

**EFFECTS OF MENSTRUAL HEALTH ON PUPILS' ATTENDANCE
IN PRIMARY SCHOOLS OF BULAMAGI SUBCOUNTY,
IGANGA DISTRICT, UGANDA**

BY

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**A RESEARCH REPORT SUBMITTED TO THE DEPARTMENT OF EDUCATION IN
PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE AWARD OF A
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DECLARATION

I **KAFUKO MIRIAM** do declare that this research proposal is my creative work and it has not been formally submitted to any university for any award.

Signature: *Miriam* Date: *10th September, 2024*

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APPROVAL

I, the undersigned certify that I have read and hereby recommend for acceptance of this Research project titled: **“Effects of Menstrual Health on Pupils’ Attendance in Primary Schools of Bulamagi Subcounty, Iganga District, Uganda,”** by the department of education of Busitema University in partial fulfillment of the award of a Bachelor of Education Primary of Busitema University.

Signed by: 

MUGOYA LIVINGSTONE (Supervisor)

This.....10th..... day of *September*.....,2024

DEDICATION

I dedicate this work to my lovely husband Mr. Isaac Mukungu for his love, care and support during my studies, project and course in general. Without him and his input, all this would be a futility.

ACKNOWLEDGEMENT

I am greatly indebted to my; lovely Mother Ms. Nakisuyi Joy for her support, love and prayers; Mr. Isaac Mukungu, my husband for the love and facilitation as well as our children; Mukungu Murshid Abdulhakim, Ndifuna Abulrahman Goodluck and Ndikuwa Mysha Rahma for the love they missed while I was in course. The house help, Ms. Byogero Annet, that looked after our children in my absence is also greatly appreciated.

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ABSTRACT

The study was undertaken with the purpose of finding out the effects of menstrual health on pupils' attendance in Primary schools of Bulamagi Subcounty, Iganga district, Uganda. It was guided by the study objectives to; find out the state of female pupils' primary school attendance in schools, find out the available menstrual health facilities and measures in primary schools and establish the effects of menstrual health management practices on pupils' attendance. The targeted population here included the; head teachers, teachers of Primary Seven Senior Woman and Senior Man Teachers, as well as the Primary seven girls from the five selected schools. With a population of 309, research tools were issued to 209 respondents selected through the different probability sampling techniques. Out of the 209, 187 of the respondents giving a response rate of 89.5% which was adequate enough for the data to be analyzed. Data was collected from primary and secondary sources was sorted, organised, organised in frequency tables and percentages objective by objective.

After analyzing the collected data and its trends, it was concluded that girls in upper Primary were reaching their menarche without knowledge of what to do and this was forcing them to miss 2-3 days of school per month. It was also concluded that girls in schools with; separate clean, segregated toilet stances, changing rooms, enough water to use while at school during menstruation, and a reliable provision of emergency sanitary pads for use at, continued attending school. Finally, the researcher concluded that the availability of some MHM activities and facilities had enabled children to continue attending school whether in or out of their menstruation periods. It was established that; helpful female and male teachers as well as the male classmates(boys) in school enable the girls to continue coming to school during their menses.

It was recommended that; girls aged ten year and above should be given relevant basic knowledge about menstruation so as to be equipped and empowered to manage this experience right from their menarche, schools should have basic facilities in place to enable effective Menstrual Health Management for a continued attendance of school by the girls across the month and that other members of the school community like the male classmates (boys), male teachers, female teachers and other workers in the school should be sensitized to offer a friendly and enabling environment to girls during their menstruation periods while continuing to attend school without; fear, intimidation and trauma with more termly funding.

The study also recommended future studies on effects of menstruation and its management on the academic performance of as well as the effects of Menstruation and its management practices on the rate of the girl child's Primary School completion.

CHAPTER ONE

INTRODUCTION

1.0 Introduction

This study was intended to find out the effects of menstrual health on pupils' attendance in Primary schools of Bulamagi Subcounty, Iganga district, in the East part of Uganda. This chapter therefore presents the; background to the study, statement of the problem, purpose of the study, objectives, research questions, significance, scope, conceptual frame work and operational definition of terms.

1.1. Background to the study

The background is subdivided into; Historical background, theoretical background, conceptual background and contextual background.

1.1.1. Historical background

According to Chamberlain, K. (2019), Menstruation, or a menstrual period is the monthly shedding of the lining of a girl or woman's uterine lining. Over a period of three to five days, the uterine lining breaks down into a bloody substance. It then passes down through the cervix and exits through the vagina. This period is marked by a special happening called menarche

Menarche is the onset of the first menstrual bleed which occurs at an average age of 12 years old (Bae J, et al, 2018). The first menstrual cycle or bleeding of a female is called Menarche. This is the most significant stage of a girl or woman's life, where she needs information, materials and resources to manage herself during this critical stage of life (Oladunni, 2022).

However, the age of menarche often varies and is dependent on the interactions of genetic and environmental factors and the consequential interplay between the hypothalamic, pituitary, and ovarian hormones.

Brown N, et al (2022) Specifies that the menstrual cycle is a repeating pattern of fluctuating hormones, primarily estrogen and progesterone, and is an example of a bio-psycho-social process; it is a normal aspect of physiology that can affect and also be affected by behaviour.

Menstrual health knowledge is regarded as having knowledge of what menstruation is and the need for effective management of health during menstruation and proper menstrual hygiene management. It involves one knowing what menstruation is, why and how it happens as well as knowing how to manage it safely.

In Africa, Menstruation and menstrual practices are still disquieted by taboos and socio-cultural restrictions resulting in adolescent girls remaining ignorant of hygienic health practices, which sometimes result in adverse physical, social, psychological and health outcomes. Generally, school going girls from poor background in South Africa have more disrupted school calendar days than boys. This social problem is mainly prevalent at primary school than high school, (Ngomane T & Sebola M, 2023).

Girls face obstacles when entering puberty especially menstruation and its management during the later years of primary school resulting into highest dropout rates for girls (World Bank, 2018a). In developing countries like Uganda, less than two thirds of girls' complete primary education and only one third complete lower secondary school (World Bank, 2018a).

According to Bernedatte (2022) there has been a consistent decline in the students' completion levels in Secondary schools in Buyende district for the past five years. This prompted the researcher to find out the effects of menstrual health on pupils' attendance in Primary schools of Bulamagi Subcounty, Iganga district, in the East part of Uganda.

1.1.2. Theoretical background

The study was grounded on the cultural feminism theory. According to Raine S. (2023) and Alcoff, L. (2021). the theory attempts to revalidate undervalued female attributes. It commends the differences between male and female genders. It is traceable to the mid 1970's and expressed sentiments against women oppression and its forms. It is based on the understanding of the difference between women and men on assumption of their biological differences and reproductive capacity. Furthermore, it commends the positive aspects of the female character or feminine personality.

Echols, A. (2019) takes Cultural feminism as a feminist theory that focuses on the differences between men and women, particularly in relation to cultural and societal roles. It emphasizes the importance of women's unique qualities and experiences, such as nurturing, caregiving, and emotional intelligence. Cultural feminists advocate for the recognition and celebration of these qualities within society, believing that they are valuable contributions to the overall well-being of humanity. This perspective also seeks to challenge traditional gender norms and stereotypes in order to create a more inclusive and equitable society for all individuals.

Significantly, the theory emphasizes the essential differences between men and women, based on biological differences in reproductive capacity. According to Bingham, et al (2009)

and Alcoff (1988) “the liberation of women can only come through individual change where women recognise and create a women-centred culture, and the redefinition of feminism and masculinity”.

On a positive note, cultural feminism creates a safe space for women such as rape crisis centres, shelters, facilities that cater for women’s needs such as nursing rooms and gendered toilets. All these facilities assist by giving women locations dedicated solely to their needs. Cultural feminism strives to create and maintain a healthy environment-free of masculinist values and behaviours such as the stigmatisation of menstruation and the control of women’s mobility during menstruation. Women’s attributes such as menstruation are devalued even though it is an important process that gives birth to life.

Menstruation is not only devalued but it is shrouded in mystery and seen as something diabolical despite it being a natural phenomenon such as defecating. Women are made to feel shame about their natural body functioning process, which force them to strive to hide the fact that they are menstruating.

This cultural stereotyping and stigmatisation impact negatively on girl child schooling calendar especially those coming from poor families and lacking the basic menstrual health management materials like the menstrual absorbents, hence skipping school attendance whenever their menses appear.

This study was therefore carried out to find out the effects of menstrual health on pupils’ attendance in Primary schools of Bulamagi Subcounty, Iganga district, in the East part of Uganda.

1.1.3. Conceptual back ground

Throughout this study there were mainly two major concepts thus; menstrual health and school attendance. According to Clarke (2020), Menstruation, menses or period, is normal vaginal bleeding that occurs as part of a woman's monthly cycle. Every month, your body prepares for pregnancy. If no pregnancy occurs, the uterus, or womb, sheds its lining. The menstrual blood is partly blood and partly tissue from inside the uterus. It passes out of the body through the vagina.

Carlson L. J. & Shaw ND. (2019), assert that the reproductive system of a woman, unlike men, shows regular cyclic changes that teleologically may be regarded as periodic preparation for pregnancy and fertilization. In primates and humans, the cycle is a menstrual

cycle, and its most conspicuous feature is the periodic vaginal bleeding that occurs with the shedding of uterine mucus (menstruation).

The length of the cycle is notoriously variable, but the average figure is 28 days from the start of one menstrual period to the start of the next. By common usage, the days of the cycle are identified by number, starting with the first day of menstruation. It begins at puberty, ranging from the ages of 10 to 16, and ends at menopause at an average age of 51.

On the other hand, Sekiwu D., et al (2020) defines School attendance as the daily or regular learner participation in school activities. To increase educational quality and equity, the government of Uganda introduced the Universal Primary Education (UPE) programme in 1996 which boosted pupil enrolment from 3.1 million in 1996 to 2.7 million in 1997; then from 7.4 million in 2004 to 8.2 million in 2009 and 10.5 million in 2017.

Despite these steady increases in enrolments, school attendance remains low, highlighting the incongruity between school enrolment and attendance. For example, Twaweza Monitoring Series (2018) study shows that out of 67% children who enrolled in primary one, only 13% completed primary six.

School enrolment alone cannot guarantee educational quality and equity, especially where school attendance is low. With low school attendance, learners can hardly catch up with class work particularly where teachers do not have adequate time to engage absentee-learners in academic activity (Bagaya, 2019).

In this study therefore, the researcher intended to find out the effects of menstrual health on pupils' attendance in Primary schools of Bulamagi Subcounty, Iganga district, in the East part of Uganda.

1.1.4. Contextual background

This study was carried out in Iganga district, one of the districts in Busoga Sub-region in the Eastern part of Uganda. Iganga is a rural area predominantly occupied by the Basoga tribe of people. It is a large area with a large population majorly depending on agriculture and trade. It is bordered by; Kaliro district in the North, Bugweri district in the East, Mayuge district and Luuka district in the South and West respectively.

Administratively, Iganga district is comprised of three constituencies, viz; Iganga Municipality, Kigulu South and Kigulu North. It has one municipality, two town councils and eight rural sub counties punctuated with growing trading centres.

In terms of social amenities, the district is serviced by;153 Government aided and 380 Private Primary Schools located in the 66 parishes, 12 government and 35 recognized Private secondary schools. It has one technical Institute (Iganga technical Institute) and Bishop Willis Core Primary Teacher Training Institute as well as the Proposed Government owned Busoga University that is taking shape. The health of its population is taken care of by Iganga hospital, Iganga Muslim Hospital, Bugono health centre IV, National Sleeping sickness treatment Centre, Namungalwe and many other Health centre IIIs and other privately-owned Medical facilities.

Security- wise, Iganga is the seat for Uganda Police Force's Busoga East territorial police headquarters. This is served by Police stations at; Namungalwe, Nawandala and a big number of Police post both within the district and its neighbours.

Iganga being a district in Busoga Sub-region, early marriage and school drop outs especially among the girls are very common societal evils. On the other hand, the report by Iganga District Education Review (2022) showed a significant decline in the learners' school attendance and completion levels in this area. It was against this background that the researcher was prompted to carry out this study with an intention of finding out the effects of menstrual health on pupils' attendance in Primary schools of Bulamagi Subcounty, Iganga district, in the East part of Uganda.

