it is a normal part of growing up and that it is preceded by other changes in their bodies. Many manage the flow but the items used are more often than unhygienic, this is as a result of poverty. Education, institution of meaningful programs, provision of adequate sanitary facilities, might be enough to change the attitude of girls about sexual maturation menstrual management practices since here is no policy that debar menstruated girls from attending school or being asked to be withdrawn from school.

Key Descriptors: Menstruation, maturation, education, gender parity, adolescent. Capability.

Background of the Study

Since independence, successive governments in Ghana have pursued educational policies aimed at universal basic education for all citizens. These policies have moderately increased enrolment and educational participation. The quality of information pupils gain equip them with knowledge and tools with which they plan their future even as they protect themselves from debilitating and fatal condition such as early marriages and unwanted infection including HIV/AIDS. Adolescence is such a relatively short and transitional stage, which a child develops into and takes on roles of an adult. It is necessary to continually study and discuss current group of young people in mundane life experience and their emerging problem relating to puberty, maturation and education. For many reasons, female adolescents are more vulnerable than any other and are biologically more susceptible to STIs such as Chlamydia and gonorrhoea that could facilitate the transmission of HIV (Khan 2002).

Adolescence designated by World Health Organization (WHO) as age –range of 10-19 is a venerable period when young adults are exposed to new experiences relating to sexuality and reproduction. According Khan (2002) female adolescents are more vulnerable than any others and are biologically more susceptible to STIs that could facilitate the transmission of HIV.

According to USAID (2006) sexual maturation is related to issues like school attendance and performance of girls in basic schools. The author noted that the problems faced by adolescent girls in basic schools include ignorance of sexual maturation and menstrual practices, inadequate guidance and counseling services among girls, poor sanitation facilities and low concentration in class. The need of adolescents is unique and pressing and should at all cost be met. They cannot be met in isolation but rather need to be considered and address in the center of family care, the resources of school and the community, in addition health providers should be sensitized to be generally and sympathetic to the youth especially and girl child.

Apart from the Government, international organizations and non-governmental organization that have made their priority to ensure access to and improve the quality of education for girls and to remove every obstacle that hampers their active participation. These efforts have moderately increased enrolment particularly at the basic level. However the issues of equity, retention and participation have remained unsolved. The alarming aspect of the disparity is that the gender gap widens from primary to junior high and this can be attributed to the girls' inability to manage their sexual maturation as well as menstrual practices which prevent most of these girls from participation actively in education. The situation is made even worsen since there is insufficient information on policies relating to maturation and education which are expected to come from various sources – homes, schools, social clubs and the media (Khan 2002).

In addition to poverty, which affects girls more than boys in terms of the affordability to manage menstruation, there are others like social, cultural and economic reasons that prevent girls from getting to school or causing them to be pushed out from school and this is affront to the Human Capability Theory by Sen. (2007) which made emphasis on capability of individual and that none of the social and economic problems should affect girls more than the boys because they all have equal capabilities. Sexual maturation and menstruation issues have not received attention in the past, despite the fact that gender disparity in attendance and performance have been shown to start at adolescent. In the past the advocacy for girls' education has been focused mainly on school environment.

CARE (2005) explained that one major constraint to girl-child education was at the onset of menstruation, reasons like abdominal pains, fear of soiling themselves, change in mood and lack of toilet and water facilities at the school environment add to prevent girls from attending school in most rural areas of Ghana. Puberty and adolescence can be challenging time for many girls. In many societies menarche is an indication of a girl developing sexuality. UNICEF (2001) noted that in Western societies it is argued that menarche convey conflicting societal messages, it represents the beginning of womanhood sexuality, but girls of this age are seen as too young to be sexually active. In many societies, the family and immediate community traditionally provided young people with information and guidance about sex and sexuality

Menstruation is a natural event throughout much of women's life, yet it is often a topic which is seldom and openly discussed. Many women lack sufficient or accurate knowledge about it. They often have misunderstanding and mistaken beliefs passed on by family and communities and this affects their attendance and participation in school activities. Many girls do not understand the purposed of menstruation and what happens in their bodies during menstruation.

WHO 1986 cited in World Bank report (2004) noted that the adolescents' knowledge of fertility and menstruation are very poor in many countries of which Ghana is not exception. For example, in Dakar – Senegal two third of adolescents girls and boys ages 15 – 19 could not identify the mid-point in the menstrual cycle and as the time when a woman is likely to get pregnant. (World Population Report (2005). In Ile – Nigeria, some 40% of school girls surveyed did not know the cause and meaning of menstruation. The report further indicated that among school girls ages 12-17 in Tamil Nadu-India more than half of girls who used old cloth, napkin or only their undergarments as a menstrual product washed them only once or twice a day rather than four or five times a day as is best, much of what these girls had learn concerned restricting to their mobility and behavior during menstruation and superstitious about their being 'polluting' the environment. Is this study applicable in the northern part of Ghana?

