UNDERSTANDING THE MALE MENTALITY OF MENSTRUATION AMONG UNIVERSITY STUDENTS

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ABSTRACT

This research study aims to investigate the current perception and attitudes of young males towards menstruation in a developing nation, specifically India. The primary objective is to understand the existing mindset regarding menstruation and assess the potential for change and improvement in the attitudes of university students. Utilizing a quantitative research design, data were collected through a Google form and analysed using Excel and SPSS software. The findingsindicate that educational qualification plays a significant role in shaping individuals' understanding and knowledge about menstruation. Furthermore, the study reveals that the stigma surroundingmenstruation is more pronounced in rural and semi-rural areas. Importantly, the research highlights the influential role of female friends in enhancing male students' comprehension and awarenessof menstruation and menstrual health. Promoting empathetic attitudes towards menstruation among male students is crucial for creating a supportive and inclusive environment for all individuals, irrespective of gender. These findings underscore the urgent need to address the prevailing taboos and misinformation surrounding menstruation, in order to improve overall well-being and reduce stigma in society.

Key words: Menstruation, University, Social Stigma, Rural, Social Embarrassment

INTRODUCTION

Previous research suggests that Indian men's mentality towards menstruation has evolved, butchallenges

remain. Approximately one in four men reported avoiding discussions about periods,indicating a degree of period shame. In the patriarchal society, menstruation has long been considered taboo. While there has been gradual improvement, men are now more aware and comfortable discussing menstruation with female friends and family. However, a sense of discomfort persists. Menstruating women in Indian households are still prohibited from participating in daily activities, such as prayer and kitchen work, due to perceived impurity. Menstruation-related cultural norms and religious taboos are exacerbated by historical associations with bad spirits, guilt, and sexual embarrassment (Bakhtiari et al., 2018; Anand & Garg, 2015).

Women around the world are challenging societal taboos and working towards normalising discussions on menstruation. In a significant step, Chinese swimmer Fu Yuanhui broke a misconception during the 2016 Rio Olympics by openly mentioning that she was menstruating. This revelation surprised many Chinese social media users, who had believed that swimming duringmenstruation would lead to blood in the water. The scarcity of tampons in China was cited as areason behind this misconception. Similarly, in the UK, a distressing number of 137,700 girls had toleave school in 2017 due to their inability to afford menstrual products, as reported by the Independent. In Kenya, over a million girls miss up to six weeks of school annually due to a lack of reliable access to menstrual products. However, since 2011, the Kenyan government has allocated approximately \$3 million per year to provide free menstrual pads to schools in low-income areas, with the assistance of the ZanaAfrica Foundation, which also provides health education. Despiteprevailing taboos and limited access to sex education, political efforts in Kenya have successfully increased access to menstrual products, leading to improved school attendance for girls, according to NPR.

In contrast, countries like the United States continue to impose taxes and restrictions on menstrual products. India, too, imposed a 12% tax on pads in 2017, highlighting the affordability challenges faced by many women. As a result, women in India resort to using unsafe alternatives such as discarded clothing, newspapers, ash, and wood shavings to manage their menstrual flow, as reported by CNN.

In Indian culture, menstruation has long been surrounded by secrecy and mythology, despite being a natural phenomenon exclusive to girls. Religious norms and societal rules have created a tabooaround menstruation, resulting in women and girls being isolated from certain aspects of socialand cultural life. While some of these practices may have advantages, others can be harmful. Unfortunately, the lack of awareness and education on the topic, including limited inclusion in school curricula, has hindered the younger generation from feeling comfortable discussing menstrual cycles with their friends, family members, and loved ones (Anand & Garg, 2015). India's historical reluctance to openly address menstruation can be traced back to ancient texts like the Vedas, where it was considered taboo to even mention the subject. The myth of menstruationbeing linked to Indra's slaying of Vritras and women sharing his guilt perpetuated the belief that menstruation was a manifestation of remorse for committing a Brahmana murder. Consequently, Hindu women were traditionally restricted from engaging in regular activities during menstruation until they underwent a "cleansing" process and were allowed to resume their daily obligations. However, from a physiological perspective, menstruation is a result of ovulation, followed by endometrial bleeding and cycle preparation for potential conception. The notion of menstruating women being "impure" lacks substantial evidence (Stubbs & Costos, 2004). In a thought-provoking article titled "If Men Could Menstruate," featured in a special edition of

"Women's Productive Health Vol. 6, 2019, Issue 3: Special Section on Menstruation," Gloria Steinem brilliantly challenges thenarrative by satirically portraying how a natural reproductive process associated with women'sbodies is stigmatized and viewed negatively, whereas it would be praised and revered if it occurred in men's bodies. This perspective highlights the inherent bias and cultural conditioning that perpetuates the taboo around menstruation.

A study conducted by Peranovie and Bentley explored Australian men's perception of menstruation, revealing disappointment with the education system and societal barriers that hindered their understanding of menstruation. While some men were open to discussing and sympathizing with women, others viewed menstruation as solely a woman's concern. Discussions about menstruation often occurred later in their heterosexual relationships. In contrast, Kothari's study on rural Jaipur, Rajasthan, examined the knowledge and perception of menstruation among married men and young females. Both genders acknowledged a lack of education, driven by inhibitions, societal perceptions of sexual maturity, and concerns about how men would perceive young girls in their families (Hennegan et al., 2019; Patil et al., 2018).

Allen, Kaestle, and Goldberg's paper "More Than Just a Punctuation Mark: How Boys and YoungMen Learn About Menstruation" examines the gender disparities in sex education, with women typically receiving more education due to experiencing menstruation at a young age. Through qualitative analysis of 23 written narratives from male undergraduates (17-23 years old), the researchers explore how attitudes towards menstruation change as boys grow up. The study provides insights into the formation and influence of gender and sexuality perspectives within households and educational environments. The narratives reveal that negative perceptions of menstruation are not exclusive to women; boys and young men also struggle with understandingtheir connection to menstruation and often question or reject sexist beliefs (Hennegan et al., 2020).

According to predictions, the majority of India's population in 2021 will consist of individuals under the age of 30, making it crucial to understand their perception of menstruation. This younger generation will shape the future mindset regarding periods and menstruation, which will then bepassed on to Generation Z. Thus, it becomes vital to bring about a significant change in the outlooktowards menstruation (Rampal, 2022). Several initiatives are challenging cultural taboossurrounding menstruation. Arunachalam Muruganantham, known as the "Menstrual Man" of India, created a machine to produce affordable sanitary pads, addressing the issue of accessibility. Men4Women in South Sudan encourages open discussions about menstruation, promotes menstrual sanitation and hygiene education, and provides sanitary napkins to underprivileged girls. Scotland, under the leadership of Nicola Sturgeon, became the first nation to distribute periodproducts at zero cost (Crawford & Waldman, 2021).