1.2. Statement of the problem

The government of Uganda through the Ministry of Education and Sports put up a number of measures to ensure that learners enroll, attend, stay in school and complete their Primary school education. One of these strategies is the introduction of Universal Primary Education (UPE) program.

Efforts also have been made to construct more Primary schools per parish with the intention of extending basic education near to communities. However, despite all these efforts many learners have increasingly failed to attend school regularly. The Iganga District Education Review (2022), indicated that many female learners in the Primary schools of this area were always missing school for some days monthly due to unknown reasons. Being a teacher and a resident of this area, the researcher is also a witness of the rapid increase girl child school absence per month especially in upper primary classes.

On the other hand, Kansime C, et al (2020). argue that many girls in upper primary classes could be missing school on some days per week due to menstruation – related issues impacting their learning. It is therefore against this background that the researcher was

prompted to carry out this study in order to ascertain the effects of menstrual health on pupils' attendance in Primary schools of Bulamagi Subcounty, Iganga district, in the East part of Uganda.

1.3. Objectives of the study

1.3.1. General objective

This study was intended to find out the effects of menstrual health on pupils' attendance in Primary schools of Bulamagi Subcounty, Iganga district, in the East part of Uganda.

1.3.2. Specific objectives

This study was guided by the following specific objectives;

- i) To find out the state of female pupils' primary school attendance in schools of Bulamagi sub – county, Iganga district, Uganda.
- ii) To find out the available menstrual health facilities and measures in primary schools of Bulamagi sub – county, Iganga district, Uganda.
- iii) To establish the effects of menstrual health management practices on pupils' attendance in primary schools of Bulamagi subcounty, Iganga district, Uganda.

1.4. Research questions

The study sought to answer the following research questions;

- i) What is the state of female pupils' primary school attendance in schools of Bulamagi sub – county, Iganga district, Uganda?
- ii) What are the available menstrual health facilities and measures in primary schools of Bulamagi sub – county, Iganga district, Uganda?
- iii) What are the effects of menstrual health management practices on pupils' attendance in primary schools of Bulamagi subcounty, Iganga district, Uganda?

1.5. Scope of the study

1.5.1. Content Scope

This study dwelt on the effects of menstrual health on pupils' attendance in Primary schools of Bulamagi Subcounty, Iganga district, in the East part of Uganda.

The study mainly focused on the effects of menstrual health on pupils' attendance in Primary schools of Bulamagi Subcounty, Iganga district, in the East part of Uganda.

1.5.2. Geographical scope

Geographically, this study was carried out in selected primary schools in Bulamagi sub county, Iganga district. The reason for conducting the study in this area is that the researcher had identified it with high levels of school absenteeism especially among the girls of upper primary classes in schools, hence the need to find the effects of menstrual health on pupils' attendance in Primary schools of Bulamagi Subcounty, Iganga district, in the East part of Uganda.

1.5.3. Time scope

This study considered data ranging from 2017 to 2024 because data not older than 5 years was perceived to be current and up-to-date to be relied up on.

1.6. Justification of the study

Iganga, like very many other districts in the Eastern region experiences numerous threats to the growth, education and general wellbeing of the girl child. Many practices like absenteeism from school, child labour, child neglect and child marriages are carried out in Iganga district and are considered as good practices but no one has taken trouble to establish how these practices have impacted the social-economic development of the communities of the district.

The rates of school absenteeism and dropout increase day and night, teenage marriage is the order of the day and involvement in petty trade is very common. Bulamagi being a peri-urban subcounty of the district, has trade as the optional activity to agriculture. This involves the engagement of minors in petty trade activities like; hawking, selling fruits and foodstuffs in the developing trading centres not leaving out working as waiters and waitresses in the local eateries and bars. Coupled with the fact that many girls feel stigmatized during their menses and opt for skipping during such periods per month. The school attendance rates especially of the girls have been low across months with individual girls being absent on particular days per month, making menstruation is the most suspected reason for it.

It is from this background that researcher finds it justifiable to establish the effects of menstrual health on pupils' attendance in Primary schools of Bulamagi Subcounty, Iganga district, in the East part of Uganda.

1.7. Significance of the study

This study will be quite beneficial to the following stakeholders in education.

The Ministry of Education and Sports officials will be helped to identify the effects of menstrual health on pupils' attendance in Primary schools of Bulamagi Subcounty, Iganga district, in the East part of Uganda.

Local leaders in Iganga district will be enabled to identify the effects of menstrual health on pupils' attendance in Primary schools of Bulamagi Subcounty, Iganga district, in the East part of Uganda. This will therefore prompt them to come up with strategies of minimizing the Primary school girls' absenteeism due to menstruation.

Parents will also understand the effects of menstrual health on pupils' attendance in Primary schools of Bulamagi Subcounty, Iganga district, in the East part of Uganda. They will therefore come up with better ways of enabling their daughters to manage menstruation while attending school regularly.

Students will benefit from this study in that they will be helped to stay in school and complete their secondary education if efforts are made by the stakeholders to regulate their involvement in cultural practices.

Researchers will use the findings of this study as a point of reference when conducting further research in relation to the effects of menstrual health on pupils' attendance in Primary schools. They will be encouraged to carry out further research in the related area of study.

1.8. Conceptual frame work

Figure 1: This was drawn to show the relationship between menstrual health and primary school attendance.

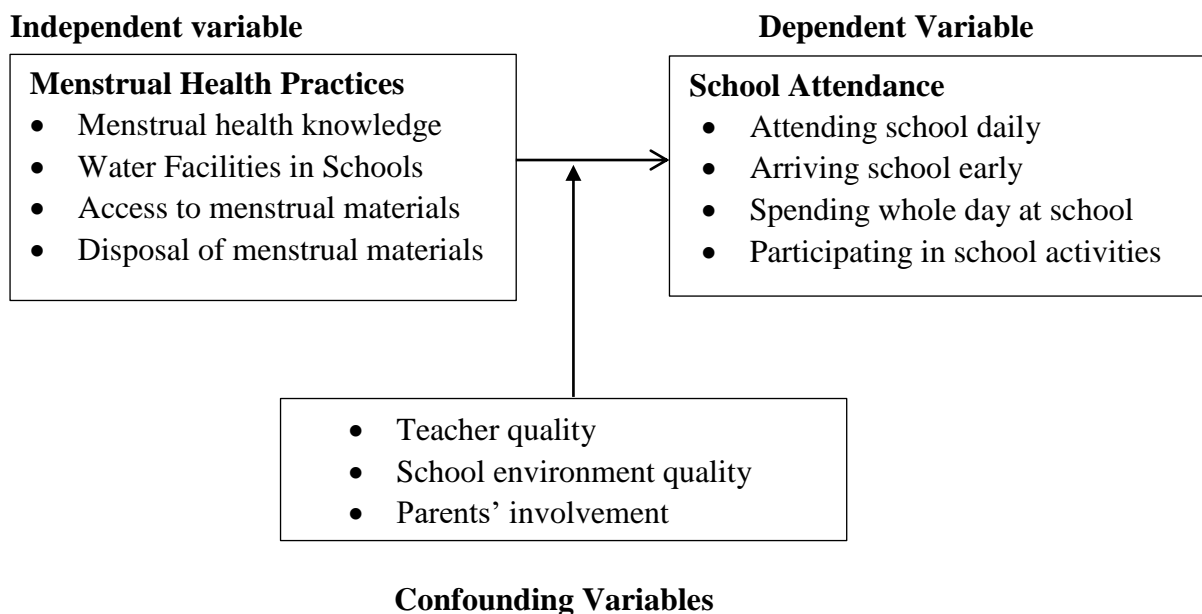


Figure 1: Produced by the researcher

As seen above, menstrual health is the independent Variable (IV) and school attendance is the dependent variable (DV). It is anticipated that menstrual health practices in form of; Menstrual health knowledge, Water Facilities in Schools, Access to menstrual materials and

disposal of menstrual materials greatly influence the way girls; manage their menstrual periods, behave while in their menses and attend school.

Additionally, it is presumed that the menstrual health practices identified earlier have an influence on the girls'; arrival time at school, frequency of school attendance, stay at school throughout the day as well as their participation in school activities.

These assumptions were made not ignoring the other factors outside the study that may also affect the rate of school attendance; the confounding variables. These included the; teacher quality, School environment quality, Parents' involvement and others.

Operational definitions of terms

Menstruation; Menstruation is the normal vaginal bleeding that occurs as part of a woman's monthly cycle

Menarche is the onset of the first menstrual bleed which occurs at an average age of 12 years old. It is the first menstrual cycle or bleeding of a female (girl).

Menstrual health knowledge is regarded as having knowledge of what menstruation is and the need for effective management of health during menstruation and proper menstrual hygiene management.

School attendance is the daily or regular learner participation in school activities.

CHAPTER TWO

LITERATURE REVIEW

2.0. Introduction

This chapter presented the literature review about the effects of menstrual health management practices on pupils' attendance in primary schools of Bulamagi subcounty, Iganga district, Uganda as written by other scholars. The literature review and citations were based on the research objectives. The chapter covered the; theoretical review of the study, menstrual health knowledge, water, sanitation health facilities in schools, access to menstrual materials and disposal of menstrual materials in relation to the girls' attendance of school. The chapter also highlighted the gaps identified in other people's findings which this study intends to fill.

2.1. Theoretical Review

This study was guided by the cultural feminism theory, a philosophy that men and women have different approaches to the world around them and the greater value should be placed on the way women approach the world. In some cases, cultural feminism argues that a woman's way of looking at the world is actually superior to that of men.

Cultural feminism is a term used to describe a variety of feminism that attempts to revalue and redefine attributes culturally ascribed to femaleness. It is also used to describe theories that commend innate differences between women and men (Brooke Williams, 1975; Frances Chapman, 1971 and Elizabeth Diggs, 1972).

According to Raine S. (2023) and Alcoff, L. (2021). the theory attempts to revalidate the undervalued female attributes. It commends the differences between male and female genders.

There are other more significant factors that have an impact on one's development such as education level, the personal characters of the individual and others.

Cultural feminism mainly describes about "female nature or female essence" that attempts to revalue and redefine attributes ascribed to the feminine character. This female essence includes a greater emphasis on cooperation, relationships, and peace; also referred to as an ethic of care. The cultural feminism tries to find differences between men and women, based on biological differences in reproductive capacity. It seeks to validate feminine attributes that have been systematically undervalued within a patriarchal society. It also highlights the conflict between women and men, but reflects the variation of culturally created rather than biologically innate (Lewis, 2021)

Zhang, (2021), stresses that humans and nature must live in harmony to maintain ecological balance and sustainable development. He insists that women are closer to nature than men are. It observes women rights and empowerment that are related to political, economic, social and cultural factors, which benefit all living creatures. Women can reproduce and create a life, just like nature. For example, women create humans; they raise children and feed them. (Lagarde, 2021), observed and clarified that the only way to save the environment is through the destruction of male power by women.

2.2 The state of female pupils' primary school attendance in schools of Bulamagi sub – county, Iganga district, Uganda.

2.2.1 Education in Uganda

As enshrined in Sustainable Development Goal 4; the entire world is working towards ensuring inclusive and equitable quality education and promote lifelong learning opportunities for all by 2030. It is envisaged that all girls and boys should complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes (United Nations, 2015).

Education is considered a fundamental human right and the government of Uganda views education as part of the solution to reducing poverty (Global Partnership for Education, 2019b). The goal is to provide equitable access to quality and affordable education for everyone (Global Partnership for Education, 2019b).

The education system has a structure of two years' pre-primary school, seven years' primary school, four years' lower secondary school, and two years' upper secondary school. The education sector faces many challenges, including a high level of teacher and student absenteeism, weak school-level management structures, inadequate availability of learning materials and large class sizes (Ministry of Education and Sports, 2016).

2.2.2 School absenteeism in Uganda

School attendance is the daily or regular learner participation in school activities (Kayendeke P., 2019). Through regular school attendance, learners get to access consistent educational support for their academic attainment (Sekiwu D., 2019).