Considering the population of women in the world about 51% according to (World Population Report (2005) and the contribution they make toward nation building, and the role they play in bringing up children, it is estimated that two-thirds of their working hours is used to raise almost all of the children of the world hence their education lead directly to better family health, economic growth and lower rate of child mortality and malnutrition. Girls have the right to be in school as well as boys however, retention, attendance and performance of girls in basic schools are low and one reason among many reasons is that there are problems girls face in relation to their sexual maturation and the proper management of their menstruation. The paper examined the relationship between school attendance of girls' dropout and the sexual maturation and management of menstruation and also the effects of socio cultural practices related to menstrual management of the girl child, the various ways by which the existing practices can be adopted /adapted or replaced, the psychological effects of sexual maturation on the girl child, the level of knowledge of the girl child on reproductive health issues and the contribution of stakeholders on educating the girl child in sexual maturation and management of menstrual practices.

In recent years girls reach the first menarche at an early age than they use to (Burrows and Johnson (2005) cited in UNICEF (2001), the social structure of the earlier ages took upon themselves to educate girls as what to do and of date, girls are left to their own fate. Lack of adequate information for these girls especially those of the rural areas lead these girls to frustration and then finding their own solution which is not the best. Hence most of these girls dropping out of school and some record low attendance. Adolescence designated by World Health

Organization (WHO) as age –range of 10-19 is a venerable period when young adults are exposed to new experiences relating to sexuality and reproduction. According Khan (2002) female adolescents are more vulnerable than any others and are biologically more susceptible to STIs that could facilitate the transmission of HIV.

Theoretical Framework

The study employed the Capability and Social Justice in education theory to explain access and disparity in basic education in the Northern Region of Ghana. The theory envisages that when both girls and boys are treated equally at home and at school, and given equal opportunities in policy implementation in basic education, girls are capable of closing the disparity gap which has existed in Africa for decades. Sen (2007, p.2) defines capability as “a person’s ability to do valuable acts or reach valuable states of being; it represents the alternative combinations of things a person is able to do or be” Thus, capabilities are opportunities or freedoms to achieve what an individual reflectively considers valuable. The significance of this idea rests on its contrast with other ideas concerning how we decide what is just or fair in the distribution of resources irrespective of gender. For example, some ideas about distribution rest on what an outsider determines is the best to create maximum opportunities or achieve appropriate outcomes for say, different kinds of schools or pupils.

The problem is often phrased in terms of what forms of curriculum, teaching, school management of the problems both boys and girls face, household behavior and learning resources will yield the educational achievements of both girls and boys such as enrollment and attendance or skill sets that an economy needs. Sometimes the question is posed in terms of how learners can acquire appropriate knowledge to act as full members of a particular group to which they are deemed to belong. In both instances, the emphasis is on what kinds of inputs (ideas, teachers, learning materials) will shape particular opportunities to achieve desired outcome (economic growth or social solidarity and equity). Ideas influenced by utilitarianism pose this in terms of outcomes deemed the best result for the largest number, for example, the number of people who will benefit nationally and internationally from growth in an economy or the number of people who will draw together through practices of religious or cultural belonging.

The capability approach critiques this way of posing and solving questions of evaluation. Its central tenet is that in evaluation, one must look at each person not as a means to economic growth or social stability but as an end. We must evaluate freedoms for people to be able to make decisions they value and work to remove obstacles to those freedoms, that is, expand people’s capabilities. While the capability approach regards each human being as an end, it is not an individualistic theory concerned with libertarian notions of self-actualization above all other goals; rather, it embraces “ethical individualism a normative approach that stresses that action should be judged by their effects on individual human beings and that individuals are the primary objects of moral concern (Sen 2007, P.108). An evaluation is thus not simply a response to what particular individuals want or say they want, designing policy only to respond to what people want could mean that a government might use up nearly all the education budget for a country to provide resources for the small number of children of vocal parents who want schooling only in lavish buildings with one-to-one tuition leaving very meager resources for the majority of children whose parents want the best education that they cannot afford. Evaluating capabilities rather than resources or outcomes shifts the axis of analysis to establishing and evaluating the conditions that enable individuals to take decisions based on what they have reason to value. These conditions will vary in different contexts, but the approach sets out to be sensitive to human diversity, complex social relations, a sense of reciprocity between people, appreciation that people can reflect reasonably on what they value for themselves and others and a concern to equalize not opportunities or outcomes but rather capabilities.

The capability approach thus offers a broad theory to conceptualize and evaluate individual well-being and social arrangements in any particular context or society. It is not a complete theory of justice, but it does deal with questions of the balance between freedoms and equality that have characterized work on social justice since the late eighteenth century. Sen (2007, p.4) asks the core question, “Equality of what?” As he explains, all egalitarian theories that have stood the test of time pose the issue of equality of something, for example of income, welfare levels, rights, or liberties. In education this question emerges in sociological work on how to theorize and analyze the provision of equivalent learning opportunities for both girls and boys. There is nothing to show that men have capabilities more than women, but why the disparity in educational opportunities and attainments? The choice of the space in which to assess equality determines what equality we prioritize. We could prioritize equalizing education in every country and thus place equality in education in the space of evaluation (Sen 2007, p.5).