To support the reproductive and mental health of adolescent girls and women, it is crucial to methodically dispel myths and societal taboos related to menstruation. Educating young girls aboutmenstrual hygiene is the primary step, considering that discussing the topic may be uncomfortable for their mothers and other women. It is essential to note that young girls and even adolescentboys often lack the proper understanding of menstruation due to the social environment they growup (van Eijk et al., 2016). This highlights the growing need to educate and sensitize future citizens of society about menstruation, reproductive health, and the role of men

in supporting women's well-being. Creating equal education opportunities for all subjects, including the menstrual cycle, is crucial in shaping the interactions and dynamics between girls, boys, women, and men (Vigil et al., 2012).

This research aims to understand how male students perceive and think about menstruation to identify knowledge gaps and misconceptions. Menstruation has long been a taboo topic, leadingto limited education and dialogue. This lack of understanding contributes to stigmatization and discrimination against menstruating individuals, particularly women and girls. Efforts to normalize conversations about menstruation have increased, but it's crucial to involve men and boys for inclusivity.

By focusing on male students' perspectives, this research explores their understanding, attitudes, and beliefs about menstruation. It seeks to identify myths, misconceptions, and knowledge gapsthey may have, assessing their impact on interactions with menstruating individuals. Understandingmale students' perceptions helps identify educational and communication shortcomings to improve curriculum and messaging about menstruation. The findings will inform targeted educational initiatives, integrating accurate information into curricula, facilitating open discussions, and promoting empathy among all students. Communication strategies can be developed to encourage inclusive conversations on menstruation, including awareness campaigns, workshops, and information materials for both male and female students. This fosters an environment where menstruation is comprehended, respected, and supported.

Overall, understanding how male students think about menstruation aims to break down societal taboos, reduce stigma, and create an inclusive environment where menstruation is universally understood and supported. This research plays a vital role in enhancing education and communication surrounding menstruation, ensuring that all individuals, regardless of gender, have accurate knowledge and empathy regarding this natural process.

LITERATURE REVIEW

The paper titled "Awareness, perceptions, and practices regarding menstruation and menstrualhygiene among college students in Bengaluru urban district, south India" explores the attitudes, behaviours, and practices of students at a peri-urban college in Bangalore concerning menstruation and its related factors (Deepa Srinivasan et al., 2019). A cross-sectional study involving 758 male and female students was conducted to assess their perceptions and awarenessof menstruation. The study found that females exhibited significantly higher levels of awarenesscompared to males. Additionally, 42.6% of female students were expected to adhere to societaland cultural rules during menstruation (Deepa Srinivasan et al., 2019). The internet emerged as theprimary source of information for menstruation and menstrual products. Notably, male students displayed lower positive attitudes towards menstruation in comparison to female students (Srivastava & Chandra, 2017). In conclusion, the study emphasizes the importance of promoting awareness about menstruation among both male and female respondents to enhance attitudes, practices, and mindsets in both genders.

The paper titled "Why involving 'men' in menstruation is the need of the hour" sheds light on genderinequality and power imbalances that hinder women and girls from having their voices heard indecision-making processes within families, communities, and development projects (India.comLifestyle Staff, 2021). The author emphasizes how these inequalities suppress women's agency indecisions related to their bodies, such as contraception, healthcare, and sexual expression. Data from various countries indicate that only 55% of women can autonomously make decisions regarding their healthcare and consent to sexual activity (India.com Lifestyle Staff, 2021). The stigma and shame surrounding menstruation, labelling it and menstruating women as unclean, stem from these cultural taboos and restrictions (Mukta Gundi & Malavika A. Subramanyam, 2020). The author suggests providing both men and women with appropriate education and training todismantle cultural taboos, eliminate gender inequities, and foster healthy relationships between the sexes. By raising awareness among males about the importance of menstrual hygiene products and adequate sanitation facilities in workplaces, homes, and schools, many menstruation-related taboos can be eradicated, promoting understanding and control over menstrual cycles (Peranovic& Bentley, 2016). The author's main takeaway is that men and women share an interest in learning about menstruation, yet societal reluctance hinders open discussions. To overcome this taboo, the author advocates for comprehensive education programs that unite men and women in an environment fostering friendship and trust.

The paper "More than Just a punctuation mark: how boys and young men learn aboutmenstruation" (Allen et al., 2010) explores the limited sex education boys receive on menstruation compared to girls. A qualitative study involving 23 male students aged 18-24 reveals familial and educational contexts influencing their understanding (Allen et al., 2010). Menstrual notions affect boys' relationships with women, but they also reject and confront sexist attitudes (Omar et al., 2003;Mahon et al., 2015). Boys with sisters often learn from their experiences, emphasizing the need forcontinued education from adults (Pistella & Bonati, 1998). The paper "Curious Eyes and awkwardsmiles: Menstruation and adolescent boys in India" (Gundi & Subramanyam, 2020) emphasizes the importance of addressing social determinants to improve Indian boys' awareness and understanding. Research indicates that boys from wealthier families, attending private schools, andliving in cities have better knowledge and beliefs about menstruation (Gundi & Subramanyam, 2019). Factors like parents' education and comfort with teachers also positively impact boys' attitudes (Gundi & Subramanyam, 2019).

The myth of menstruation as a biocultural phenomenon is influenced by social, religious, historical, and scientific factors. In Australia, menstruation is associated with femininity and beliefs about it reflect broader attitudes towards women and girls (Peranovic & Bentley, 2016; Kissling, 1996). Boysreceive less sexual education from parents compared to girls, leading to misconceptions and negative messages about menstruation (Kirkman et al., 2002; Burrows1 & Johnson, 2005). However, exposure to family discussions and interactions with female friends and partners canpositively influence boys' understanding (Fingerson, 2005; Mansfield & Stubbs, 2007). Older, more experienced men tend to have less negative attitudes towards sexual activity during menstruation, emphasizing trust and familiarity (Peranovic & Bentley, 2016). Menarche, the onset of menstruation, is a challenging period for girls associated with shame and anxiety (Ghongdemath et al., 2016). Societal norms and lack of knowledge impact menstrual hygiene and hinder girls' growth, requiring both males and females to address these challenges (Ds & Ch, 2005c; Mason et al., 2017b). In patriarchal cultures, male involvement as activists is crucial for promoting change (Ds & Ch, 2005c).

Education about menstruation is often lacking for boys, with approximately 72% having never learned about the menstrual cycle (Natracare, 2022). Comprehensive period education is important for all genders, as it promotes an understanding of bodily functions and safe sex (Peranovic & Bentley, 2016). Boys who are educated about menstruation demonstrate better awareness of contraception and may contribute to preventing unintended pregnancies. Period-related stigma and jokes from boys can cause stress and embarrassment for girls, leading to school absenteeism and negative impacts on their education and self-esteem (Natracare, 2022). Beliefsabout menstruation and stereotypes about menstrual symptoms can contribute to sexism and negative attitudes toward women (Marván et al., 2013). Menstruation should be portrayed positively to help women cope with menstrual changes and challenge unfavourable assumptions, reducingsexism and discrimination (Yagnik, 2013).