UNESCO (2015) also reveals that in the whole country, the worst level of poor school attendance is in Eastern Uganda – in Butaleja District – with a shocking rate of 70% of pupil absenteeism.

This study is assumed to be of utmost importance, since every school day counts in a child's life, and thus a missed school day is a lost opportunity for pupils' learning, growth and development (UNESCO, 2015).

The study was intended to establish the rate of school absenteeism especially by the girl child in the primary schools of Bulamagi subcounty in Iganga district of Uganda with a fear that the rate could not be very different from that of Butaleja district since they are all in the Eastern region.

2.3 To find out the available menstrual health activities and measures in primary schools of Bulamagi sub – county, Iganga district, Uganda

2.3.1 Knowledge about menstruation

Many studies have been carried out and completed with findings showing that poor menstrual health is a key factor associated with anxiety among girls and with missing school or class. Miiro et al, (2019), carried out a study about the management of menstruation among the secondary school girls of selected schools in Wakiso district and advised that an effective intervention was needed to address the lack of knowledge of puberty and menstruation and the social environment (to reduce stigma), as well as practical methods to enable girls to better manage her periods (i.e. pad provision, education about effective pain management, and improvements to school toilet facilities).

In another study by Kansiime et al (2020) in secondary schools of Entebbe about the preparedness and knowledge about the menstrual cycles, it was discovered that many adolescent girls were ignorant of their plight. Many of them didn't know how to track days of their menstrual cycles. Some of them confessed coming to school unprepared and their uniforms would get soiled. Sometimes, they could ask for a pass out to go back home during their periods.

Many girls and women globally lack the knowledge, materials and facilities for safely managing menstruation without stigma. Adequate menstrual hygiene management (MHM) is defined as, using clean menstrual management material to absorb or collect menstrual blood, that can be changed in privacy as often as necessary for the duration of a menstrual period, using soap and water for washing the body as required, having access to safe and convenient facilities to dispose of used menstrual and management materials as well as understanding what to do once their menses appear monthly (Ngomane T. & Sebola M.P , 2023).

Brown N, et al (2022) conducted a study among the girls in elementary schools in the UK which evaluated a multicomponent menstrual health intervention that addresses individual, behavioural and environmental barriers to good menstrual health and school attendance. The study population are students in peri urban secondary schools, which is important given the recognised importance of girls' secondary education to future development, and evidence that school absenteeism due to menstruation is problematic for secondary school girls.

The intervention involved girls to equip them for sustainable changes in menstrual management which depends on addressing stigma about menstruation. The conclusions were limited due to the lack of a control group, which means that the improvements seen in knowledge, school attendance and well-being may reflect the girls being older at end line or differences in attendance in different terms (Kansiime C, *et al*, 2020)

In this study, one area of focus was to establish the girls' knowledge about menstruation cycles, menstrual period management and sustainable school attendance among the girls of upper primary in the primary schools of Bulamagi subcounty, Iganga district, Uganda.

2.3.2 Water, Sanitation and Health (WASH) Facilities in Schools and school attendance

2.3.2.1 Access to water

The Government of Uganda recognizes menstrual health and hygiene as a very critical issue that limits the participation of women and girls in education and development processes. It also remains a challenge faced by adolescent girls in Uganda with some of them opting to remain home or escape from school and go home whenever they are in their menses. The Ministry of Education and Sports (MOES) in 2015 issued a set of guidelines to all schools specifying the actions to take in enabling school girls of age to manage their menstrual health.

In their study, Kansiime C, *et al*, (2020) established that at Secondary level, of all the sampled schools in Wakiso, 59% have regular access to water at school and in communities, 93% of schools do not have latrines for children living with disabilities, less than 50% of schools have washrooms while less than 10% have the washrooms in good conditions.

Majority of women and girls lack access to appropriate sanitation facilities. Government and a small handful of NGOs at the national and regional level have offered programs to support improved sanitation in schools. However, few of these programs have an MHM component.

There is growing interest and intention to address MHM through governmental action, as demonstrated by Policy. This study was therefore undertaken to find out the Water Sanitation and Health facilities in the primary schools of Bulamagi subcounty to enable girls manage their menstrual periods while continuing with schooling.

2.3.2.2 Presence of changing rooms

While conducting a study on, “*Menstruation: science and society*,” based in Zambia Chinyama et al. (2019), observed that; girls need a facility where even when they are at school they have a room where they can change their pad, wash themselves, and feel comfortable enough when they sit in class. So, it is important to have the facilities first because these facilities will provide an enabling environment for the girl to stay in school. The study findings showed that girls in Zambia find it difficult to manage their menses at school because they do not feel comfortable using school toilet facilities, which often lack soap, clean toilets, clean water, and privacy.

The study was therefore undertaken to ascertain the presence and effectiveness in the utilization of confidential changing rooms in the primary schools of Bulamagi subcounty, Iganga district to manage their menstrual periods.

2.3.2.3 Access to and use of menstrual materials.

In their separate studies, Kansime C, et al, (2020) reported that the proportion of girls using manufactured menstrual materials exclusively (i.e., reusable or disposable pads, tampons or menstrual cups) during their LMP increased from 73.0% at baseline to 89.1% at end line. At end line, most girls (82.5%) reported using reusable pads during their LMP compared with 18.5% at baseline. There was weak evidence of a decrease in reported leakage of blood through their clothing during their Last Menstrual Period, LPM (47.4% at baseline vs 35.3% at end line. However, there was no evidence of a difference in the proportion of girls reporting staining their underwear during their LMP (23.4% at baseline to 27.3% at end line. There was no evidence of intervention effect moderation by age or school. With this background, this study was undertaken to find out the rate of access to menstrual material and their effective usage among the girls in upper primary classes of Bulamagi sub county, Iganga district, Uganda.

A study commissioned by the Netherlands Development Organization (SNV) through the performance monitoring group in 2017 indicated that Access to safe and affordable sanitary materials could contribute to reduction of infections. This could have cascading effects on overall sexual and reproductive health, including reducing teen pregnancy, maternal outcomes, fertility school absenteeism.

According to Kayendeke P., Itaaga N., Genza M., & Gyaviira C. (2019), while undertaking a study on menstrual health management among the secondary girls of Naweeyo subcounty, Butaleja district, it was reported that the vast majority of women and girls there use homemade alternatives to manage their menstruation. The government and CSOs have trained learners and teachers on how to make reusable pads. The challenges persist in terms of quality and standards of MHM products used including distribution challenges. This study was thus conducted to find out whether girls in upper primary classes of Bulamagi subcounty were also equipped with the skills of making and using these homes-made alternative menstrual products.

2.3.2.4 Menstrual Waste disposal

The disposal of menstrual waste was another preoccupation of this study. The researcher desired to find out the different ways in which they disposed of the materials that they use to manage their menstrual periods.

Under the Draft National Strategic Plan for Menstrual Health and Hygiene 2021 – 2025; the Ministry of Education and Sports demands that every school should have in place a facility for disposing of menstrual materials used by the girls and female staff members. However, the study by Miiro, et al, (2019) revealed that 80% of female respondents in the MHM situation analysis reported disposing off their pads in latrines, and similarly, 80% of public schools do not have incinerators.

So, the researcher wanted to find out the different ways in which the girls and female teachers were disposing off their used menstrual materials without stigma, shame and fear to attend school regularly.

2.3.2.5 Access to other sanitation facilities

The ministry of education under its program of; “Water, Sanitation and Hygiene in Schools, National Standards in Uganda,” recommended that; every school had to have clearly segregated toilets or pit latrines for staff, pupils by gender as well as those for pupils with

disabilities. These sanitation facilities especially for the females had to be equipped with garbage bins with lids to enable them dispose of their used menstrual materials.

Similarly, the Ministry also demands the full- time presence of water and soap for the female members of the school community to use and wash after changing their panties and pads during their menses without worrying, fear or stigma that could keep them away from school.

However, the Wakiso study in secondary schools by Kansiime C, et al, (2019) found out that only 86% of the sampled schools had separate toilet facilities for boys, girls and teachers. This meant that the rest of the schools (14%) had inadequate and unsegregated toilet facilities that were unsafe for use by the female members of the school community during their menses.

Like the study by Kansiime et al (2019), the one of Baleke C, *et al* (2023), stressed that on top of the inadequate and unsegregated toilet facilities, there is hardly a steady water supply therein. This left the female members of the school community without water to use from washing after changing their menstrual materials while at school, hence forcing them to stay away from school during their menses.

This study therefore was undertaken to establish the presence, adequacy and segregation of toilet facilities in the schools of Bulamagi Sub county worthy safely keeping girls in school even during their menstruation periods.

2.3.2.6 Access to clinical care

In their study Kansiime C, et al, (2020) also observed that most girls reported pain during the menstruation at both baseline and end line (74.3% and 71.0%, respectively). Among these girls, there was evidence of an increase in the proportion who reported using painkillers during their LMP (46.7% at baseline to 60.8% at end line. There was evidence of an increase in the proportion of girls who reported using effective pain relief method during their LMP (76.4% at baseline to 91.5% at end line.

Misare, W. O. & Simatwa E. M.W. (2024) as well as Kaur, R., Kaur, K., & Kaur, R. (2018), agreed in their separate studies that girls get inadequate clinical care when they experience menstrual health problems such as premenstrual syndrome, painful menstrual periods, irregular menstrual periods and excessive bleeding. This affects girls in their well-being,

including their confidence, shame, stigma and self - esteem thus Psychological distress resulting from stigma and bullying.

Findings of the same study also confirmed that non-pharmacological methods of pain relief were popular and effective. Girls had been taught how to do exercises to relieve pain and it worked for them so, the last time, they didn't use painkillers but managed their periods by doing exercises and using reusable pads which had provided.

This study therefore aimed at replicating the findings of Kansime C, et al, (2020) to the girls in upper primary classes of Bulamagi sub county, Iganga district, Uganda. The researcher needed to find out whether the participants of this study also experienced pain during their menses and the different ways they were equipped with to manage the same without missing school.

3. Effects of menstrual health management practices on pupils' attendance in primary schools of Bulamagi subcounty, Iganga district, Uganda.

3.1 Menstrual health knowledge and school attendance

In the study by Miiro et al (2018) as well as that of Chamberlain K., (2019), it was established that the increase in school absenteeism among girls is partly attributed to starting their periods. The 2020 situational analysis report by the Ministry of Education and Sports, further indicated that more than half of girls that enroll in primary one dropout before sitting their Primary Leaving Examinations mainly because of menstrual challenges such as inability to afford sanitary products such as pads for instance, 77% of girls in upper primary were reported to have missed 2 – 3 days of school due to menstrual-related challenges. The study then was intended to find out whether some girls In Bulamagi subcounty schools were also missing schools monthly due to; ignorance, myths and misconceptions about menstruation and its management.

3.2 Water, Sanitation and Health (WASH) Facilities in Schools and school attendance

3.2.1 Access to water

In Uganda, the majority of women and girls lack access to appropriate sanitation facilities. Government and a small handful of NGOs at the national and regional level offer programs to support improved sanitation in schools; however, few of these programs have an MHM component. The Ministry of education in its WASH situational report of 2020 reported that 59% of the pupils in the schools covered had regular access to water at school and in

communities, 93% of schools did not have latrines for children living with disabilities, less than 50% of schools had washrooms while less than 10% had the washrooms in good conditions.

There is growing interest and intention to address MHM through governmental action, as demonstrated by Policy with a hope that it will reduce the rate of absenteeism among the girls of menstrual age. Relatedly, this study was conducted to find out whether there were girls that missed school during their monthly menstrual periods due to the inadequate or poor sanitation facilities in the Primary schools of Bulamagi sub county, Iganga district.

3.2.2. Presence of changing rooms.

As reported by Chinyama et al. (2019), girls who participated in this Zambia – based study found it difficult to change their menstrual materials like nickers, pads or tampons during their menses because they lacked separate changing rooms. This study therefore was conducted to find out whether schools in Bulamagi Primary schools had changing rooms for the girls and female staff members to change their menstrual materials from.