Sen argues that what we should equalize is not resources, for example, a strict ratio of teachers (both male and female) to pupils, or a certain amount of expenditure per capita on each pupil, (both boys and girls) and not outcomes, for example, that every child leaves school with a particular qualification. The author writes that what should be equalized are human capabilities, that is, what people are able to be and to do which the author thinks both men and women have equal capabilities and treatment in education and in all sectors of the economy no matter individual physiological make up

Crucial to this, is the process for people to come to decisions about what they have reason to value in education, or any other aspect of social action. Thus the expansion of human capability involves “the freedoms people actually enjoy choosing the lives that they have reason to value” (Sen 2007, p.108). People should be able to make choices that matter to them for a valuable life. The notion of capability is essentially one of freedom, the range of options a person has in deciding what kind of life to lead, therefore, women should not be left behind as second class citizens in any country (Sen 2007, p.110). Capabilities might then also be explained as actions one values doing or approaches to living one’s values.

Methodology and the Study Area

The study employed a cross sectional design though often associated with quantitative study there was a triangulation of both qualitative and quantitative methods. Mugenda and Mugenda (1999) noted that a qualitative research is advantageous in that it permits the researcher to go beyond the statistical results usually reported in quantitative research. Babbie (1988) explained that it is advantageous to combine both qualitative and quantitative research especially when some of the objectives are assessed using qualitative methods and some using quantitative methods. Purposive sampling was used for the identification of the target population and getting relevant information regarding sexual maturation and menstrual management practices in the selected areas.

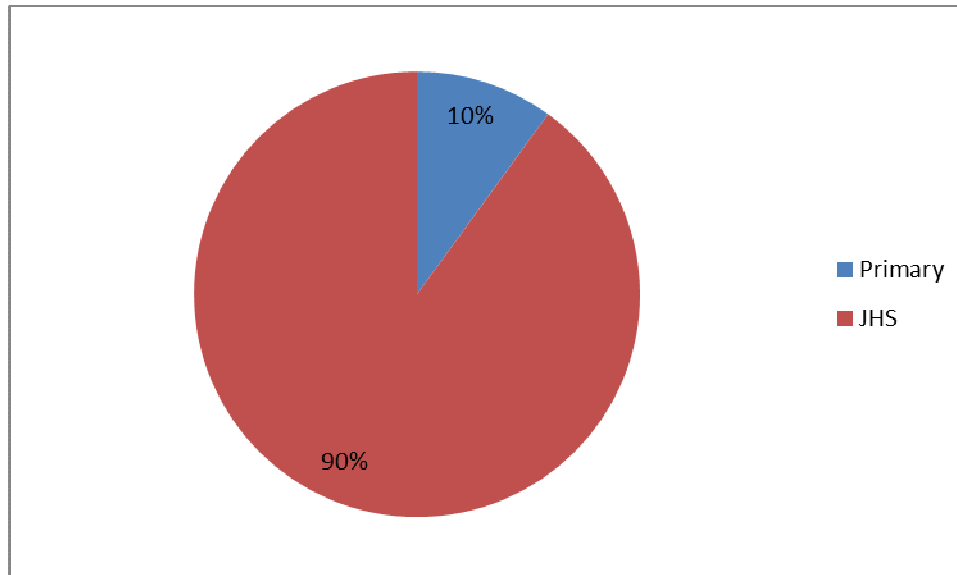
Multi stage sampling technique was used to select the respondents and a sample size of 100 from the selected areas (Northern, Brong Ahafo and Upper East regions). Three communities were selected in each of the regions- one rural, one peri-urban and one urban, making a total of nine communities with total respondents of three hundred in all. The Target population included girls in the primary six and Junior high school girl some few boys just to find out their views about menstruation and maturation and its relationship with girls education. Simple Random sampling was used for the selection of communities and schools and as part of multi stage sampling technique, accidental sampling was used to select the respondents simple because it was difficult getting the sampling frame of the target population especially those within the target ages. The study used both primary and secondary data. The primary source was solicited from school children, teachers, educationist, opinion leaders via the semi structured interview schedule and key informs interviews guides. The secondary data was gathered from the Journals, text books, magazines, newspapers, television news, internet, and past project documentations.

Key informants interview guide was used especially for mothers, school mistresses and male teachers as well as opinion leaders to discuss the cultural problems relating to menstrual management especially the menarche. Coding and editing were done before the raw data was entered into the computer and the SPSS was used for the analysis. Responses of parents, teachers and the pupils were examined and analyzed. The qualitative data was used to support the quantitative data; also descriptive statistics such as frequency tables, charts were used.