The paper highlights the deep-rooted myths and taboos surrounding menstruation in India, which impact women's mental health, lifestyle, and overall well-being (Anand & Garg, 2015). These cultural norms, often associated with historical connotations of shame and humiliation, hinderwomen's participation in various aspects of social life (Garg et al., 2001). Menstrual taboos contribute to girls dropping out of school, posing a barrier to gender equality (Garg & Anand, 2015). Insufficient access to menstrual hygiene products and unhygienic practices pose health risks (Garg & Anand, 2015). The media has the power to reframe these taboos and promote awareness andacceptance (Yagnik, 2013). Media coverage can influence public perception and challenge cultural norms surrounding menstruation (Yagnik, 2013). Menstrual hygiene product advertisements havereinforced negative taboos, portraying menstruation as unclean (Marván et al., 2013). The author highlights three areas impacted by menstrual taboos: concealment, communication, and day-to-day activities (Yagnik, 2013). Menstrual awareness and management are crucial for bridging the gender inequality gap in education (Yagnik, 2013). By addressing menstrual stigma, promotingeducation, and using media as a tool for change, societies can overcome the negative effects ofmenstrual taboos on women's well-being and societal development (Yagnik, 2013). It is essential to break the silence and foster open conversations about menstruation to promote understanding and change societal attitudes (Yagnik, 2013).

Two papers examine challenges faced by young women in Lucknow, India, regarding menstruation, emphasizing prevalent stigmas, taboos, and limited education (McCammon et al., 2020; Mason et al., 2017). The studies call for addressing taboos, promoting education, and engaging boys and men to improve menstrual health and well-being. They advocate for multi-level interventions considering cultural, educational, and social factors to support girls and women during menstruation (McCammon et al., 2020; Mason et al., 2017). The paper "Socio-cultural Aspects of Menstruation in an urban slum in Delhi, India" (Garg et al., 2001) explores the menstrualexperience in an urban Indian slum. It combines qualitative and quantitative methods, including 52in-depth interviews, three focus group discussions, and five key informant interviews. The average age of menarche was found to be 13.5 years (Garg et al., 2021). Another study conducted in Gujaratfound that women from the Baroda slums listed heavy discharge, menstruation issues, and weakness as their top health complaints (Garg et al., 2021). Research on adolescent girls in Delhi revealed that mothers often do not educate their daughters about menstruation, leading to excessive worry, anxiety, and misconceptions (Mason et al., 2017b). The socio-cultural environment of an urban slum was found to influence women's attitudes and behaviours

towards menarche and menstruation, especially after moving from rural areas (Garg et al., 2021). Friends or sisters-in-lawwere women's main sources of information about menstruation, as few approached their mothers for guidance (Anand & Garg, 2015b). Mothers themselves felt uneasy discussing menstruation with their daughters, particularly before menarche (Coast, 2019). Overall, menstruation is considered a taboo topic in India, associated with notions of impurity and subject to restrictions in various aspects of women's lives. Menarche is often a surprising event for young girls, as it is viewed as aprivate matter rarely discussed openly (Garg et al., 2021).

In a study conducted among high school girls in resource-limited settings around Bangalore, Karnataka, India, the beliefs and practices related to menstruation were evaluated (D et al., 2012). The study aimed to assess the knowledge and behaviours of adolescent girls regarding menstrualhygiene. A cross-sectional survey was conducted in four government high schools in rural areasaround Bangalore City, and a total of 506 girls participated in the study (D et al., 2012). The averageage of the participants was 14.08 years. Findings revealed that 99.6% of the girls were aware ofmenstruation, with 57.9% having learned about it before their first menstrual cycle (D et al., 2012). However, only 28.7% of the girls knew the correct definition of menstruation, while 73.7% recognized it as a common occurrence. Furthermore, 48.1% of the girls were unaware of the relationship between menstruation and pregnancy. Regarding menstrual hygiene practices, only44.1% of the girls reported using sanitary pads during their periods, and only 31.3% cleaned their cloth pads with soap and water (D et al., 2012). Notably, 56.8% of the girls cleaned their genitalia with soap and water, and 88.8% maintained their regular bathing routine during menstruation (D etal., 2012). These findings highlight the need for improved education and awareness programs starting in childhood to promote safe behaviours, minimize discomfort, and reduce the risk of reproductive tract infections (Ekoko & Ikolo, 2021; D et al., 2012).

Another study emphasized the need to dismantle menstrual taboos to empower females and normalize menstruation (Wilson et al., 2018). Menstrual taboos negatively impact girls' confidence and hinder their ability to manage periods with dignity (Ds & Ch, 2005c). Overcoming these taboos is crucial for progress towards gender equality. Rural areas with limited resources further disadvantage adolescent girls by perpetuating harmful social conventions (Wilson et al., 2018). Normalizing menstruation is essential to break down taboos, provide access to menstrual information and supplies, and foster a supportive environment for girls' growth and independence (Wilson et al., 2018).

The paper "A qualitative study regarding menstrual hygiene in a rural community of Haryana, India" explores the impact of menstrual hygiene difficulties on the health and education of adolescent girls in a rural community of Haryana (Parija et al., 2022). The study involved adolescents, socialhealth activists, Anganwadi workers, and medical officers, and found that lack of awareness about menstrual hygiene hindered girls' access to sanitary pads, leading to concerns about absenteeism due to inadequate restroom facilities and lack of sanitary pad disposal in schools. Implementing comprehensive reproductive, sexual, and menstrual health education programs, along with separate restrooms for girls and free sanitary pad distribution, can improve accessibility and reduceabsenteeism (Parija et al., 2022).

According to "Understanding and Debunking Menstrual Taboos in India: Activism and Importance of Education," menstrual taboos in India have negative impacts on women's physical and mental health.

American pop culture portrays menstruation in various ways, but the topic is normalized

and menstrual products are widely accessible in the United States. In contrast, in India, there is stilla lack of awareness and proper education about menstruation (Johnson, 2019; Mason et al., 2017b). "Menstruation and menstrual hygiene: A study of knowledge, attitudes, and practices of adolescentgirls and boys in India" reveals that men often hold negative views and ideas about menstruation, leading to stigmatization and discrimination of women. Menstruation is frequently seen as dirty andhumiliating, resulting in social marginalization (Kaur et al., 2018; Peranovic & Bentley, 2016).

"A study on perception and practice of menstruation among school-going adolescent girls in districtAmbala Haryana, India" highlights that rural teenagers in India have a lack of understanding about menstruation, poorer menstrual hygiene, and more negative views about their periods compared to urban counterparts. The education level and socio-economic status of mothers play a role inmenstrual hygiene practices (Bachloo et al., 2016; D et al., 2012). Overall, there is a need for moreeducation and initiatives to eliminate the taboo around menstruation and change negative attitudes and ideas, leading to a more inclusive and equitable society (Johnson, 2019; Mason et al., 2017b; Kaur et al., 2018; Peranovic & Bentley, 2016; Bachloo et al., 2016).