3.2.3. Access and Use of Menstrual Products

Kansiime C, et al, (2020) in their study based in selected secondary schools of Wakiso district reported that many of the girls participating in this study were using manufactured menstrual materials like pads, tampons and menstrual cups. On the contrary, Kayendeke P., et al (2019) while carrying out a study in Naweeyo subcounty of Butaleja district found out that most girls and women lacked manufactured menstrual materials and were innovatively using the home- made reusable pads to manage their menses. To be certain, the study was carried out to find out the materials that girls were using in the Primary schools of Bulamagi subcounty and how they could be helping them to regularly attend school.

3.2.4 Menstrual Waste disposal

The management of waste materials in a school plays a key role in the management of menstrual periods while continuing to attend school. However, this varies from region to region and school to school. For instance, Miiro, et al, (2019) reported that; 80% of female respondents in the MHM situation analysis reported disposing off their pads in latrines, and similarly, 80% of public schools did not have incinerators. Therefore, this study was conducted to find out the means available to the girls of upper primary in Bulamagi subcounty in terms of disposing of their used menstrual materials and continuing to attend school.

3.2.5. Access to other sanitation facilities

As reported in the study by Kansiiime et al (2019) and the one of Baleke C, *et al* (2023), it was observed that on top of the inadequate and unsegregated toilet facilities, there is hardly a steady water supply therein. This left the female members of the school community without water to use from washing after changing their menstrual materials while at school, hence forcing them to stay away from school during their menses.

This study therefore was undertaken to establish the presence, adequacy and segregation of toilet facilities in the schools of Bulamagi sub county worthy safely keeping girls in school even during their menstruation periods.

3.2.6. Access to clinical care

Misare, W. O. & Simatwa E. M.W. (2024) investigated the effect of MHM on the girl child's academic performance in Mbita Subcounty, Kenya had similar findings in this respect with Kaur, R., et al (2018), who had a study on practices and challenges faced by girls and women in developing countries. They contended that girls get inadequate clinical care when they experience menstrual health problems such as premenstrual syndrome, painful menstrual periods, irregular menstrual periods and excessive bleeding. This affects girls in their well-being, including their confidence, shame, stigma and self - esteem thus Psychological distress resulting from stigma and bullying.

Therefore, this study was undertaken to find out the availability and quality of menstrual clinical care for those girls who experience challenges during their menses in the upper primary classes of Bulamagi Sub county, Iganga district and how it affects their regular attendance of schools.

Gaps in Literature

Three studies reviewed in this chapter, namely; Kansiiime C, et al, (2020), Baleke C, *et al* (2023) and Miiro et al (2018) were all studying menstrual health management activities among the secondary schools. This study was therefore to find out more about the menstrual health management activities and practices among the Upper Primary school girls of Bulamagi sub county.

Similarly, while Kayendeke et al (2019) based their study in Naweeyo subcounty, Butaleja district; a typically rural area, Kansiime C, et al, (2020) and Miiró et al (2018) carried out theirs in the urban areas of Nansana and Entebbe municipalities respectively. Therefore, this study was undertaken to find out the MHM activities and practices in girls of upper Primary classes of Bulamagi subcounty, a peri urban area and how they affect their school attendance.

Brown N, et al (2022) , Kaur, R., et al (2018) and Chamberlain K., (2019) also studied the same topic of Menstrual Health Management but based on the populations of the United Kingdom, India and United States of America which are more developed countries. This study therefore was aimed at studying the same topic but in Bulamagi sub county in a Least Developed country, Uganda.

CHAPTER THREE METHODOLOGY

3.0 Introduction

This chapter presents the methodology used in this study including; the research design, target population, sample and sampling techniques, instruments of data collection, data quality control, data analysis and ethical considerations.

3.1. Research design

According to Abayomi A.A.& Onanuga T. (2016) as well as Singh S., (2020), A research design is the arrangement of conditions for collection and analysis of data in a manner that aims to- combine relevance to the research purpose with economy in procedure. It is a plan that explains what data to gather, from whom, how, when to collect it and analyze it.

In this study, the researcher will use a Cross section survey design whereby samples of respondents will be selected to represent their respective categories in the data collection process. The Cross- section survey design will be used in order to simplify the data collection process since the researcher will deal with samples other than whole population. It is also considered suitable for studies that combine both qualitative and quantitative approaches.

3.2. Target population

According to Ahmad N., Astifar F. A & Razak N.A.A., (2023), a target population refers to all members of a real or hypothetical set of people to which one wishes to generalize the results of the research. The population of this study will comprise of:

3.2.1 Head teachers

The researcher included head teachers in this study because they keep records of pupils on pupils' attendance of school. They are expected to be following up children's regular attendance in their respective schools.

3.2.2 Teachers

Teachers teach the pupils and they should be knowing how attend school especially the girls of menstrual age in the upper primary classes. They were therefore expected to give relevant information on how their menstruation affects the attendance of the girls in the upper primary classes.

3.2.3 Girls in upper primary classes

These are directly affected by the menstruation, its management and effects on their attendance of school. They are therefore expected to give relevant and first-hand information

informed they are, their experiences and ways of managing menstruation while continuing to attend school regularly.

3.3. Sampling and sampling techniques

3.3.1 Sample

According to Walters, W. H. (2021), a sample is a group of elements (people or objects) selected to take part in a study. These people are referred to as subjects or respondents in the specific study. This refers to the portion of all people selected to participate in the study (Taherdoost, 2020).

The study was based on a sample size of 209 respondents as was arrived at by following Krejcie, R.V. & Morgan, D. W. (1970)'s table of sample size determination at a 90% and 5% confidence level and margin of error respectively as shown in the table below.

Table 3.1. Sample of respondents per school

Category of the population	Population of study	Sample size	Sampling technique
Head teachers	05	05	Purposive
Teachers	62	56	Convenience
Girls in P.7	239	148	Simple random
Total	306	209	

Source: Krejcie, R.V. & Morgan, D. W. (1970).

3.3.2 Sampling techniques

The following sampling techniques were used in selection of respondents will be;

a) Purposive sampling technique

This will be used to select head teachers and the students. Head teachers will be the heads of the sample schools while students will be selected basing on their sex. 15 will be boys while 15 will be girls. This is intended to cater for gender differences in data collection.

b) Convenience sampling

The researcher will use the convenience sampling techniques to select teachers. The researcher will obtain a list of all the teachers in each of the 5 schools and then he will conveniently select the samples. The reason for using convenience sampling technique is to easily get information within the short time available from those included in the sample and hence to participate in the study.

3.4 Sampling procedure

Turner, D. P. (2020), takes a sampling procedure as a process of selecting a portion of the entire population to represent the others in the study. This is augmented by Hubbard (2017) who said that it's practically impossible to include every human being in the target population and thus it is necessary then to take use of an accessible population as a subset of the target population or group. The target population is "who" the researcher wants to study and accessible population is who the researcher can "actually" study (study population).

Still Hubbard (2017) was of the view that resource restrictions such as budget constraints, geographical location and time contribute to the need for limited research population so as to increase reliability. Hence following the above view, research had to be conducted in five out of the nine accessible day mixed government -aided primary schools in Bulamagi sub-county.

The researcher used probability sampling techniques such as the; simple random sampling technique so as to give everyone in the target population equal chance to participate in the study and also helped to avoid biasness in determining the study population. Simple random sampling was applied to select the 209 respondents from all the five UPE selected schools in Bulamagi sub county in Iganga district and these included: Canon Ibula P/S(School A) from Iwawu parish, Bubaka P/S(School B) from Bulamagi parish, Bulowoza P/S(School C) from Bulowoza parish, Buyubu P/S (School D) from Bwaanalira parish and Bukoyo P/S(School D) from Bukoyo parish. These schools were selected also factoring in the nature of the foundation bodies as they were; Anglican (the first two), community, Roman Catholic and Moslem founded schools respectively.

Simple Random sampling was used, specifically to identify the individuals who, finally participated in the study from the population category. This was done guided by the calculated sample size from each category of the population. Here therefore, each person from the Population category was given equal chance of being chosen to be among the sample size. The simple random sampling was carried out using the lottery method and random numbers.

A research method, according to Firdaus, Zulfadilla, Caniago F. (2021), is a systemic way that one uses in the collection of data necessary in the process of identifying and explaining the phenomena being investigated. So, in this study, the researcher opted for a descriptive research method because it gives a description of the state of affairs as it exists at present and

with this method, the researcher has no control over the variables but can only report what has happened or what is happening.

3.5. Instruments of data collection

The following instruments were used in data collection

3.5.1 Questionnaire

These were administered to the pupils and teachers. They were made up of both open and closed ended items which were filled by the respondents themselves. The reason for using questionnaire is that they would give respondents enough time to fill given the busy schedule of their official duties.

3.5.2 Interview guide

This will be administered to the head teachers orally. It was set comprising of structured item that were filled by the researcher himself. The reason for using interview guide is that it allowed to collect enough qualitative and quantitative data from the head teachers who would find it difficult to sit and complete the questionnaires.

3.5.3 Response rate

After collecting back all the questionnaires, some respondents had not completed and some had completely not answered anything therein. These were discarded and the rest considered to compute the questionnaire response rate. Of the sampled 56 teachers, 48 of them representing 85.7% as well as 139 of the sampled 148 girls representing 91.2% were able to complete the questionnaire. This a mean response rate of 88.5% which was sufficient for meaningful data analysis to take place. The analysis also considered the qualitative responses of all the five head teachers of the sampled primary schools

3.6. Data quality control

3.6.1. Validity

According to Rozali, M. Z, Puteh S., Yunus, F.A.N, Hamdan, H. Latif ,H. F. M (2022), validity refers to the accuracy of the instrument in collecting what it is intended to collect. In order to ascertain the validity of the instruments, the researcher first presented the instruments to the supervisor for verification. Secondly, the researcher then first pilot – studied the instruments by administering them to other head teachers, teachers and pupils in non-participating schools before they are administered to the real samples. The findings from the pilot study were used to ascertain the validity of the instruments.

3.6.2. Reliability

Rozali M. Z et al (2022), take reliability of the instrument to be the ability of the instrument to collect similar response when administered to the same respondents more than once. The researcher measured the reliability of the instruments using test-retest method whereby one instrument was administered more than once to the same category of respondents. The consistence of the findings from the two intervals were then used to determine the reliability of the instruments.

3.7. Data analysis

The data was analyzed both qualitatively and quantitatively. Quantitatively. The data was first edited for completeness, proofread and coded to eliminate all the errors and omissions. The data was then be computed to frequencies and then converted to percentages. Qualitative data analysis was involved in making a detailed and in-depth discussion of the findings.

3.8. Ethical consideration

The researcher first of all ensured confidentiality of the respondents in the data collection process. Their names and other personal information were not recorded anywhere on the interview guide or on the questionnaire form. Privacy of the respondents had to be protected. The researcher also first sought prior consent whereby respondents were first informed about the benefits and probable risks involved in their participation in this study.

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND DISCUSSION

4.0 Introduction

In this chapter the results of the study are presented and discussed. The purpose of the study was to find out the effects of menstrual health on pupils' attendance in primary schools of Bulamagi subcounty, Iganga district, Uganda.

The data were analysed around key objectives of the study, thus to; find out the state of female pupils' primary school attendance; find out the available menstrual health activities and measures in primary schools and establish the effects of menstrual health management practices on pupils' attendance in primary schools of Bulamagi subcounty, Iganga district, Uganda.

4.1 Demographic Characteristics

4.1.1 Gender of respondents

Table 1: Gender of respondents

Table 1 below was drawn to show the gender of all the P.7 girls and their teachers that were sampled.

Category	Frequency	Percentage (%)
Male	25	13.37
Female	162	86.63
Total	187	100.00

Source: Primary data (2024)

From Table 1 above, it is clearly shown that majority of the respondents in the study were female 162 (86.63%) while their male counterparts were 25 (36.7%). Data presented in the table still indicates only 187 respondents provided in the tabulated data, showing that some of the questionnaires (22) were not received back from the respondents.

It should be noted the Primary seven girls formed the bulk of the respondents because they were presumed to provide better information about MHM activities in Primary schools than the boys. The 25 male respondents were the teachers of Primary seven who were chosen to provide insight into the attendance of girls while in and out of their menses.