Findings of the Study

Ghana as a country is committed to the development of education of the girl child and this is demonstrated in the fight against discrimination of the girl child because of her sexual maturation in all spheres of the life .Among the key indicators of the progress made towards girls education both in terms of enrolment and attendance, the girl child is faced with multiple of problems including the management of her menstruation which has been used to discriminate against her and the complexities of maturation that are likely to debar her from attending school or being dropout from school which is affront to the tenants of the Capability and Social Justice Theory which the study used as guide in the study. This section of the paper explains the problems of sexual maturation and the management of menstrual practices among school girls in the three Northern Regions of Ghana. The Figure below shows the distribution of percentages in terms of the levels of education of the respondents in relation to menstruation and maturation.

Figure 1: Percentage distribution of level of education in relation to menstruation



Source: Field survey 2012

The figure indicates that 90 percent of the respondents were in Junior High School while only 10 percent were in the primary school but who were matured enough to respond to the questions. This is an indication that there is a sizable number of the target population in the primary school who had experienced menstruation and also had knowledge about sex in the contemporary Ghanaian society. It is also an indication that menstruation does not only start with girls at the junior high but also with some girls at the primary level. FAWE (2001) confirms the study when the organization reported that the age of first menstruation or menarche has reduced and that girls are likely to have menstruation at an earlier age before reaching the Junior High level in the Northern Ghana. In relation to the above, majority of the respondents were between the ages of 13-15 years representing 48 percent of the target population. Thirty-five percent (35 percent) of the respondents were between the ages 16 and above. This shows that, both the age categories mentioned above were all matured enough and had reached menstruation ages, hence capable of handling issues relating to sexual maturation and menstrual management practices in the society.

Although some few boys were interviewed (13 percent) just to find out the attitude of the boys towards menstruating girls. The findings were that only few boys sympathized with the girls and majority of the boys tease them which make some these girls not to attend school during menstruation. Majority of the respondents were girls representing 87 percent of the target population since they are more vulnerable than any other and are more susceptible to sexual transmitted diseases that could facilitate the transmission to HIV AIDS .as Khan 2002 explained. The findings revealed that Christianity stands tall among all the religious denominations in all the regions (Northern, Brong Ahafo, and Upper East) except the Northern Regions of Ghana. Christianity represented 70 percent of the targeted population while Islam took 20 percent and African Traditional Religion 10 percent.

It can be explained from the study that churches in the society are not so open on sexual maturation and menstrual practices, they only need encouragement to do so via seminars and open fora, they do not act in any way to improve girl's condition during menstruation though they encourage the girls to go to school during menstruation and encourage them to stay in school. The school factors including lack of wash rooms and teasing by their males counterparts prevent them to attend regularly and are even forced to drop out. In this case the capability of the girl child is not considered and as Sen (2007) reported that the girls are equal capable as boys therefore they should not be discriminated as a result of their physiological make up. The study revealed that they do teach the youth about sex, especially the dangers of pre-marital sex. Both the orthodox and the charismatic churches are not bothered where menstruating girls sit at church services, however the spiritual churches do not allowed them to sit in front in the church but sit at the back in the church hall. This widens disparity between the boys and the girls further in the church which is passed on to the schools. Apart from the

spiritual churches, the other churches does not debar any girl from attending church service nor does it prevent them from participating in any religious activities within Christianity.

The churches however insist on purification of oneself before God and this involves menstrual management. One major finding from the key informants is that most churches, especially the Presbyterian church acknowledges the growing child and confirms only mature children ages ranging between 15-18 to partake in the Lords Supper after a vigorous study of the word of God stressing on premarital sex as a sin but do not touch on the maturation and menstrual management practices and this is also affront the capability and social justice theory by Sen (2007).

On the part of Islam the study revealed that Islam encourages cleanliness and purification of oneself before God. Also a menstruating girl is debar from participating in Islamic prayer and worship during menstruation period. Khan (2002) explained that disparity is seen right from prayer and worship in Islam and this can perpetuate up to the basic school level. A menstruating girls in Islam is not supposed to say the five daily prayers during menstruation and will not pay for the missed prayers after menstruation, she is not supposed to fast during menstruation but shall pay back the missed fast after menstruation.

The reason attributed to above were that a menstruating girl according to Islam is impure to perform any religious duty (especially prayers and fasting). The study again revealed that most of the effects of religion on sexual maturation and menstrual management fall heavily on the belief of African Traditional religion. According to African Traditional Religion, girls who reach her first menarche were put together in a room for some days with an old lady who teaches these girls many things connected with menstruation including taboos to be observed and taking good care of the body during menstruation. It is after these training that the girls are exposed to the public to invite suitors. A menstruating girl is segregated from the society during menstrual period because at this time the impure blood that is being discharged can contaminate the society, a girl who is menstruating is not supposed to enter the chief's palace as the study revealed, enter the abode of the community fetish, enter the house of a traditional herbalist, visit the river bodies. She is not supposed to go to farm or cook for the husband. This situation prevents the menstruating girl at school to participate in class discussions. The girls explained that they look very timid and want to even live in isolation at school and which make that unable to match their counterpart in performance in class.