Research Methodology

We employed the quantitative research approach in our work, which entails the careful examination of phenomena through the collection of quantifiable data and the application of mathematical, statistical, or computational techniques. Utilizing sampling techniquesand a variety of online tools including surveys, polls, and questionnaires, quantitative researchgathers data from both existing and potential clients. Our study aims to understand how male students at BML Munjal University perceive menstruation. Using surveys, focus groups, and interviews, we will assess their comprehension, identify knowledge gaps, and consider cultural and social factors. The acquired data will inform changes in curriculum and communication to address misconceptions and improve understanding. By creating instructional tools and fostering open discussions, we aim to reduce stigma and promotea positive outlook on menstruation among male students. This topic has been understudied dueto cultural taboos, making our research essential for providing accurate information and fostering inclusivity. As students of BMU, we conduct quantitative research involving students from various departments such as MBA, BBA, B-Tech, BBA LLB (Hons), and BSc Computer Science. Stratified random sampling with approximately 150 respondents was used for data analysis.

We employed Likert scale statements and categorized them into several parameters: Social Embarrassment, General Perception/Attitude, Awareness and Sensitization, Parity of Knowledge, Social Stigma, and Mental Health and Psyche.

Within the parameter of **Social Embarrassment**, we assessed discomfort and unease associated with discussing menstruation. This included evaluating how women in close circles felt uncomfortable

discussing periods and exploring the perception of menstruation as gross or disgusting. We also examined discomfort when speaking about menstruation in public or with the opposite gender.

In the **General Perception/Attitude** parameter, we focused on understanding attitudes towardsmenstruation. We examined beliefs about whether menstruation is solely a "female issue" and ifmen should be concerned about it. Additionally, we assessed the perception of menstruation as a natural process and the willingness to openly address the taboo surrounding it.

Awareness and Sensitization were evaluated through statements about the role of media andeducation in helping men understand menstruation. We explored the belief that schools shouldarrange sensitivity programs to educate students about menstruation from an early age. The need for improved education and awareness to sensitize men about menstruation was another aspectconsidered.

The **Parity of Knowledge** parameter aimed to determine opinions on the importance of equal knowledge about periods between men and women. We also assessed whether enhancing knowledge and understanding of menstruation would help dispel misconceptions.

The **Social Stigma** category examined enduring stigmas surrounding menstruation. This included beliefs that women should refrain from certain activities during their periods due to notions of impurity.

Lastly, the **Mental Health and Psyche** parameter focused on the impact of male attitudes towards menstruation on female mental health and overall well-being. We explored the notion that changing male attitudes towards periods could significantly improve empathy and understandingtowards female experiences.

Overall, our study employed hypothesis testing to analyze various parameters related to menstruation. By examining Likert scale responses within these parameters, we aimed to gain insights into prevailing attitudes, beliefs, and stigmas surrounding menstruation and their potential impacts on individuals' well-being.

Statements on the Likert Scale	PARAMETERS	
Women in my household/close female friends have always felt uncomfortable talking about periods		
Menstruation is gross/disgusting/icky	Social Embarassment	
It is uncomfortable to speak about Menstruation in public or to the opposite gender		
Menstruation is a 'female issue' and men must not be concerned about it		
Menstruation is a natural process and men and women must openly address the 'taboo' issue	General Perception/Attitude	
I have an open attitude towards publicly speaking about Menstruation		
Movies and advertisements help men to understand the topic better		
School must arrange sensitivity programs to help students learn about Menstruation, early on	Awareness and Sensitization	
Education and awareness must be improved and increased to sensitize men about menstruation		
Men and women should have equal knowledge about periods	Davity of Vnovdodeo	
Knowledge and understanding of menstrual phenomenon will be helpful to change misconception	Parity of Knowledge	
When on their periods, women must refrain from household, holy activities since it is impure to do so	Conial Chiama	
Periods and the stigma around it is real and still existent	Social Stigma	
Male attitude towards periods and menstruation has a strong impact on the female psyche and mental health	Mental Health and Psyche	
Changing the male attitude towards periods will significantly improve empathy towards female psyche		

The null hypothesis (H0) assumes no effect or relationship, while the alternative hypothesis (H1)suggests a

deviation from the null hypothesis. In hypothesis testing, a one-tailed test focuses onone direction, while a two-tailed test considers both directions. The alpha value represents theacceptable risk of a Type I error, and the p-value measures the statistical significance of an observed difference, leading to acceptance or rejection of the null hypothesis.

A quantitative methodology was chosen to collect and analyze numerical data systematically. Stratified random sampling ensured representative subgroup representation. A questionnaire gathered information practically from diverse locations. Likert scales measured attitudes consistently. Correlation and hypothesis tests were used to examine relationships. The aim was to provide a reliable and comprehensive conclusion for the study.

DATA ANALYSIS AND FINDINGS

Demographical Descriptive Statistics:

In our dataset, 20% are aged 18 to 21, 56% are aged 21 to 25, 23.43% are aged 25 to 35, and 0.57% are over 35. Cumulatively, 76% fall within 18 to 25, and considering 18 to 35, it covers 99.4% of thesample. Urban cities make up the majority at 61% (107 people). The distribution of other city typesis as follows: rural area - 5.7% (10 people), semi-rural area - 1.1% (2 people), and semi-urban area -32% (56 people). Cumulatively, 93% of the sample is represented by semi-urban and urban areas. Considering all city types (urban, semi-urban, semi-rural, and rural), approximately 98.8% of the sample is accounted for. the distribution of educational qualifications is as follows: P.H.D. - 5.14% (9 people), UG - 21.14% (37 people), and PG - 73.71% (129 people). The highest percentage of responses is from the PG qualification at approximately 73.71%. Cumulatively, 98.9% of the sampleconsists of PG and UG qualifications. The main source of information on menstruation is girlfriends and female friends (52.58%), followed by the internet (12.57%) and school curricula (15.43%).

Categorical Correlation:

In our sample, rural cities have 4 residents aged 18-21, while semi-urban and urban cities have 9 and 22 residents, respectively. For the 21-25 age group, there are 6 rural, 2 semi-rural, 29 semi-urban, and 61 urban residents. No rural or semi-rural residents are in the 25-35 age group, butthere are 23 urban residents. The over-35 age group has only one urban resident. The urban count is highest (61) in the 21-35 age range. For the 18-21 age range, PG represents 54.86% (96 people) while UG represents 1.14% (2 people). In the 21-25 age range, PG represents 54.86% (96 people).