4.1.2 Age of respondents

Table 2: Age of respondents

Age in years	Frequency	Percentage (%)
10 -15	86	45.99
16 – 20	53	28.34
21 – 25	2	1.07
26 – 30	8	4.28
31 – 35	9	4.81
36 – 40	8	4.28
41 – 45	6	3.21
46 – 50	8	4.28
51 – 55	4	2.14
56 – 60	3	1.60
TOTAL	187	100.00

Source: Primary data (2024)

The findings in Table 2 indicate that majority of the respondents were in the age group of 10-15 who were 86(45.99%), followed by 16-20 who were 53(28.34%), 31 – 35 that were 9(4.81%), 26 – 30, 36 -40 and 46 -50(8, 4.28%) each as well as 51 -55(4,2.14%), 56 -60 (3,1.6%) and 21 -25 with 1.07 %.

The bulk of the respondents were in the age range of 10-15 indicating that P.7 girls were the majority of the respondents and they fall in that in that age range. This age bracket was followed by those aged 16 – 20 who were some P.7 girls that for some reasons delayed to complete the Primary school cycle.

Teachers aged 31- 35 were ranked next amongst the respondents. These were basically the certificate holding teachers of the Upper primary section and specifically the P.7 class. Notably, the age brackets of 56 -60 and 21 – 25 were the least prevalent of all the respondents. Commonly, these are supposed to be teachers who are about to retire as well as those who have just joined the teaching profession who are rarely allocated to teach Primary seven.

4.1.3 Marital status of respondents

Table 3 shows the Marital status of the respondents

Category	Frequency	Percentage (%)
Widowed	13	6.95
Married	43	23.00
Single	131	70.05
Total	187	100.00

Source: Primary data (2024)

From above it is seen that majority of the respondents in the study were single 70.05% followed by the married ones with 23% and a least representation was of the widowed with 6.95%.

The singles were the majority because it also represents the percentage of the P.7 pupils who are single and the given married percentage is for the heads, teachers and some parents.

4.1.4 Education level of the respondents

Table 4 shows the level of education of the respondents

Category	Frequency	Percentage (%)
Primary	131	70.05
Secondary	41	21.93
Tertiary	15	8.02
Others	00	0.00
Total	187	100.00

Source: Primary data (2024)

In table 4, it is seen that majority of the respondents had a primary level of education (70.05%), followed by the secondary level (21.93%) as well as those with tertiary level (8.02%) and none with other forms of education level.

4.1.5 Qualification of respondents

Table 5 shows the qualifications of the respondents.

Category	Frequency	Percentage (%)
Master's degree	03	1.60
Bachelor's degree	15	8.02
Diploma	20	10.70
Certificate	18	9.63
None	131	70.05

Total

187

100.00

Source: Primary data (2024)

Majority of the respondents shown in table 5 above not qualified at all (70.05%). These were followed by the diploma holders (10.70%), followed by Certificate holders at 9.63%, bachelor's degree holders were 8.02% and least of all were the master's degree holders at 1.6%.

Findings show that the majority of the respondents were not employed at all and these were the P.7 girls who were still attending the Primary school. These were followed by the diploma and grade three teachers' certificate holders respectively.

4.2.6 Type of employment of respondents

Table 6 shows the type of employment of the respondents

Category	Frequency	Percentage (%)
Permanent	51	27.27
Temporary	5	2.68
None	131	70.05
Total	187	100.00

Source: Primary data (2024)

Findings in Table 6 show that majority of the respondents were not employed at all (70.05%) followed by 27.27% in permanent and 2.68% in temporary employment. These findings show that majority of the respondents were the girls in Primary seven who were not yet employed followed by the teachers on the government payroll as well as those teachers who are not yet on government payroll.

4.2 Objective one: Female pupils' attendance in primary schools.

The first objective of the study was to find out the state of female pupils' primary school attendance in schools of Bulamagi sub – county, Iganga district, Uganda and to achieve this, a questionnaire with five items was issued. Following a Likert scale; where 5= strongly agree (SA), 4= agree (A), 3= undecided (U), 2= disagree (D) and 1= strongly disagree (SD), the responses were as tabulated below: -

Table 7 shows the trends of female pupils' attendance in primary schools.

Female pupils' attendance in schools of Bulamagi sub – county, Iganga district, Uganda		5	4	3	2	1	T'L
a)	I attend school daily for the whole day	29 (15.50%)	33 (17.65%)	89 (47.60%)	20 (10.70%)	16 (8.56%)	187 (100%)
b)	I have ever escaped from school before the school day ended.	98 (52.41%)	41 (21.93%)	26 (13.90%)	14 (7.44%)	8 (4.32%)	187 (100%)
c)	I always attend school when I am not in my monthly periods	122 (65.24%)	31 (16.58%)	15 (8.02%)	13 (6.95%)	6 (3.21%)	187 (100%)
d)	I always attend school even when I am in my monthly periods	7 (3.74%)	11 (5.88%)	23 (12.31%)	64 (34.22%)	82 (43.85%)	187 (100%)
e)	I always miss school for some days when I am in my monthly periods	119 (63.64%)	55 (29.42%)	5 (2.67%)	5 (2.67%)	3 (1.60%)	187 (100%)

Findings from Table 7 Female pupils' attendance in schools of Bulamagi sub – county, Iganga district, Uganda show that five items were investigated on.

In the first item, the researcher needed to know whether p.7 girls were attending school daily for the whole day. To this, 15.50% strongly agreed, 17.65% agreed, 47.60% were not sure, 10.70% disagreed and 8.56% strongly disagreed. Here, majority of the respondents were not sure of attending school daily for the whole day.

For the second item of having ever escaped from school before the school day ended, 52.41% of the respondents strongly agreed, 21.93% agreed, 13.90% were not sure, 7.44% disagreed while 4.32% strongly disagreed. In this aspect, majority of the respondents either agreed or strongly agreed to have ever escaped from school before the school day ending.

This finding is in tandem with the qualitative finding from the interview guide in which one of the head teachers stated;

“Escaping from school is very common here. During the market day (every Thursday) in the trading centre, most boys will either be absent or escape before the school day ends. However, absenteeism for the girls is not on any particular day.”

(Head teacher – school B)

So, from the above comment it is very likely that some girls are escaping from school to go home and manage their menstruation periods.

With regard to the third item of, always attending school whenever not in their monthly periods; 65.24% of the respondents strongly agreed, 16.58% agreed, were not sure, 6.95% disagreed and 3.21% of them strongly disagreed with it. As seen above, a majority of the respondents agreed that they had always attended school whenever they were nit in their periods although some of them disagreed with this observation.

When asked in the fourth item to comment whether they always attend school even when in their monthly periods, 3.74% of the respondents strongly agreed, 5.88% agreed, 12.31% were not sure, 34.22% disagreed and 43.85% strongly disagreed with it. In this aspect, most of the girls disagreed with always attending school while in their periods.

Merging the above findings with the comment from another head teacher below confirms another observation;

“Commonly, whenever our girls are in their periods, they skip school. So, every month a girl of age will miss school for some days. In some cases, some of these girls do not have fitting knickers leading to leakages that stain their dresses and as such cannot comfortably stay in school.”

(Head teacher – school C)

The head teacher of school C was, in her comments, confirming the finding that some girls miss school especially during their monthly periods.

Lastly, with the item of always missing school for some days when in their monthly periods, 63.64% of the respondents strongly agreed, 29.42% agreed, 2.67% were not sure, 2.67% disagreed and 1.60% of them strongly disagreed with it.

4.3 Objective 2. To find out the available menstrual health facilities and measures in primary schools of Bulamagi sub – county, Iganga district, Uganda.

The second objective of the study was to find out the available menstrual health activities and measures in primary schools of Bulamagi sub – county, Iganga district, Uganda. To meaningfully investigate this, eight aspects were included in the questionnaires to which different categories of the population responded using the Likert scale explained earlier.

Table 8 shows the available menstrual health facilities and measures in primary schools

2.The available menstrual health facilities and measures in primary schools of Bulamagi sub – county, Iganga district, Uganda.	5	4	3	2	1	T'L
a) On my first menstrual period, I knew what to do.	2 (1.07%)	6 (3.21%)	3 (1.61%)	43 (22.99%)	133 (71.12%)	187 (100%)
b) We have enough and separate toilet or latrine stances for us to use while in our monthly periods so as not to miss school.	108 (57.75%)	59 (31.55%)	4 (2.15%)	11 (5.88%)	5 (2.67%)	187 (100%)
c) We have a changing room at school for use during our monthly periods.	13 (6.95%)	10 (5.35%)	1 (0.53%)	35 (18.72%)	128 (68.45%)	187 (100%)
d) There is enough water for us to use during our monthly periods while at school.	5 (2.67%)	15 (8.02%)	3 (1.60%)	49 (26.21%)	115 (61.50%)	187 (100%)
e) The school provides us with sanitary products like pads for emergency use while at school.	2 (1.07%)	8 (4.28%)	0 (0.00%)	41 (21.93%)	136 (72.72%)	187 (100%)
f) Our female teachers are helpful to us during our monthly periods while at school.	0 (0.00%)	3 (1.60%)	2 (1.07%)	33 (17.65%)	149 (79.68%)	187 (100%)
g) Our male teachers are helpful to us during our monthly periods while at school.						
h) Our male class mates (boys) are helpful to us during our monthly periods while at school.	12 (6.42%)	11 (5.88%)	5 (2.67%)	38 (20.32%)	121 (64.71%)	187 (100%)

Source Primary data, 2024

As seen from table eight the respondents gave varying opinions per investigated aspect.

Aspect 1 sought to establish the respondents' knowledge about menstruation on their first menstrual period where; 71.12% of the respondents strongly disagreed, 22.99% disagreed, 3.21% of them agree, 1.07% strongly agreed and 1.61% were not sure. In this, a total of 94.11% respondents disagreed while a total of 4.28% agreed with having knowledge about menstruation on their menarche (first menstrual period).

And this is not a stand alone finding as it corroborates well with the qualitative result from the interview with one of the head teachers as stated below;

“There have been some cases of girls beginning their periods unknowingly. By the time some of these girls come to the office, their dresses are always in a mess because they did not know what to do, hence; the ignorance and poor management of their menarche.”

(Head teacher – School D)

A combination of the qualitative findings from table 8 and the comments of the head teacher confirm that some girls reach and experience their first monthly periods without knowing what to do.

In aspect two, the researcher wanted to establish whether there were enough and separate toilet or latrine stances for the girls to use while in their monthly periods so as not to miss school. Here, 57.75% of the respondents strongly agreed, 31.55% agreed, 5.88% disagreed, 2.67% strongly disagreed as 2.15% were not sure. It meant that a total of 89.9% agreed while 8.55% of them disagreed with a presence of enough and separate latrine stances for use in their schools.

For the third aspect of having a changing room at school for use during monthly periods; 68.45% of the respondents strongly disagreed, 18.72% disagreed, 6.95% strongly agreed, 5.35% agreed and 0.53% of them were not sure. A total of 87.17% disagreed and 12.3% agreed with the presence of a changing room for use during menstruation in their schools.

This was also confirmed by another head teacher in his words during the interview;

“Given the limited infrastructure in place, the few rooms we have are used as classrooms and the head teacher’s office only. There is no room to set aside for the changing room and the girls in their periods only use their segregated latrine stances.”

(Head teacher- School A)

It is both qualitatively and quantitatively confirmed that majority of the primary schools in Bulamagi subcounty have such limited infrastructure that they cannot have separate changing rooms for girls to use.

In the fourth aspect of; presence of enough water to use during monthly periods while at school; 61.50% of the respondents strongly disagreed, 26.21% disagreed, 8.02% agreed 2.67% strongly agreed as 1.60% were undecided. This meant that a total of 87.71% disagreed while 10.69% of them agreed with the presence of enough water for girls to use at school while in their monthly periods.

As it was observed, most schools in Bulamagi subcounty entirely rely on borehole water which is actually shared with the neighbouring communities. This in itself makes it unsafe for confidential use by the girls in their menstruation periods while at school.