The African Traditional Religion explained that menstrual blood is impure or unclean because they believe it is life that has been destroyed and being washed away. Hence a girl or woman in her menses is considered impure. They further stressed that in some communities such a person is even made to live outside the main compound until the end of the period, and is excused from household chores. Menstrual blood is also considered a potent, or powerful negative force, and this is why it is a taboo for menstruating women to go near a chief's palace or cook for royals and traditionalists. As to why the girls are not allow to cook for the above mentioned people or visit river bodies in their period, the reason was that the menstrual blood is so potent that it neutralizes spiritual powers as such, they believe some calamity can befall them if they go against the belief. Also some groves, rivers and shrines are considered so sacred that women in their menses are not allowed to go near them. Christianity and Islam have in diverse ways affected the belief system of African Traditional Religion (UNESCO 2004). The finding revealed that in a typical rural setting of Ghana, these beliefs on menstruation still hold firm and less practiced in the urban setting

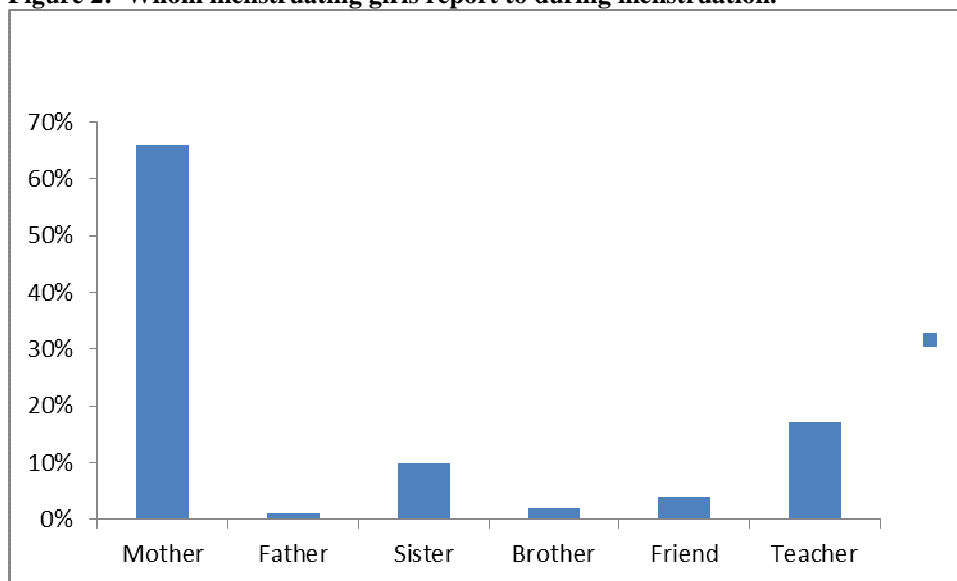
Knowledge about Menstruation

The study revealed that 70 percent of the respondents had a full knowledge and understanding of what menstruation was. Those who did not know what the concept was represented 30 percent. This is an indication that menstruation is not something new to society and also, the respondents were in good shape to respond to the questions on sexual maturation, menstruation and management practices in the society. UNO (2010) noted that only a small number of girls had learnt about maturation and menstrual practices from their mothers. Girls in the rural areas sometimes had no knowledge about menstruation. UNESCO (2004) found that the percentage of girls who knew that menstruation is a physical change of puberty increased from 19 percent before the health education program to 70 percent after the health program among girls aged 10-14 and from 57 percent to 83 percent among girls 15 to 19 in Nepal. The percentage of those who did not know why menstruation occurs dropped from 78 percent to 22 percent.

Majority of the respondents explained that they first heard about menstruation from their mother. Although there were other people some of the respondents first heard about menstruation. These people included friends, sisters, teachers and others which included the media and public fora. Aktum (2005) noted that in Haiti and Bohivia only 18 percent of men knew that a woman is fertile generally in the middle of her menstrual cycle and about 26 percent said they did not know. The percentage in Ghana clearly showed that sex education does go on in the Ghanaian families as compare to other countries cite above. As to whether the respondents have ever menstruated. 86 percent responded affirmative while 14 percent declined this is an indication that majority of the respondent had experienced menstruation one way or the other. The table below shows the responses

The finding further revealed that 98% felt bad when they first menstruated, only 2% responded negative. Those who felt bad explained that there were uncomfortable and felt sad and unhappy when they first saw the blood and those who responded in the negative also explained that they felt good because they thought they were now matured enough to carry out certain task in the society since decision of labour in our society is on the basis of sex and age. In high number of those who felt bad may attributed to the fact parents and other family members wait till the girl reaches the monarchy before the education is done. Studies in Jordan by Datey (1995) revealed that most women in Jordan did not know the when the fertile time occurred and this was as a result of lack of knowledge. This evidence supported the findings in Ghana as most girls have little knowledge about menstruation especially those in the rural areas of Ghana. As to whom the menstruating girls' first report to the following charts depicts the responses:

Figure 2: Whom menstruating girls report to during menstruation.