For the 25-35 age range, PHD represents 4.57% (8 people) and PG represents 18.86% (33 people). The age group above 35 accounts for 0.57% of the data. In rural areas, UG represents 2.29% and PG represents 3.43%. No respondents are from UG or P.H.D. In semi-rural areas, PG represents 1.14%. In semi-urban areas, P.H.D. represents 1.14%, PG represents 25.71%, and UG represents 5.14%. In urban areas, P.H.D. represents 4.00%, PG represents 43.43%, and UG represents 13.71%. In rural areas, female friends are the preferred source of information about menstruation, and 60% of the population believes in separate viewpoints for men and women. In semi-rural areas, female friends are the primary source, with 50% having separate viewpoints. In semi-urban areas, female friends and girlfriends are the main sources, with 36% having separate viewpoints. In urban

areas, female friends, girlfriends, the internet, and school curriculum are preferred sources, but 92% have different perspectives on men and women regarding menstruation.

Hypothesis testing:

Age Group and Social Stigma:

Descriptives

SocialStigma

					95% Confidence Interval for Mean			
	N	Mean	Std. Deviation	Std. Error	Lower Bound	Upper Bound	Minimum	Maximum
18-21	35	3.4286	.68752	.11621	3.1924	3.6647	1.50	4.50
21-25	98	3.5051	.74783	.07554	3.3552	3.6550	1.50	5.00
25-35	41	3.0854	.90071	.14067	2.8011	3.3697	1.50	5.00
35+	1	2.0000					2.00	2.00
Total	175	3.3829	.79455	.06006	3.2643	3.5014	1.50	5.00

ANOVA

SocialStigma

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	7.078	3	2.359	3.926	.010
Within Groups	102.770	171	.601		
Total	109.849	174			

H0 (Null hypothesis): The age group does not relate to Social Stigma.H1 (Alternate hypothesis): The age group relates to Social Stigma.

Since, Age group has 4 different groups (18-21, 21-25, 25-35 & 35+). Age group and Social Stigmaare categorical and continuous respectively; therefore, we have chosen Oneway Anova (F-Test)test.

Here, we can see that P-value (.010)<0.05, therefore we will reject the null hypothesis(H0) and accept the Alternate hypothesis(H1).

Hence, we can conclude that the Age group is significantly related to Social Stigma. From the descriptive table, we can see that from the age group 18-25, the mean value is around 3.50 where we can say that between this age group, there's a stigma that women must refrain from the household, holy activities, because it is impure to do so.

Education Qualification and Social Stigma:

Descriptives

SocialStigma

					95% Confidence Interval for Mean			
	N	Mean	Std. Deviation	Std. Error	Lower Bound	Upper Bound	Minimum	Maximum
P.H.D	9	2.3889	.74068	.24689	1.8195	2.9582	1.50	3.50
PG	129	3.4496	.78523	.06914	3.3128	3.5864	1.50	5.00
UG	37	3.3919	.68855	.11320	3.1623	3.6215	1.50	4.50
Total	175	3.3829	.79455	.06006	3.2643	3.5014	1.50	5.00

ANOVA

SocialStigma

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	9.470	2	4.735	8.113	.000
Within Groups	100.379	172	.584		
Total	109.849	174			

H0(Null hypothesis): Education Qualification is not significantly related to Social Stigma.

H1(Alternate hypothesis): Education Qualification is significantly related to Social Stigma.

Since Educational qualification has 3 different groups (UG, PG and P.H.D), Educational qualification and Social Stigma are categorical and continuous respectively; therefore, we have chosen Oneway Anova (F-Test) test.

Here, we can see that P-value(.000)<0.05, therefore we will reject the null hypothesis(H0) and accept the Alternate hypothesis(H1).

Hence, we can conclude that Education Qualification is significantly related to Social Stigma. Therefore, students of PG and UG believe in the social stigma that during their period women mustrefrain from household and holy activities since it is impure to do so.

Type of City and Social Embarrassment:

Descriptives

SocialEmbarassment

					95% Confidence Interval for Mean			
	N	Mean	Std. Deviation	Std. Error	Lower Bound	Upper Bound	Minimum	Maximum
Rural	10	3.2333	.88958	.28131	2.5970	3.8697	1.67	4.67
Semi-rural	2	3.3333	1.41421	1.00000	-9.3729	16.0395	2.33	4.33
Semi-urban	56	2.7321	.59432	.07942	2.5730	2.8913	1.33	4.00
Urban	107	3.0997	.71991	.06960	2.9617	3.2377	1.33	5.00
Total	175	2.9924	.71649	.05416	2.8855	3.0993	1.33	5.00

ANOVA

SocialEmbarassment

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	5.838	3	1.946	3.986	.009
Within Groups	83.485	171	.488		
Total	89.323	174			

H0(Null hypothesis): The type of City is not significantly related to Social Embarrassment H1(Alternate hypothesis): The type of City is significantly related to Social Embarrassment.

Since the type of city has different groups, the type of city and Social Embarrassment is categorical and continuous respectively; therefore, we have chosen Oneway Anova (F-Test) test.

Here, we can see that P-value(.009)<0.05, therefore we will reject the null hypothesis(H0) and accept the Alternate hypothesis(H1).

Hence, we can conclude that type of city is significantly related to Social Embarrassment. Therefore, we can say that women in Rural and semi-rural areas always felt uncomfortable talking about menstruation in public, for them, it is uncomfortable to talk about menstruation to the opposite gender or in front of the public.

Type of City and General Perception/Attitude:

Descriptives

GeneralPerceptionOrAttitude

					95% Confidence Interval for Mean			
	N	Mean	Std. Deviation	Std. Error	Lower Bound	Upper Bound	Minimum	Maximum
Rural	10	3.1333	.77300	.24444	2.5804	3.6863	2.00	4.00
Semi-rural	2	3.8333	.70711	.50000	-2.5198	10.1864	3.33	4.33
Semi-urban	56	2.8036	.72412	.09676	2.6097	2.9975	1.33	4.00
Urban	107	3.0654	.64499	.06235	2.9418	3.1890	1.33	5.00
Total	175	2.9943	.69064	.05221	2.8912	3.0973	1.33	5.00

ANOVA

GeneralPerceptionOrAttitude

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	4.180	3	1.393	3.023	.031
Within Groups	78.815	171	.461		
Total	82.994	174			

H0(Null hypothesis): The type of City is not significantly related to General Perception/Attitude.H1(Alternate

hypothesis): The type of City is significantly related to General Perception/Attitude.

Since the type of city has different groups, the type of city and General Perception/Attitude are categorical and continuous respectively; therefore, we have chosen Oneway Anova (F-Test) test.

Here, we can see that P-value(.031)<0.05, therefore we will reject the null hypothesis(H0) and wewill accept the Alternate hypothesis(H1).

Hence, we can conclude that type of city is significantly related to General Perception/Attitude. As a result, we can say that menstruation is perceived generally by residents of semi-rural areas as a female issue that men shouldn't worry about.