With regard to the fifth aspect of; provision of sanitary products like pads for emergency use while at school, 72.72% of the respondents strongly disagreed, 21.93% disagreed, 4.28% agreed, 1.07% strongly agreed while none was not sure. It showed that a total of 94.65% disagree and 5.35% of the respondents agreed with their schools providing sanitary pads for emergency use during menstruation while at school.

In a verbal utterance, one of the girls refuted schools providing any assistance to them when she said, *“We do not get any pads from school. By the time we come to school, we equip ourselves with pads from home, home - made reusable pads, rags cotton wool and other locally collected absorbents.”*

This rhymed well with the comments of a female head teacher who opined that;

“As a school we try whenever the budget can allow to have some emergency sanitary pads with the Senior Woman Teacher. However, in most times girls come for help when even the SWT does not have any pads to give them.”

(Head teacher – school C)

These observations meant that girls in their monthly periods can only be secure when they carry their absorbent materials from home to use while at school and this complicates their lives since even the provision at home is not sufficient.

About female teachers being helpful to girls during their monthly periods while at school; 79.68% of the respondents strongly disagreed, 17.65% agreed, 1.60% agreed, 1.07% were undecided while none strongly agreed. By implication, a whole 97.33% disagreed, 1.60% agreed as 1.07% of them were undecided. In this aspect, majority of the respondents did not find their female teachers helpful in their MHM endeavour at school. It was only during times when the school budget could facilitate the SWT that the girls could be helped to manage their menstrual periods while at school.

Regarding the seventh aspect of; male teachers being helpful to during monthly periods while at school.; 35.29% of the respondents strongly disagreed, 31.55% disagreed, 18.18% strongly agreed, 10.70% agreed as 4.28% were not sure. The general observation in this aspect was that a total of 66.84% and 28.88% of the respondents disagreed and agreed with the male teachers being helpful to the during menstruation respectively. This meant that majority of the male teachers were not helpful to girls during their menstruation periods with a few of them occasionally offering advice about how to manage the menses.

Lastly, in the aspect of male class mates (boys) being helpful to girls during monthly periods while at school; 64.71% strongly disagreed, 20.32% disagreed, 6.42% strongly agreed, 5.88% agreed and 2.67% were not sure. Majority of the girls, (85.03%) disagreed with girls being helpful to them during their menstruation periods. Actually, one girl was categorically anointed when she ranted;

“Those boys are another problem that we face during our menstruation periods while at school. They laugh, ridicule, belittle and call any girl in her periods using very demeaning nick names. This disturbs a lot especially given that fact that no girl took a deliberate choice of undergoing monthly periods”

It was therefore clear that to most of the girls, their male classmates were not being any helpful to them in managing their monthly periods. Instead a majority of them were treating it as a laughable and shameful experience though a few of them were appreciated for helping especially in offering sweaters to girls whose dresses needed covering upon being soiled by menstrual leakages.

4.4 To establish the effects of menstrual health management facilities and practices on pupils' attendance in primary schools of Bulamagi subcounty, Iganga district, Uganda.

The third objective of this study was to establish the effects of menstrual health management practices on pupils' attendance in primary schools of Bulamagi subcounty, Iganga district, Uganda. In pursuit of this objective, seven items were included in the questionnaires to which the different categories in the sample responded as seen in the table below: -

Table 9 shows effects of menstrual health management facilities and practices on pupils' attendance in primary

Effects of menstrual health management practices on pupils' attendance in primary schools	5	4	3	2	1	T'L
a) I continue coming to school while in my monthly periods because there are enough separate toilets or latrine stances to use.	99 (52.94%)	53 (28.34%)	3 (1.60%)	22 (11.76%)	10 (5.35%)	187 (100%)
b) I continue coming to school while in my monthly periods because there is a changing room for use.	6 (3.21%)	18 (9.63%)	2 (1.07%)	34 (18.18%)	127 (67.91%)	187 (100%)
c) I continue coming to school while in my monthly periods because there is enough water to use.	7 (3.74%)	12 (6.42%)	3 (1.60%)	21 (11.23%)	144 (77.00%)	187 (100%)
d) I continue coming to school while in my monthly periods because our school provides us with emergency sanitary pads to use.	0 (0.00%)	5 (2.67%)	0 (0.00%)	33 (17.65%)	149 (79.68%)	187 (100%)
e) I continue coming to school while in my monthly periods because	2 (1.07%)	6 (3.21%)	4 (2.14%)	40 (21.40%)	135 (72.19%)	187 (100%)

our female teachers are helpful.						
f) I continue coming to school while in my monthly periods because our male teachers are helpful.	9 (4.81%)	17 (9.09%)	30 (16.04%)	49 (26.20%)	82 (43.45)	187 (100%)
g) I continue coming to school because our male class teachers (boys) are helpful to us during our monthly periods while at school.	5 (2.67%)	7 (3.74%)	8 (4.28%)	39 (20.86)	128 (68.45%)	187 (100%)

Findings from table 9 reveal a multitude of information about the effects of menstrual health management facilities and practices on pupils' attendance in primary schools of Bulamagi subcounty, Iganga district, Uganda.

In the first aspect of; continuing to come to school while in monthly periods because there are enough separate toilets or latrine stances to use; 52.94% of the respondents strongly agreed, 28.34% agreed, 11.76% disagreed, 5.35% strongly disagreed as 1.60% of them were not sure. For this aspect, a total of 81.28% of the respondents agreed while 17.11% of them disagreed with continuing to attend school because there were enough separate toilets or latrine stances to use.

This was even corroborated by one of the head teachers when he stated that;

“We have enough toile stances in our school compared to our enrolment. They are well separated and segregated along gender, level and disability.

We only have a current challenge of keeping them clean always and may be accommodating any increase in enrolment”

(Head teacher – School C)

These similar respondents from different segments of the sample confirmed that Primary school in this subcounty have enough latrine stances for their children to use comfortably at school even when they are in their monthly periods

In the second aspect of continuing to come to school while in monthly periods because there was a changing room for use; 67.91% of the respondents disagreed, 18.18% disagreed, 9.63% agreed, 3.21% strongly agreed and 1.07% were not sure. This meant that 86.09 of all the respondents disagreed with the presence of a changing room in their schools and only 4.28 were able to agree to it.

With regard to the third aspect of continuing to come to school while in monthly periods because there is enough water to use; 77.00% of all the respondents strongly disagreed, 11.23% disagreed, 6.42% agreed, 3.74% strongly agreed while only 1.60% were not sure. Most of the respondents; 88.23% disagreed while 10.16% of them agreed to the presence of enough water in schools for the girls to use during their menses.

To the aspect of; continuing to come to school while in my monthly periods because the school provides emergency sanitary pads to use; 79.68% of them strongly disagreed, 17.65% disagreed, 2.67% agreed. 0.00% strongly disagreed and no one was undecided. It meant that a total of 97.33% of the respondents disagreed and only agreed that their schools provide sanitary pads for use at school.

With regard to the aspect of continue to come to school while in monthly periods because the female teachers were helpful; 72.19% of the respondents strongly disagreed, 21.40% disagreed, 3.21% agreed, 1.07% strongly agreed and 2.14% were not sure. This implied that, a total of 93.59% of the respondents disagreed and 3.21% agreed that their female teachers were helpful to them in managing their menstruation periods.

In the sixth aspect of continuing to come to school while in monthly periods because the male teachers were helpful; 43.45 strongly disagreed, 26.20% disagreed, 9.09% agreed, 4.81% strongly agreed while 16.04% were not sure. This implied that of all the respondents; 69.65% disagreed, 13.9% agreed while 16.045 were not sure. Respondents in most schools confirmed that even when they approached the male teachers for help during menstruation, nothing was done for them. The ones who were not sure were basically those who had never even tried seeking help during menstruation from any male teacher. Those in agreement were from school A were an elderly Senior Man Teacher (SMT) was working closely with the SWT to advise and help girls during their menstruation period. This was even evidenced by the head teacher during the interview when he said that;

‘In our school we are lucky that both the SWT and SMT are mature, work together

and have been equally helpful to all pupils including the girls during their menstruation periods. Even when the SWT is absent the Senior Woman Teacher has always been handy to the girls''

So, it became clear that it is not common for male teachers to help girls in their menstrual periods meaningfully.

Lastly in terms of continuing to come to school because their male class mates (boys) were helpful during the monthly periods while at school; 68.45% of the respondents strongly disagreed, 20.8% disagreed, 3.74% agreed, 2.67% strongly agreed while 4.28% of them were not sure. This meant that; a total of 89.25% of the respondents disagreed while 6.41% agreed and 4.28 were actually sure whether boys could be helpful to them during their menstruation periods.

CHAPTER FIVE

DISCUSSION, CONCLUSION AND RECOMMENDATION

5.0 Introduction

This chapter presents the discussion, conclusions and recommendations based on the study findings presented. The purpose of the study was to find out the effects of menstrual health on pupils' attendance in Primary schools of Bulamagi Subcounty, Iganga district, Uganda

5.1 Discussion

The discussion of the findings was conducted objective by objective as laid down below: -

5.1.1 Research objective one

The first objective of the study was to find out the state of female pupils' primary school attendance in schools of Bulamagi sub – county, Iganga district, Uganda. To effectively investigate this, five items were embedded in the questionnaire to help the researcher get an insight into the trend of school attendance especially by the girls in Primary Seven in the responses were given based on a five - point Likert scale of; strongly agree (5), agree (4), not sure (3), disagree (2) and strongly disagree (1).

After analysing the findings in the five aspects, it was discovered that; escaping from school was very rampant in the schools selected for the study with its occurrence standing at a positive of 74.44% amongst the study respondents. It was discovered that escaping by the boys does not have a known trend except the one that takes place during the local market day with boys likely engaged in the market activities as confirmed by the head teacher of school B.

The girls on the other hand were found to be mainly absent from school on specific days of every month. It was found that girls were regularly attending school before their menstruation period. However, 78.07% of the respondents and the head teacher of school C CONFIRMED that many girls were not attending school during their menstruation periods which would cost them a number of days monthly.

The findings above agree with the theory of cultural feminism in which this study was anchored. According to Brooke Williams, 1975; Frances Chapman, 1971 and Elizabeth Diggs, 1972); the theory of cultural feminism attempts to claim that there are innate differences between women and men. That is why the reasons advanced by boys and girls for their

absenteeism are different. As the boys in one school are always absent so as to take part in market activities, the girls in the same school are missing school to manage their menstrual periods.

These findings also have a semblance with the findings of Eclof S., (2019), when he concluded that girls are less likely to be in school on days they are menstruating. This was part of his findings in the study titled; “Menstruation, Menstrual Cups and School Attendance: Evidence from a Randomized Trial in Uganda,” and based in secondary schools of Kamuli district, Uganda.

Similarly, to Kayendeke P., et al (2019); their study on Menstrual Health Management based in Nabweeyo subcounty, Butaleja district the girls here did not have access to factory made absorbents but were using homemade reusable pads to allow them continue attending school.

In a nutshell, just like; Kayendeke et al (2019), Brooke Williams, 1975; Frances Chapman,1971 and Elizabeth Diggs, 1972); girls in Bulamagi school were suffering from school absenteeism due to Menstrual Health Management related issues. Due to these challenges, many girls were losing valuable study time per month due to way they manage their menstruation periods.

5.1.2 Research objective two

The second objective of the study was to find out the available menstrual health facilities and measures in primary schools of Bulamagi sub – county, Iganga district, Uganda. Eight items were used to reach the findings that; some girls reach and experience their first monthly periods without knowing what to do.

It was also established that girls will continue attending school regularly whether they are in their monthly periods or not. This phenomenon was found more prevalent in schools with; separate clean, segregated toilet stances, changing rooms, enough water to use while at school during menstruation, and a reliable provision of emergency sanitary pads for use at school.

The other members of the school community also play a big role in girls continuing to attend school even during their monthly menstrual periods. It is seen the male classmates, the male teachers and the female teachers who are hostile to the girls in Menstrual Health Management, will force the girls to remain home whenever their menses appear.

These findings match what was highlighted in the; 2020 situational analysis report by the Ministry of Education and Sports in which it was asserted that menstrual challenges such as inability to afford sanitary products such as pads for instance lead to high rates of school absenteeism by the girls. For instance, 77% of Ugandan girls in upper primary were reported to have missed 2 – 3 days of school due to menstrual-related challenges.