Source: Field Survey 2012

Sixty six (60 percent) of the respondents mother, 1 percent said their father, 10 percent mentioned their sister, 2 percent said their brother, and 4 percent also mentioned their friend and 17 percent mentioned their teacher. This explains the fact that mothers play an important role in educating children and also serve as a source of information in the Ghanaian families. The respondents also explained that they were afraid and thought it was the mother who could help them out. A significant number of the respondents mentioned their teachers (17 percent), and that showed how important teachers are in educating the girl-child and also the trust girl-children have in their teachers. It also shows how the teachers can encourage the girls to attend school during menstruation.

Effects of Cultural Practices

Culture is a way of life of a group of people, the culture of the group determines the food they eat, the things to wear and even their overall way of thinking. Culture can bring progress however outmoded culture can retire progress (UNESCO 2000). It is upon this background that the study looked at the effect of cultural practices

associated with menstruation. When asked whether the respondents knew any cultural practices that are associated with menstruation, 80 percent responded in affirmative and clearly 20 percent declined. This is an indication that the young girls are not conversant with the cultural practices that affect their lives.

Knowledge of cultural practice

Most of the respondents indicated that, the culture practices are confined in their households and are not enforced in their churches. Communities which were purely traditional, the respondents explained that a menstruating girl is not supposed to pray neither is she supposed to cook. These practices were held high in the Muslim dominated areas where a menstruating girl is exempted from all religious activities because she was considered impure to stand before God.

It is worth noting that the “negative” cultural practices affecting menstruation are highly recognised in the traditional African religion and Islam. They are in line with the teaching and principles of the religions concern. According to FAWE (2001) myths and taboos about menstruation woman such as the need to abstain form sex or being forbidden to prepare food is diminishing in Africa but the authors added that menstruation is still perceived in a negative light with little research on menstruation

Table: 1 what a menstruating girls should not do in terms of cooking, going to farm and preventing from attending school in percentages.

Responses	Should not cook	Should not go to farm	Should not go to school
Yes	61%	63%	5%
No	39%	37%	85%
Total	100%	100%	100%

Source; Field Survey 2012

The study also revealed that, these cultural practices affect their psychological emotional and educational development hence their responses affirmed to that. Preventing girls who are menstruating from cooking 61 percent responded in affirmative while 20 percent declined. From going to farm 63 percent agreed and 37 percent declined from going to school 5 percent agreed and 85 percent declined. This is an indication that though these customs and practices exist, but the responses showed that it did not prevent the young girls from going to school. The opinion leaders emphasized that in the olden days when cultural taboos such as one against premarital sex were adhered to, girls were able to take care of themselves and stay till they were given out to marriage. He said those days teenage pregnancy was scared since both the girl and the boy would be banished from the society. He attributed all these negative behaviour of girls and boys and spread of STIs to impact of Christianity and Islamic.

Management of Menstruation and Menstrual Hygiene

Sexual maturation and menstruation issues have not received adequate attention in the past, despite the fact that gender disparities in participation and achievement/attainment have been shown to start at adolescence. Abagi & Odipo (1997) reported that dropout and repetition rates are higher in upper primary school. However, in the past advocacy for girls’ education has focused mainly on factors external to the school environment. It is upon this note that the study wanted to know respondents who are from relatively poor and deprived areas of Ghana managed menstruation and the extent of the management on the education. In relation to how menstruation is managed, majority of the respondents used toilet role during menstruation representing 48.3 percent, 43.3 percent used used-cloth, 16 percent used pad 3.3 percent used cotton wool and 2 percent used often items like paper and graphic.

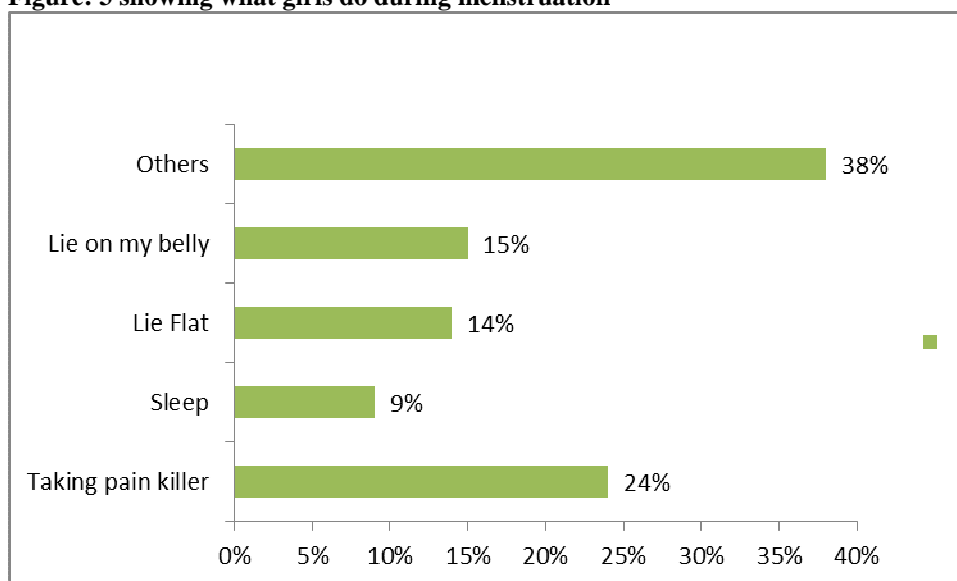
As to why such items are used, 70 percent respondent that they could not use pad because of poverty while 30 percent said they used them because of its availability. They explained that at the moment, what they used is the best, because they could not afford the one most people used in the urban areas like the pad. When a question was asked how often the respondent’s bath during menstruation 55 percent said twice, 35 percent responded once and 15 percent said thrice. This is an indication that more than half of the respondents both twice a day during menstruation. They said, they bath in the morning and in the evening before going to bed FAWE (2001) found that adolescent girls. As to whether they change the items used during menstruation 60 percent responded in affirmative while 40 percent responded negative. It was revealed that they changed the items used twice a day that is in the morning and in the evening. As to whether they go to school, church or play with friends during