Type of City and Awareness & Sensitization:

Descriptives

AwarenessAndSensitization

					95% Confidence Interval for Mean			
	N	Mean	Std. Deviation	Std. Error	Lower Bound	Upper Bound	Minimum	Maximum
Rural	10	3.5667	.77060	.24369	3.0154	4.1179	2.67	4.67
Semi-rural	2	4.8333	.23570	.16667	2.7156	6.9510	4.67	5.00
Semi-urban	56	3.2619	.84975	.11355	3.0343	3.4895	1.00	5.00
Urban	107	3.8660	.69870	.06755	3.7321	4.0000	1.67	5.00
Total	175	3.6667	.80627	.06095	3.5464	3.7870	1.00	5.00

ANOVA

AwarenessAndSensitization

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	16.250	3	5.417	9.563	.000
Within Groups	96.861	171	.566		
Total	113.111	174			

H0(Null hypothesis): The type of City is not significantly related to Awareness & Sensitization. H1(Alternate hypothesis): The type of City is significantly related to Awareness & Sensitization.

Since the type of city has different groups, the type of city and Awareness & Sensitization iscategorical and continuous respectively; therefore, we have chosen Oneway Anova (F-Test) test.

Here, we can see that P-value(.000)<0.05, therefore we will reject the null hypothesis(H0) and wewill accept the Alternate hypothesis(H1).

Hence, we can conclude that type of city is significantly related to Awareness & Sensitization. As aresult, we can say that education & awareness programs should be improved and expanded tosensitise men about menstruation, semi-rural residents should be made aware of the facts aboutmenstruation, and schools should set up sensitivity programmes to teach students about menstruation.

CONCLUSION AND DISCUSSION

The study aimed to gain a comprehensive understanding of male students' perspectives on menstruation. Through the utilization of descriptive statistics and statistical tests such as CrossTabulation and Anova, the researchers obtained valuable insights into the sources of knowledge, attitudes, and stigmas associated with menstruation among male students. The study yielded several significant findings.

Firstly, a notable conclusion emerged from the data, indicating that a majority of male students (52.58% of the sample) primarily acquired information about menstruation from their female acquaintances and girlfriends. Moreover, the Cross-Tabulation analysis revealed that differentsources contributed to the understanding of menstruation across various types of cities, including rural, semi-rural, semi-rural, and urban areas. For instance, in urban regions, sources such as the Internet, school curriculum, mother, sister, and girlfriend played a significant role in knowledge acquisition, whereas, in semi-rural areas, female friends emerged as the primary source of information.

The ANOVA tests conducted in the study unveiled strong correlations between several variablesand the social stigma attached to menstruation. Notably, age exhibited a robust correlation with social stigma, as women in the age range of 18 to 25 tended to experience a stigma suggestingthat they should abstain from domestic and religious duties during menstruation. Educational attainment also displayed a substantial correlation with social stigma, indicating that higher levels of education were associated with lower levels of stigma. Additionally, the study revealed a significant association between city type and social shame, with women in rural and semi-rurallocations reporting a higher degree of social discomfort when discussing menstruation with theopposite gender.

Furthermore, the findings demonstrated a strong link between city type and overall attitudes/perceptions toward menstruation, suggesting that different city types harbour distinct perspectives on the subject. Additionally, city type displayed a strong correlation with the awareness and sensitization of menstruation, highlighting the influence of the city's characteristicson the implementation and effectiveness of awareness programs.

In summary, this study provided valuable insights into the views of male students regarding menstruation, emphasizing the importance of addressing stigmas and attitudes surrounding thistopic. It is crucial to note that the study has certain limitations, including a small sample size, potential gender bias in responses, limited cultural diversity, reliance on self-reported data, and a narrow focus solely on male students' perspectives without considering broader societal attitudes. Future research could expand on these findings by exploring additional variables that may influence people's perceptions and attitudes toward menstruation.

SUGGESTIONS AND RECOMMENDATION

Menstruation-related attitudes and beliefs among male students are influenced by culture, societal standards, and media. Research can explore how these factors shape perceptions and their impact on attitudes. Comparative studies can examine the level and scope of menstrual education for male students, evaluating its influence on their awareness and attitudes towards menstruation. The media and advertising industries play a significant role

in shaping public opinion onmenstruation, including that of males. Research can assess the extent to which male views are influenced by media and advertising. Attitudes towards menstruation may vary based on cultural background, socioeconomicclass, and geography. Comparative research across diverse groups can provide a deeperunderstanding of male students' opinions and attitudes. Conducting research with a larger and more diverse sample of male students from various backgrounds can help identify trends and variances, leading to more precise interventions. Examining the influence of education and cultural factors on male students' attitudes towards menstruation can inform the development of inclusive and culturally responsive educational programs. Researching the impact of early exposure and socialization on male students' attitudes towards menstruation can guide interventions aimed at influencing attitudes and beliefs from a young age. Implementing comprehensive sex education in schools, including menstrual education, can promote positive attitudes and reduce stigma by increasing awareness and dispelling myths. Interventions focused on changing male students' perceptions of menstruation, such as workshops, talks, and training sessions, can be effective in fostering positive attitudes and reducing stigma.

SCOPE FOR FUTURE RESEARCH

Investigate social media and popular culture's impact on male students' attitudes toward menstruation for developing inclusive educational programs. Study how menstruation stigma affects relationships and intimacy among male students involved with menstruating women to guide treatments. Examine the interaction of menstrual stigma, gender roles, and stereotypes to informinterventions promoting gender equality.

LIMITATIONS OF THE RESEARCH

Sample size: The size of the sample used in the study has a significant impact on the reliability of the results. A lack of diversity in the responses due to small sample size canrestrict the generalizability of the findings to a larger population. A bigger sample size isrequired to take into account any changes in attitudes and beliefs and to produce more reliable results.

Discrimination based on gender: The subject of menstruation is frequently shrouded inshame and social stigma. Male students may be hesitant to reveal their genuine opinions and attitudes on the subject because of this stigma. They might also be prejudiced toward giving responses that are consistent with social norms rather than their real opinions and beliefs. These prejudices can affect the reliability of the results and make it challenging tocomprehend the attitudes of male students concerning menstruation.

Lack of cultural diversity: The study may not have taken into account the various cultural viewpoints on menstruation. People's perspectives and understandings of a subject mayvary depending on the norms and values that are prevalent in their own cultures. To better understand the attitudes of male students around menstruation, it is crucial to take cultural variety into account in the research design.

Self-reported data: Self-reported data may have a variety of biases, including memory and social desirability biases. Male students might not feel comfortable revealing their genuine views about menstruation, which could result in incomplete results. Additionally, peoplemay not accurately recall their attitudes and ideas regarding the topic, which might have an impact on the accuracy of the responses.