Kansiime et al (2019) and Baleke C, *et al* (2023), observed that on top of the inadequate and unsegregated toilet facilities, there is hardly a steady water supply therein. The findings of these studies are an augmentation of the state of affairs in Bulamagi subcounty, Iganga district. In this subcounty, water scarcity has contributed highly to the absence of girls in upper primary classes whenever their menses appear.

This left the female members of the school community without water to use from washing after changing their menstrual materials while at school, hence forcing them to stay away from school during their menses.

The absence in most of the schools has highly contributed to the absenteeism of the girl child in the primary schools of Bulamagi sub county, Iganga district. This finding is in line with; Chinyama et al. (2019)'s study in which girls who participated in this Zambia – based study found it difficult to change their menstrual materials like nickers, pads or tampons during their menses because they lacked separate changing rooms in their schools.

5.1.3 Research objective three

The third objective was to establish the effects of menstrual health management practices on pupils' attendance in primary schools of Bulamagi subcounty, Iganga district, Uganda. Seven items were investigated in which the presence of; knowledge about menstruation, enough water to use, enough clean, separate and segregated latrine stances for their children to use comfortably at school, provided emergency sanitary pads to use at school and a separate changing room in school for the girls contribute to a regular attendance of school even when they are having their menstrual periods.

It was also established that how helpful the school members are to the girls during menstruation will also determine how they will continue attending school with their menses. Helpful female and male teachers as well as the male classmates(boys) in school enables the girls to continue coming to school during their menses.

Studies by Ngomane T. & Sebola M.P, (2023) and Kansiime C, et al, (2019), all agree that having separate toilet facilities for boys, girls and teachers, presence of clean menstrual management material to absorb or collect menstrual blood like pads at school for emergency use, a safe changing room, adequate clean water for use and others are contributing factors for the continuous attendance of school even during their menstruation periods.

5.2 Conclusion

The study findings above were used to draw a number of conclusions at the end as specified below;

In investigating the state of female pupils' primary school attendance in schools of Bulamagi sub – county, Iganga district, Uganda, the findings revealed a specific and disturbing trend of absenteeism per month. This trend of absenteeism was matching with the girls' individual monthly menstrual cycles. It was therefore concluded with data that the girls in upper Primary were reaching their menarche without knowledge of what to do and this was forcing them to miss 2-3 days of school per month.

Through the various items investigated, it was found that the availability of some MHM activities and facilities had enabled children to continue attending school whether in or out of their menstruation periods. It was found that girls in schools with; separate clean, segregated toilet stances, changing rooms, enough water to use while at school during menstruation, and a reliable provision of emergency sanitary pads for use at, continued attending school.

The nature and care of other school members was also found to play a key role in MHM and continued attendance of school by the girls. It was established that; helpful female and male teachers as well as the male classmates(boys) in school enable the girls to continue coming to school during their menses.

5.3 Recommendations

With the study findings, discussions and conclusions above, the researcher made the following recommendations for the action of all stake holders in Bulamagi and other places in relation to the attendance of school and Menstrual Health Management: -

- i) Girls aged ten year and above should be given relevant basic knowledge about menstruation so as to be equipped and empowered to manage this experience right from their menarche.

ii) Schools should have basic facilities in place to enable effective Menstrual Health Management for a continued attendance of school by the girls across the month. Such facilities include but are not limited to; separate clean and segregated toilet/ latrine stances, changing rooms, enough water to use while at school during menstruation, and a reliable provision of emergency sanitary pads for use.

iii) The other members of the school community like the male classmates (boys), male teachers, female teachers and other workers in the school should be sensitized to offer a friendly and enabling environment to girls during their menstruation periods while continuing to attend school without; fear, intimidation and trauma.

iv) For every term, a substantial portion of the school budget should be assigned to Menstrual Health Management expenses in the offices of the Senior Woman and Senior Man Teachers so as to enable the girls go through their monthly periods while attending school.

5.4 Areas for Further Research

Having concluded this study, the researcher finds it prudent to recommend that in future, studies be conducted to establish;

i) The effect of menstruation and its management on the academic performance of girls in the Primary Leaving Examinations.

ii) The effects of Menstruation and its management practices on the rate of the girl child's Primary School completion.

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APPENDICES:

APPENDIX 1: QUESTIONNAIRE FOR UPPER PRIMARY GIRLS

Dear respondent, I am **Kafuko Miriam**, a Student of Busitema University. I am carrying out a study to; “**find out the effects of menstrual health on pupils’ attendance in primary schools of Bulamagi subcounty, Iganga district, Uganda.**” You are requested to help and provide the information below to assist in the study. The information you provide will be kept confidential. Do not write your name anywhere I this questionnaire.

SECTION A: DEMOGRAPHIC CHARACTERISTICS OF THE RESPONDENT

(Please tick (√) what best applies to you)

1. Gender

Male Female

2. Age (Tick your age bracket)

Age in years	10 -15	16-20	21-25	31-35	36-40	41-45	46-50	51 & above

3. Marital status

Married Single Widowed

4. Level of education

Primary Secondary Tertiary Others

5. Qualification

Certificate Diploma Degree Masters None

6. Type of employment

Temporary Permanent None

SECTION B: OBJECTIVE BY OBJECTIVE INTERACTION

Tick in each of the boxes numbered from 1 to 5 from the rating scale that best reflects your views. This questionnaire is not a test, and all information collected will be anonymous, so respond honestly. Use the following rating.

Opinion	Strongly agree	Agree	Undecided	Disagree	Strongly disagree
Numeric value	5	4	3	2	1

		5	4	3	2	1
1. To find out the state of female pupils' primary school attendance in schools of Bulamagi sub – county, Iganga district, Uganda						
a)	I attend school daily for the whole day					
b)	I reach school by 8a.m every day Monday to Friday					
c)	I remain at school up to end of the school day without escaping.					
d)	I have ever escaped from school before the school day ended.					
e)	I always attend school when I am not in my monthly periods					
f)	I always attend school even when I am in my monthly periods					
g)	I always miss school when I am in my monthly periods					
2. To find out the available menstrual health facilities and measures in primary schools of Bulamagi sub – county, Iganga district, Uganda.						
a)	We are advised on what to do while in our monthly periods so as not to miss school.					
b)	We have enough toilet or latrine stances for us to use while in our monthly periods so as not to miss school.					
c)	We have a changing room at school during our days of monthly periods.					
d)	There is enough water for us to use during our monthly periods while at school.					
e)	Our parents provide us with sanitary products like pads to use during our monthly periods while at home and school.					
f)	The school provides us with sanitary products like pads for emergency use while at school.					
g)	Our female teachers are helpful to us during our monthly periods while at school.					
h)	Our male teachers are helpful to us during our monthly periods while at school.					
i)	Our male class mates (boys) are helpful to us during our monthly periods while at school					

3. To establish the effects of menstrual health management practices on pupils' attendance in primary schools of Bulamagi subcounty, Iganga district, Uganda		5	4	3	2	1
a)	When I am in my periods, I attend school because I know what to do.					
b)	I continue coming to school while in my monthly periods because there are enough toilets or latrine stances to use.					
c)	I continue coming to school while in my monthly periods because there is a changing room for use.					
d)	I continue coming while in my monthly periods because there is enough water to use.					
e)	I continue coming to school while in my monthly periods because my parents provide enough sanitary products like pads for me to use.					
f)	I continue coming to school while in my monthly periods because our school provides us with emergency sanitary pads to use.					
g)	I continue coming to school while in my monthly periods because our female teachers are helpful.					
h)	I continue coming to school while in my monthly periods because our male teachers are helpful.					
i)	I continue coming to school because our male class teachers (boys) are helpful to us during our monthly periods while at school.					

Thank you for the time and participation

APPENDIX 2 : QUESTIONNAIRE FOR TEACHERS OF PRIMARY SEVEN

Dear respondent, I am **Kafuko Miriam**, a Student of Busitema University. I am carrying out a study to; **“find out the effects of menstrual health on pupils’ attendance in primary schools of Bulamagi subcounty, Iganga district, Uganda.”** You are requested to help and provide the information below to assist in the study. The information you provide will be kept confidential. Do not write your name anywhere I this questionnaire.

SECTION A: DEMOGRAPHIC CHARACTERISTICS OF THE RESPONDENT

(Please tick (√) what best applies to you)

1. Gender

Male Female

2. Age

16-20 21-25 26-30 31-35
36-40 41-46 46-50 51 and above

3. Marital status

Married Single Widow/Widower

4. Level of education

Primary Secondary Tertiary None

5. Qualification

Certificate Diploma Degree
Masters None of these

6. Type of employment

Temporary Permanent None

SECTION B: OBJECTIVE BY OBJECTIVE INTERACTION

Tick in each of the boxes numbered from 1 to 5 from the rating scale that best reflects your views. This questionnaire is not a test, and all information collected will be anonymous, so respond honestly. Use the following rating.

Opinion	Strongly agree	Agree	Undecided	Disagree	Strongly disagree
Numeric value	5	4	3	2	1

1. To find out the state of female pupils' primary school attendance in schools of Bulamagi sub – county, Iganga district, Uganda		5	4	3	2	1
a)	Our girls attend school daily for the whole day					
b)	Our girls reach school by 8a.m every day Monday to Friday					
c)	Our girls remain at school up to end of the school day without escaping.					
d)	Some girls have ever escaped from school before the school day ended.					
e)	Girls always attend school when they are not in their monthly periods					
f)	Girls always attend school even when they are in their monthly periods					
g)	Girls always miss school when they are in their monthly periods					
2. To find out the available menstrual health activities and measures in primary schools of Bulamagi sub – county, Iganga district, Uganda.		5	4	3	2	1
a)	Girls are advised on what to do while in their monthly periods so as not to miss school.					
b)	Girls have enough segregated toilet or latrine stances for them to use while in their monthly periods so as not to miss school.					
c)	Girls have a changing room at school to use during their days of monthly periods.					
d)	There is enough water for the girls to use during their monthly periods while at school.					
e)	Our parents provide girls with sanitary products like pads to use during their monthly periods while at home and school.					
f)	The school provides girls with sanitary products like pads for emergency use while at school.					
g)	Our female teachers are helpful to the girls during their monthly periods while at school.					
h)	Our male teachers are helpful to the girls during their monthly periods while at school.					
i)	Our boys) are helpful to the girls during their monthly periods while at school					

3. To establish the effects of menstrual health management practices on pupils' attendance in primary schools of Bulamagi subcounty, Iganga district, Uganda		5	4	3	2	1
a)	When girls are in their periods, they attend school because they know what to do.					
b)	Girls continue coming to school while in their monthly periods because there are enough toilets or latrine stances for them to use.					
c)	Girls continue coming to school while in their monthly periods because there is a changing room for them to use.					
d)	Girls continue coming to school while in their monthly periods because there is enough water for them to use.					
e)	Girls continue coming to school while in their monthly periods because their parents provide enough sanitary products like pads for them to use.					
f)	Girls continue coming to school while in their monthly periods because our school provides them with emergency sanitary pads to use.					
g)	Girls continue coming to school while in their monthly periods because our female teachers are helpful to them.					
h)	Girls continue coming to school while in their monthly periods because our male teachers are helpful them.					
i)	Girls continue coming to school because their male classmates (boys) are helpful to them during their monthly periods while at school.					

Thank you for the time and participation

APPENDIX 3: INTERVIEW GUIDE FOR HEAD TEACHERS

Dear respondent, I am **Kafuko Miriam**, a Student of Busitema University. I am carrying out a study to; **“find out the effects of menstrual health on pupils’ attendance in primary schools of Bulamagi subcounty, Iganga district, Uganda.”** You are requested to help and provide the information below to assist in the study. The information you provide will be kept confidential. Do not write your name anywhere I this questionnaire.