menstruation 80 percent responded positive while only 20 percent responded negative. They explained that, their parents do not prevent them from doing or participating in all above mentioned instances.

Menstrual problems experience by school girls

The study revealed that school girls in Ghana more often than not encounter menstrual problems because the responses indicated that 66.7 percent said yes while 33.3 percent responded negative. When asked the nature of the menstrual problems 35 percent mentioned painful menstruation, 45 percent mentioned heavy flow and 20 percent mentioned inconsistency of the menstrual cycle they do not know exactly when the menstruation end and sometimes, the onset takes them by surprise they explained that during this period, most of them do not attend school and sometimes when they are in school they run to the house so that they can free from teasing by the boys and this cost them a lot in class. The figure below show the various ways the menstruating girls manage the menstruation.

Figure: 3 showing what girls do during menstruation



Source: Field Survey 2012

Others (38 percent) taking the highest percentage and which consist of the consultation of doctor or nurse, and some used the phrase “I do not do anything” the percentages are as follows. Taking pain killer represent 24 percent, 9 percent sleep 14 percent lay flat and 15 percent lay on their belly. The above chart and explanation means that majority of the respondents consult the clinic anytime they are experiencing menstrual problems. It is also an indication that majority of them are matured enough to manage menstrual problem in their families therefore the idea of seeing a herbalist or juju man for treatment of menstrual problems are in decline now in most of Ghanaian societies. In relation to the difficulties girls go through during menstruation, FAWE (2001) again noted puberty and adolescence can be a challenging times for any girls. Although it may occur at different ages for different girls, adolescent girlhood is always a critical time of identity formation and a period of transition from childhood to womanhood, in most societies, menarche is an indication of a girls’ developing sexuality.

The idea of menstruation being a sickness was debunked during the research. 70 percent of the respondent affirmed that menstruation is not a sickness in our society and 30 percent responded positive. They explained that if menstruation is a sickness than every woman is sick in this world, this shows that education on menstruation is gaining grounds in the society and the myths surrounding it are going away gradually. This finding contradicted the findings of Shukla (2005) who argued that in India menstruation is considered as sickness and a polluting factor for Hindus. In many places in India, a menstruating women are considered untouchable, menstruating women during the month do not touch anything in the kitchen or visit the temple. This assertion by Shukla (2005) is not applicable in Ghana as pertained in India.

The study further revealed that most of the schools in the societies do not have good facilities to make girls comfortable during menstruation this is because only 30 percent said the schools have and 70 percent declined. Neat toilets, hand washing basin as facilities that make them comfortable during menstruation are woefully

inadequate hence the facilities in the schools are not there purposely to make menstruating girl comfortable and this make the girls to run home during menstruation or even refuse to attend school during menstruation which go a long way to widen the disparity in attendance of girls to school.

Sex education in the schools

The study further revealed that, the school has a medium of teaching sex education. 96 percent responded positive while only 4 percent responded negative. The responses explained that sex education is part of the school curriculum and that; it is incorporated in the study of General Science, Life Skills, Religious and Moral Education. Majority of the respondents do not have boy lovers as the study revealed. Those who responded that they have are in the junior high school they represented 40 percent of the respondents. Those who said they do not have represented 60 percent. Relevant to this issue of boyfriend or lover, it was realized that majority of the respondents felt shy to answer and this made it very difficult to ascertain the efficacy of the issue.

In relation to the above, 69 percent of the respondents had never had sex, only 31 percent said they ever had sex with their boy lovers, though this was a moral issue but the reason was to find out whether respondents have an idea about sex and the behaviour of the respondents showed that they had a full knowledge about sex in their societies. In addition to this, some of the respondent ever had sex at least 16 percent of the target population affirmed that they ever had sex while 84 percent declined. The respondents also confirmed that girls who are menstruating can easily become pregnant. As to how many times respondents ever had sex, the respondents declined to answer. The respondents also had some knowledge about preventive methods against sexual transmitted diseases (STIs) the table below shows the responds categories.