Limited scope: By concentrating primarily on the attitudes of male students toward menstruation, the research may have a narrow reach. To develop a more thorough graspof the problem, it is also crucial to take into account the opinions and attitudes of female students as well as social attitudes regarding the subject. Additionally, other elements likeeducation and exposure to knowledge on menstruation may also have an impact on howmale students feel about the subject and should be taken into account while designing the study.

REFERENCES

- 1. ActionAid UK. (2022, September 27). Period poverty: the statistics around the world. ActionAid UK.
- 2. Allen, K. R., Kaestle, C. E., & Goldberg, A. E. (2010). More Than Just a Punctuation Mark: How Boys and Young Men Learn About Menstruation. Journal of Family Issues, 32(2), 129–156. https://doi.org/10.1177/0192513x10371609
- 3. Anand, T., & Garg, S. (2015). Menstruation related myths in India: strategies for combating it. Journal of Family Medicine and Primary Care, 4(2), 184. https://doi.org/10.4103/2249-4863.154627
- 4. Anand, T., & Garg, S. (2015). Menstruation related myths in India: strategies for combating it. Journal of Family Medicine and Primary Care, 4(2), 184. https://doi.org/10.4103/2249-4863.154627
- 5. Anand, T., & Garg, S. (2015b). Menstruation related myths in India: strategies for combatingit. Journal of Family Medicine and Primary Care, 4(2), 184. https://doi.org/10.4103/2249-4863.154627
- 6. Anand, T., & Garg, S. (2015c). Menstruation related myths in India: strategies for combatingit. Journal of Family Medicine and Primary Care, 4(2), 184. https://doi.org/10.4103/2249-4863.154627
- Bachloo, T., Kumar, R., Goyal, A., Singh, P., Yadav, S., Bhardwaj, A., & Mittal, A. (2016). A study on perception and practice of menstruation among school-going adolescent girls in district Ambala Haryana, India. International Journal of Community Medicine and Public Health, 931—937. https://doi.org/10.18203/2394-6040.ijcmph20160931
- 8. Buckley, T., & Gottlieb, A. (1988). 1. A Critical Appraisal of Theories of Menstrual Symbolism.Blood Magic, 3—50. https://doi.org/10.1525/9780520340565-003
- 9. Burrows1, A., & Johnson, S. (2005). Girls' experiences of menarche and menstruation. Journal of Reproductive and Infant Psychology, 23(3), 235—249. https://doi.org/10.1080/02646830500165846
- 10. Coast, E. (2019, February 10). Puberty and menstruation knowledge among young adolescents in low- and middle-income countries: a scoping review. SpringerLink. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6439145/
- 11. D, S., R, S., N, D., P, J., Singh, J. K., & Br, G. (2012). Perceptions regarding menstruation and Practices during menstrual cycles among high school going adolescent girls in resource-limited settings around Bangalore city, Karnataka, India. International Journal of Collaborative Research on Internal Medicine and Public Health, 4(7). http://internalmedicine.imedpub.com/perceptions-regarding-menstruation-and-practices-duringmenstrual-cycles-among-high-school-going-adolescent-girls-in-resource-limited-around-bangalore-city-karnataka-india.pdf
- 12. Deepa, S., Agrawal, T., Attokaran, T., Fathima, F. N., & Johnson, A. R. (2019). Awareness, perceptions and practices regarding menstruation and menstrual hygiene among studentsat a college in Bengaluru Urban district, South India: a cross-sectional study. International Journal of Community Medicine and Public Health, 6(3), 1126. https://doi.org/10.18203/2394-6040.ijcmph20190597
- 13. Ds, D., & Ch, G. (2005c). Perceptions and practices regarding menstruation: A comparative study in urban and rural adolescent girls. Indian Journal of Community Medicine, 30(1).

- https://www.popline.org/node/256047
- Ekoko, O. N., & Ikolo, V. E. (2021). Menstrual Hygiene Literacy Campaign Among SecondarySchool Girls in Rural Areas of Delta State, Nigeria. Library Philosophy and Practice (LPP) (ISSN 1522-0222), 5904. https://digitalcommons.unl.edu/libphilprac/5904/
- 15. Fingerson, L. (2005). Agency and the Body in Adolescent Menstrual Talk. Childhood, 12(1),91—110. https://doi.org/10.1177/0907568205049894
- 16. Garg, S., Sharma, N., & Sahay, R. (2001). Socio-cultural aspects of menstruation in an urbanslum in Delhi, India. Reproductive Health Matters, 9(17), 16—25. https://doi.org/10.1016/s0968-8080(01)90004-7
- 17. Garg, S., Singh, M. M., Basu, S., Bhatnagar, N., Dabi, Y., Azmi, F., Bala, I., Marimuthu, Y., &Borle, A. (2021). Perceptions of Frontline Workers, Female Health Workers, and School Teachers in Menstrual Hygiene Promotion among Adolescent Girls of Delhi, India: A Qualitative Study. Indian Journal of Community Medicine, 46(2), 201—205. https://doi.org/10.4103/ijcm.ijcm_137_20
- 18. Ghongdemath, J., Sidhmalswamy, A., Mallapur, A., & Shindholimath, V. (2016). Impact of adolescent health education on adolescent girls in rural schools and colleges. International Journal of Reproduction, Contraception, Obstetrics and Gynecology, 53—57. https://doi.org/10.18203/2320-1770.ijrcog20151497
- 19. Gundi, M., & Subramanyam, M. A. (2019). Menstrual health communication among Indianadolescents: A mixed-methods study. PLOS ONE, 14(10), e0223923. https://doi.org/10.1371/journal.pone.0223923
- 20. Gundi, M., & Subramanyam, M. A. (2020). Curious eyes and awkward smiles: Menstruationand adolescent boys in India. Journal of Adolescence, 85(1), 80—95. https://doi.org/10.1016/j.adolescence.2020.09.013
- 21. Hoerster, K. D., Chrisler, J. C., & Rose, J. G. (2003). Attitudes Toward and Experience with Menstruation in the US and India. Women & Amp; Health, 38(3), 77—95. https://doi.org/10.1300/j013v38n03_06
- 22. Hoffert, S. D., & Martin, E. (1988b). The Woman in the Body: A Cultural Analysis of Reproduction. The Journal of American History, 75(1), 228. https://doi.org/10.2307/1889681
- 23. https://www.actionaid.org.uk/blog/2022/05/18/period-poverty-statistics-around-world
- 24. India.com Lifestyle Staff. (2021, July 30). Why Involving 'Men' in Menstruation is The Needof The Hour. India.com. https://www.india.com/health/why-involving-men-in-menstruation-is-the-need-of-the-hour-4697217/
- 25. Jacobson, E. (1950). Development of the Wish for a Child in Boys. The Psychoanalytic Studyof the Child, 5(1), 139—152. https://doi.org/10.1080/00797308.1950.11822889
- 26. Johnson, H. (2019). Understanding and Debunking Menstrual Taboos in India: On theImportance of Education and Activism. New Views on Gender, 19, 6—13. Retrieved from https://scholarworks.iu.edu/journals/index.php/iusbgender/article/view/29293
- 27. Jones, J. (2018). Sampling in educational research: Evidence from Ghana. Journal ofEducation and Practice, 9(23), 76-85.
- 28. Kalman, M. B. (2003). Adolescent Girls, Single-Parent Fathers, and Menarche. Holistic Nursing Practice, 17(1), 36—40. https://doi.org/10.1097/00004650-200301000-00008
- 29. Kaur, R. (2018, February 20). Menstrual Hygiene, Management, and Waste Disposal:Practices and Challenges Faced by Girls/Women of Developing Countries. https://www.hindawi.com/journals/jeph/2018/1730964/
- 30. Kaur, R., Kaur, K., & Kaur, R. (2018b). Menstrual Hygiene, Management, and Waste Disposal:Practices and Challenges Faced by Girls/Women of Developing Countries. Journal of Environmental and Public Health, 2018, 1—9. https://doi.org/10.1155/2018/1730964