SECTION A: DEMOGRAPHIC CHARACTERISTICS OF THE RESPONDENT

(Please tick (√) what best applies to you)

1. Gender

Male Female

2. Age

16-20 21-25 26-30 31-35
36-40 41-46 46-50 51 and above

3. Marital status

Married Single Widow/Widower

4. Level of education

Primary Secondary Tertiary None

5. Qualification

Certificate Diploma Degree
Masters None of these

6. Type of employment

Temporary Permanent None

QUESTIONS

1. Briefly tell us about the rate of pupil’s attendance especially at the Primary Seven level.
2. How would you compare this rate of pupils’ attendance across the gender?
3. What could be causing the absenteeism among the girl children?

4. How and when is the knowledge about Menstrual Health Management disseminated to the girls in your school?
5. Do girls in your school come to school during their menses?
6. How are the girls helped to continue attending school during their menses?
7. Comment on the possible effects of menstruation and its management to the attendance of the girl child in your school.

Thank you for your valuable participation.

Table 3.1

Table for Determining Sample Size of a Known Population

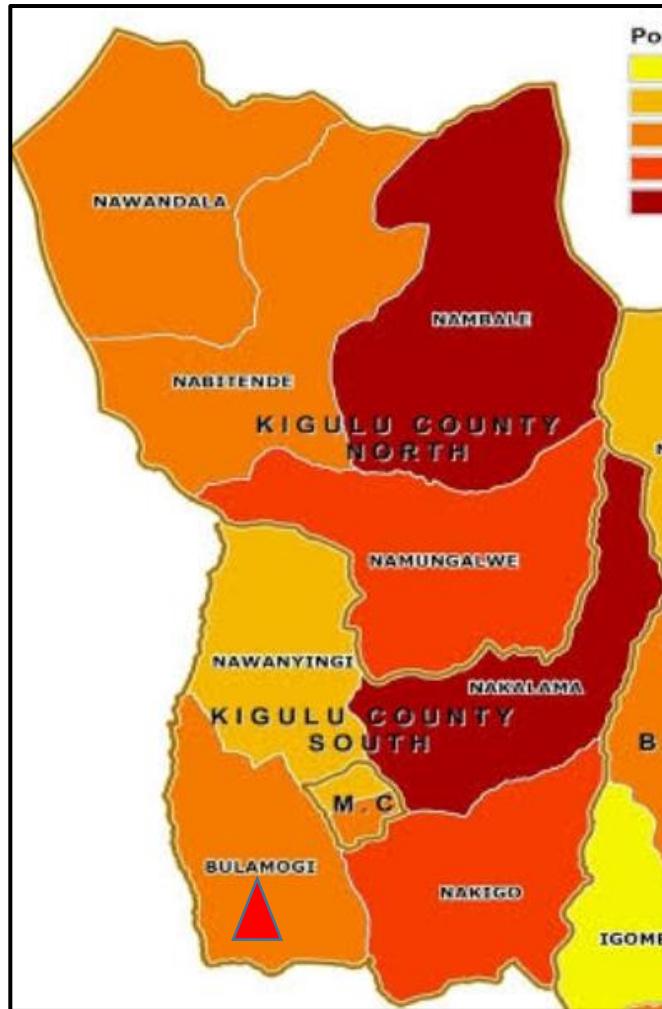
N	S	N	S	N	S	N	S	N	S
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15	14	110	86	290	165	850	265	3000	341
20	19	120	92	300	169	900	269	3500	346
25	24	130	97	320	175	950	274	4000	351
30	28	140	103	340	181	1000	278	4500	354
35	32	150	108	360	186	1100	285	5000	357
40	36	160	113	380	191	1200	291	6000	361
45	40	170	118	400	196	1300	297	7000	364
50	44	180	123	420	201	1400	302	8000	367
55	48	190	127	440	205	1500	306	9000	368
60	52	200	132	460	210	1600	310	10000	370
65	56	210	136	480	214	1700	313	15000	375
70	59	220	140	500	217	1800	317	20000	377
75	63	230	144	550	226	1900	320	30000	379
80	66	240	148	600	234	2000	322	40000	380
85	70	250	152	650	242	2200	327	50000	381
90	73	260	155	700	248	2400	331	75000	382
95	76	270	159	750	254	2600	335	1000000	384

*Note: N is Population Size; S is Sample Size**Source: Krejcie & Morgan, 1970*


APPENDIX 5
A MAP OF BUSOGA SHOWING THE LOCATION OF IGANGA DISTRICT



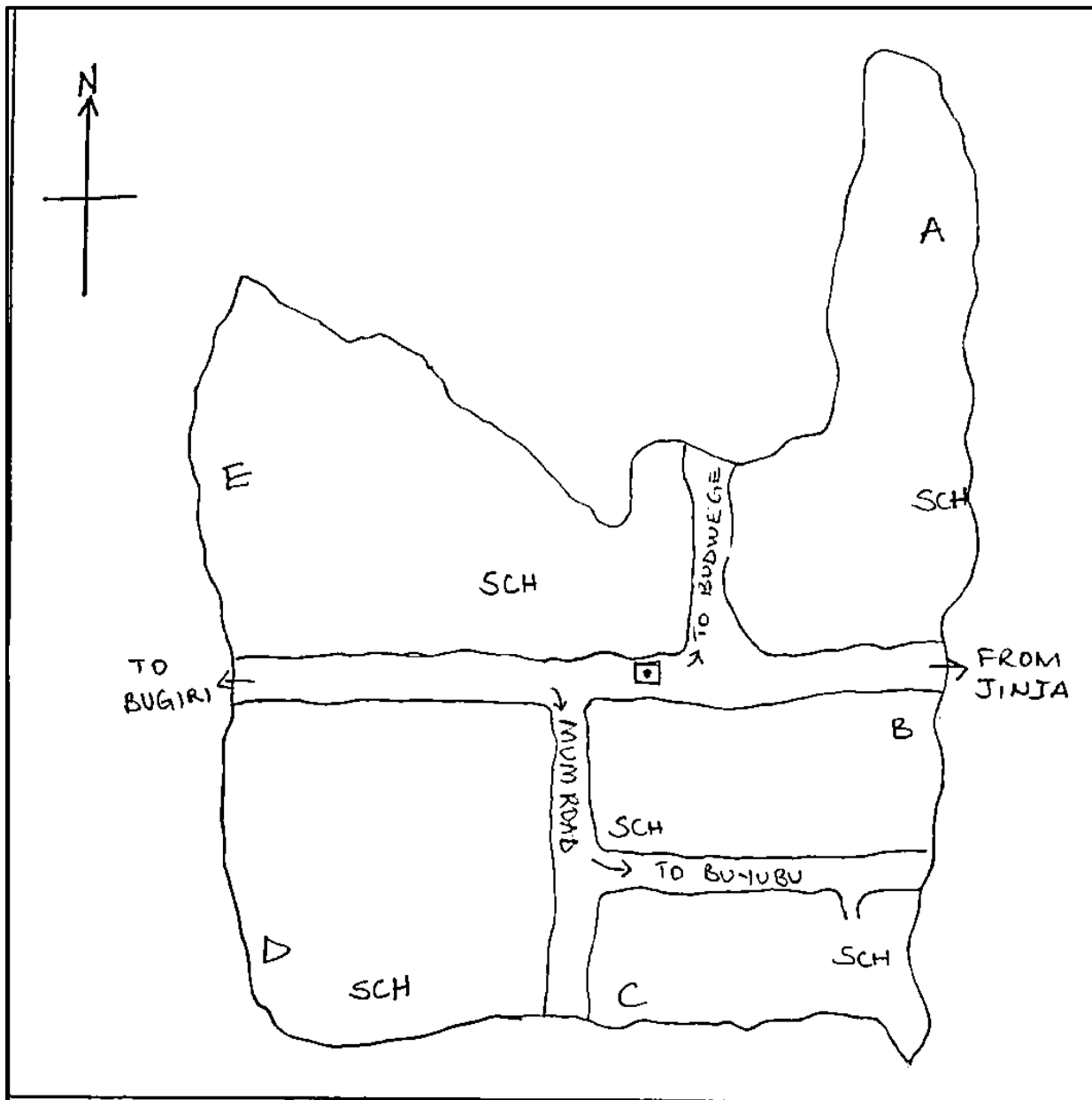
APPENDIX 6
A MAP OF IGANGA DISTRICT SHOWING THE LOCATION OF BULAMAGI
SUBCOUNTY



KEY

 Bulamagi Subcounty

APPENDIX 7
A MAP OF BULAMAGI SUB COUNTY SHOWING THE LOCATION O THE
SAMPLED SCHOOL



KEY

- ▣ — CMS TRADING CENTRE
- SCH — SCHOOL
- A — IWAWU PARISH
- B — BULOWDZA PARISH
- C — BWANALIRA PARISH
- D — BUKOTO PARISH
- E — BULAMAGI PARISH

APPENDIX 8
TIME SCHEDULE FOR THE RESEARCH PROJECT

ACTIVITY	PERIOD
Proposal writing	January – March, 2024
Approval of research proposal	April, 2024
Data collection	May – June, 2024
Data analysis	June, 2024
Report writing	July – August, 2024
Submitting the report	September, 2024

APPENDIX 9

BUDGET ESTIMATES DESIGNED FOR THE RESEARCH PROJECT

STAGE	ITEM	DETAIL	UNIT COST	TOTAL
RESEARCH PROPSAL WRITING	Transport	5 trips	Shs. 50,000/=	Shs. 250,000/=
	Stationary	2 reams	Shs. 20,000/=	Shs. 40,000/=
	Refreshments	15 meals	Shs. 6,000/=	Shs. 90,000/=
	Accommodation	10 days	Shs. 20,000/=	Shs. 200,000/=
	Airtime		Shs. 50,000/=	Shs. 60,000/=
	Secretarial Services		Shs.140,000/=	Shs. 140,000/=
	SUB TOTAL			Shs. 780,000/=
RESEARCH REPORT WRITING	Transport	5 trips	Shs. 50,000/=	Shs. 250,000/=
	Stationary /=	2 reams	Shs. 20,000/=	Shs. 40,000/=
	Refreshments	15 meals	Shs. 7,000/=	Shs. 105,000/=
	Accommodation	10 days	Shs. 20,000/=	Shs. 200,000/=
	Airtime		Shs. 50,000/=	Shs. 50,000/=
	Secretarial Services		Shs. 200,000/=	Shs. 200,000/=
	SUB TOTAL			Shs. 845,000/=
GRAND TOTAL				Shs. 1.625,000/=

APPENDIX 10

INTRODUCTORY LETTER FROM THE UNIVERSITY



P.O.Box 236, Tororo
Gen: +256-454448842
Dir: +256-454448854
Mob: +256-782999874
Fax: +256-454436517
Email: ar@acadreg.busitema.ac.ug
Website: www.busitema.ac.ug



**FACULTY OF SCIENCE AND EDUCATION
DEPARTMENT OF EDUCATION**

06th May, 2024

TO WHOM IT MAY CONCERN

BACHELOR OF EDUCATION, PRIMARY

MR/Ms. KAFUKO MIRIAM is a student

of Bachelor of Education, Primary of Busitema University, Faculty of Science and Education,

Nagongera Campus. His/her Registration Number is BULUP/2022/1749

The purpose of this letter is to formally request you to allow him/her to access any information in your organization which is relevant to his/her research.

His/her research topic is EFFECTS OF MENSTRUAL HEALTH ON PUPILS' ATTENDANCE IN PRIMARY SCHOOLS OF BULAMAGI SUBCOUNTY, IGANGA DISTRICT UGANDA.

Yours Sincerely,

**BUSITEMA UNIVERSITY
DEPARTMENT OF EDUCATION
FACULTY OF SCIENCE AND EDUCATION**
06 MAY 2024 ★
NAGONGERA CAMPUS
P.O BOX 236, TORORO (U)

[Signature]
Dr. Kaweesi Muhombede
Ag Head of Department, Education

[Signature]
**ST. MARYA MUMBA
BUYUBI PRIMARY SCH.**
P.O. BOX 6
DATE _____

**HEAD TEACHER
BUKOYO PRI. SCHOOL
P.O. BOX 9
IGANGA**
DATE 12/07/2024 *[Signature]* H/tr.

BULWOZA PRI. SCH.
HEADTEACHER
DATE 12/07/24
P.O. BOX 358, NAGONGERA