Knowledge of preventive measures.

According to the respondents the method includes, the use of condom, stick to one partner, abstain from sex until marriage, being religious. They agreed that most STIs are curable except the HIV/AIDS, they mentioned, HIV/AIDS, gonorrhoea, syphilis, as STI. The table below showed the responds categories of respondents who shared their views on the curability of STI in our society.

Curability of Sexual Transmitted Infection.

This explains the fact that all the STI can be curable except HIV/AIDS, but the respondents affirmed to the fact that, if girls avoid sex, use condoms, stick to one partner can go a ways to prevent HIV/AIDS in the society. The teachers when contacted explained that teenagers do get pregnant in their schools therefore they try as much as possible to educate the girls on sex related issues normally in Religious and Moral Education lessons sometimes in General Science. This corroborated the information given by the respondents.

The teachers also explained that abortion these days is rampant in the society at times, some of their pupils stop schooling because they attempted abortion and felt shy to come to school again for fear that their colleagues might tease them. According to them, there are no meaningful educational programmes on sex and menstrual hygiene management practices in their schools and this makes most of the girls to run home when they are menstruating. They attested to the fact that there are still some customs or beliefs restricting girls during menstruation which was already captured in the first part of the discussion, but agreed whole heartedly that, despite that girls who are menstruating are never prevented from coming to school.

Finally, the teachers called for more educative on sexual maturation and menstrual management practices in the society so as to develop the girl-child, economically and psychologically so that she can be able to fit well into the society in which she finds herself. The Focus Group discussion and general observation also reveals the following: Menstruation is part of the basic school curriculum in Ghana but the pupils interviewed indicated that the lessons were factual and that an explanation of sexual maturation focuses mainly on the reproductive system. Both female and male teachers felt embarrassed teaching about sexual maturation and menstruation practices in the schools. Information on print and electronic media also only provided advertisement for protection/sanitation for the girls, but not how to deal with the trauma of menstruation practices. In the villages where media information is irregular the girls find it difficult to know the current information on management of menstruation.

The girls complained that they did not feel free to discuss their menstruation with teachers because the teachers did not respect their confidence and had the tendency to discuss the girls' issues among themselves. According to them they had problems standing up and answering questions in class for fear of leakage. They were reluctant to participate in discussions because they were afraid to draw attention to themselves and the physical changes

they were experiencing, like developing breasts. There was no health inspection by concerned bodies such as City Council or Ministry of Education. The study reported: "In many schools, latrines are either full or considered dangerous, therefore unusable... The boys stand at the door and urinate whilst the girls are forced to go in...."

There was also evidence that in primary schools there is a serious gender imbalance among staff and the evidence here is that there is a lack of staffing guidelines in the Ministry of Education to ensure a gender balance in schools. The study further revealed that many girls do not have access to manufactured protective sanitary materials to support themselves during menstruation due to such factors as availability (distribution in rural areas is uncertain) and poverty. Many young girls who do have access to these products cannot afford them and consequently use a variety of unhygienic materials such as leaves, toilet papers and pieces of sacks that may have long-term effects on their health. This compromises the quality of education for the girls.

Conclusion and Recommendation

It is clear that menstruating girls are always discriminated against in the three Northern Regions of Ghana. This kind of discrimination using their maturation and menstruation is completely against the Capability and Social justice in Education theory. It is seen that the condition in which young girls who are menstruating find themselves prevent most of them from attending school thus creating gender disparity in attendance in favour of the boys in basic schools in the regions. Institution of programs to teach girls about menstruation and sexual management practices. Education about menstruation should start at an early age before girls reach puberty, when taught beforehand, girls would be better prepared emotionally, and psychologically for the experience of menstruation and will have fewer negative reaction, there would be able to better care for themselves during menstruation, especially learning about hygiene practices.

The government should provide sanitary facilities in the schools to take care of girls who are menstruating. What are currently available in the basic schools are inadequate, therefore more wash rooms are still needed for menstruating girls' couple with materials or books on menstruation for girls to read and understand the changes that occur in their bodies. There should be massive sensitization of the public about the traditional beliefs and practices relevant to menstruation and maturation and its effects on school attendance, performance and dropout these will go a long way to erase the negative beliefs about menstruation from the minds of people.

Teachers should encourage girls who are menstruating to participate in class activities especially allowing them to answer or ask question while sitting. They should also be encouraged the girls who are menstruating to report to the lady teachers in their schools. Head teachers/Masters should set up a fund to take care of menstruating girls, money from this fund can be used to buy toiletries, cotton, and other materials that can be used to make a menstruating girl clean.

Religious organizations that prevent menstruating girls from participating in prayer or any religious activity should be educated by the government on the dangers involve and the effects that it has on the menstruating girls especially with regard to school attendance performance and dropout. This type of education should call for attitudinal change and finally, NGOs assisting in education should try as much as possible to mount programmes on sexual maturation and menstrual management practices. They should assist girls especially those with menstrual problems so as to improve the quality of education in relation to attendance and performance,

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