- 31. Kirkman, M., Rosenthal, D. A., & Feldman, S. S. (2002). Talking to a tiger: Fathers revealtheir difficulties in communicating about sexuality with adolescents. New Directions for Child and Adolescent Development, 2002(97), 57—74. https://doi.org/10.1002/cd.50
- 32. Kissling, E. A. (1996). Bleeding out Loud: Communication about Menstruation. Feminism & Amp; Psychology, 6(4), 481—504. https://doi.org/10.1177/0959353596064002
- 33. Mahon, T., Tripathy, A., & Singh, N. (2015). Putting the men into menstruation: the role ofmen and boys in community menstrual hygiene management. Waterlines, 34(1), 7—14. https://doi.org/10.3362/1756-3488.2015.002
- 34. Mansfield, P. K., & Stubbs, M. L. (2007). The Menstrual Cycle: Feminist Scholarship from the Society for Menstrual Cycle Research. Women & Amp; Health, 46(1), 1—5. https://doi.org/10.1300/j013v46n01_01
- 35. Marván, M. L., Vázquez-Toboada, R., & Chrisler, J. C. (2013). Ambivalent sexism, attitudes towards menstruation and menstrual cycle-related symptoms. International Journal of Psychology, 49(4), 280—287. https://doi.org/10.1002/ijop.12028
- 36. Mason, L., Sivakami, M., Thakur, H., Kakade, N., Beauman, A., Alexander, K. T., van Eijke, A. M., Laserson, K. F., Thakkar, M. B., & Phillips-Howard, P. A. (2017). 'We do not know': a qualitative study exploring boys' perceptions of menstruation in India. Reproductive Health,14(1). https://doi.org/10.1186/s12978-017-0435-x
- 37. Mason, L., Sivakami, M., Thakur, H., Kakade, N., Beauman, A., Alexander, K. T., van Eijke, A. M., Laserson, K. F., Thakkar, M. B., & Phillips-Howard, P. A. (2017b). 'We do not know': a qualitative study exploring boys' perceptions of menstruation in India. Reproductive Health, 14(1). https://doi.org/10.1186/s12978-017-0435-x
- 38. McCammon, E., Bansal, S., Hebert, L. E., Yan, S., Menendez, A., & Gilliam, M. (2020). Exploring young women's menstruation-related challenges in Uttar Pradesh, India, using the socio-ecological framework. Sexual and Reproductive Health Matters, Volume 28, 2020(1). https://doi.org/10.1080/26410397.2020.1749342
- 39. menstruation. (2023, January 15). The Merriam-Webster.com Dictionary. https://www.merriam-webster.com/dictionary/menstruation
- 40. National Family Health Survey 4 (2015-16). District Fact Sheet Nashik Maharashtra. MH_FactSheet_516_Nashik.pdf (rchiips.org)
- 41. Natracare. (2022, April 28). Should Boys Be Taught About Periods? Natracare. https://www.natracare.com/blog/should-boys-be-taught-periods/
- 42. Omar, H., McElderry, D., & Zakharia, R. (2003). Educating Adolescents About Puberty: What Are We Missing? International Journal of Adolescent Medicine and Health, 15(1). https://doi.org/10.1515/ijamh.2003.15.1.79
- 43. Parija, P. P., Sharma, N., Salve, H. R., Kumar, R., Yadav, K., & Mandal, S. (2022). A qualitative study regarding menstrual hygiene in a rural community of Haryana, India. Journal of Tropical Pediatrics, 68(6). https://doi.org/10.1093/tropej/fmac083
- 44. Peranovic, T., & Bentley, B. (2016). Men and Menstruation: A Qualitative Exploration of Beliefs, Attitudes and Experiences. Sex Roles, 77(1—2), 113—124. https://doi.org/10.1007/s11199-016-0701-3
- 45. Pistella, C. L. Y., & Bonati, F. A. (1998). Communication about Sexual Behavior among Adolescent Women, Their Family, and Peers. Families in Society: The Journal of Contemporary Social Services, 79(2), 206—211. https://doi.org/10.1606/1044-3894.1814
- 46. Sen, S. (2019, March 6). Putting "Men" In Menstruation: How The Unaware Gender IsWarming Up To The "Monthly Guest." The Logical Indian. https://thelogicalindian.com/exclusive/menstruation-stigma-men/

- 47. Smith, A. (2019). Quantitative research methods: An overview. Journal of Research Practice, 15(1), Article V1.
- 48. Srivastava, S., & Chandra, M. (2017b). Study on the knowledge of school girls regardingmenstrual and reproductive health and their perceptions about family life education programs. International Journal of Reproduction, Contraception, Obstetrics and Gynecology, 6(2), 688. https://doi.org/10.18203/2320-1770.ijrcog20170406
- 49. Tuli, A., Dalvi, S., Kumar, N., & Singh, P. (2019, October). "It's a Girl Thing": Examining Challenges and Opportunities around Menstrual Health Education in India. Association for Computing Machinery. 26(5), 1073. https://doi.org/10.1145/3325282
- 50. Wikipedia contributors. (2022, October 31). Women in Hinduism. Wikipedia. https://en.wikipedia.org/wiki/Women_in_Hinduism
- 51. Wilson, E., Haver, J., Torondel, B., Rubli, J., & Caruso, B. A. (2018). Dismantling menstrual taboos to overcome gender inequality. The Lancet Child & Amp; Adolescent Health, 2(8), e17. https://doi.org/10.1016/s2352-4642(18)30209-8
- 52. World Health Organization (WHO). (2020). Health literacy. https://www.who.int/healthpromotion/health-literacy/en/.
- 53. Yagnik, A. S. (2013). Reframing Menstruation in India: Metamorphosis of the Menstrual Taboo With the Changing Media Coverage. Health Care for Women International, 35(6), 617—633. https://doi.org/10.1080/07399332.2013.838246