# A study of practical aspects of menstrual hygiene - A Rural community based study

## Asha Shitole, Bandana Patnaik, Astha Pandey (Pathak), Rohan Patil

MIMER Medical College, Talegaon, Pune 410507, Maharashtra, India

## **Abstract**

#### **Introduction:**

Many adolescent girls lack of scientific knowledge about menstruation and puberty.

## Aims & Objectives:

- 1) To assess the knowledge of menstrual hygiene.
- 2) To assess the knowledge of menstrual related health problems & the nutritional status.

#### **Materials & Methods:**

Study designed – Cross sectional study.

Sample Size – 224 from 10 adopted villages

Study Period – 1 year.

Study Area - RHTC, Kanhe Phata Tal.Maval, Dist.Pune of Community Medicine Dept., MIMER Medical College.

#### **Method:**

Data collection regarding their current knowledge about menstruation & menstrual hygiene was collected by using a pre-tested questionnaire. Topics included-concerning menstruation, source of information, menstrual hygiene. This was explained to the girls going to school in their classroom after taking permission from the school authority.

#### **Result:**

1. The mean age - 14.5 yrs, Minimum age -11 yrs, Maximum age - 20yrs

#### 2. Menstrual related problem-

- Regular menstrual cycle - 73%

#### **Nature of bleeding**

Moderate - 64 %, Heavy - 22 %, Scanty - 14 %

## 3. Other complaints during menstrual cycle –

Abdominal pain - 59.25 %, Giddiness -15%, Nausea and vomiting - 18 %, Generalised weakness -47 % girls, White discharge - 22 %

#### 4. Menstrual hygiene

Taking regular bath.- 90 %, Cleaning of external genitals- 77 %, Use of clothes – 35%, Sanitary napkins - 65 %.

## 5. Nutrition –

According to B.M.I.- 55.55 % in healthy and 44.45% were underweight group.

#### **Conclusion:**

- 1. Thus it is important to encourage safe and hygienic practices among the adolescent girls.
- 2. It is important to educate them about issues related to menstruation, misconceptions and restrictions.

## **KEYWORDS:** Menstruation, Hygiene, Adolescence.

#### Introduction

- WHO has defined adolescence as the age group of 10-19yrs.(1)
- Adolescent girls constitute a vulnerable group, particularly in India where female child is neglected one.(10)
- Menstruation is a phenomenon unique to the females. The onset of menstruation is one of the most important change occurring among the girls during the adolescent years.(10)
- Menstruation is still regarded as unclean & dirty in Indian population.(1)Majority of girls lack scientific knowledge about menstruation & puberty.(2)
- The manner in which girl learns about menstruation & its associated changes may have an impact on her response to the event of menarche.(10)
- Although menstruation is a natural processes, it is liked with several misconceptions & practices which sometimes result into adverse health outcomes.(10)
- Hygiene related menstrual practices are of considerable importance, as it has a health impact in terms of increased vulnerability to reproductive tract infections(RTI).(10)
- Today millions of women are suffering from RTI & its complications & often the infection is transmitted to the offspring from the pregnant mother.(10,11)
- Therefore, increased knowledge about menstruation right from childhood may escalate safe practices & may help in mitigating the suffering of millions of women
- With the above background, this study was undertaken with the following objectives.

#### **Aim and Objectives**

- To assess the knowledge regarding menstrual hygiene, beliefs, conception & source of information among study population.
- To find out the menstrual related health problems & nutritional status among adolescent girls.

## **Material and Methods**

- Type of study: Community based cross-sectional study.
- Study area: The present study was under taken among the adolescent school girls in the field practice area of Rural Health & Training Center, Kanhe Fhata, Dist. Pune.

- Study population: All the girls between age 10-19 yrs from the 10 adopted villages of RHTC under Dept. of Community Medicine.
- Study tool: Questionnaire.

## Methodology

After taking permission from the school authority a pre-designed pretested & structured questionnaire was administered to the students.

This questionnaire included topics related to awareness about menstruation, source of information regarding menstruation, restricted activities during practice, health related problems & nutritional status.

Proper explanation of the questions were given to the students before filling the questionnaire. Sufficient time was given to fill the questionnaire. The questionnaire were collected on the spot.

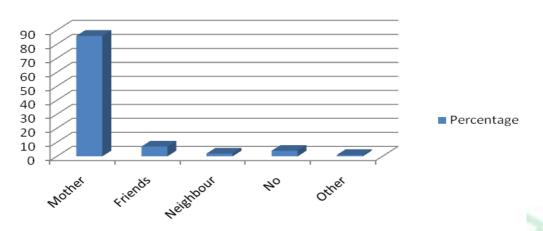
## **Statistical Analysis**

Data obtained were analyzed using appropriate statistical tools.

## **Results and Discussion**

In all 224 girls that participated in the study, it was observed that 176 (79%) had attained menarche, while 48 (21%) had yet to attain menarche. This is comparable to the study conducted by Shabnam Omidvar et al in Mysore where age at menarche in the selected group ranged from 10-17 years, with a mean of 13.4+\_1.2 years.

# **Source Of Information**

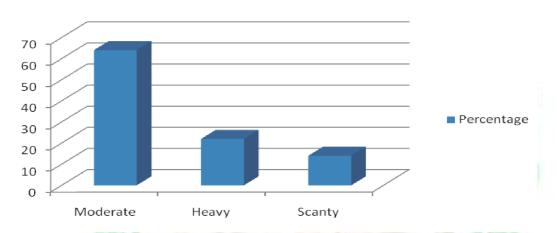


Out of total girls 75% (167) were aware about menstruation. In study conducted by Shabnam-Omidvar et al '12, 64.2% girls were aware regarding menstruation and Dasgupta & Sarkar 32.5% were unaware 86% girls reported that their mother was the main source of information. 4% don't have information from any source. Similar findings are reported by Deo et al & Parvathy Nair.

Menses were regular in 73% girls and in 27% were irregular. In a study conducted by D.S Deo et al , 14.56% had irregular cycles. When gynaecological age was considered the menstrual cycles were irregular in earlier ages while they became regular as gynaecological age progressed. The percentage of girls with irrregular cycles has been reported in the range of 10-16 years in studies of RamaRao A , Will Shiela et al. Duration of blood flow was 2 days in 10% girls, 3 to 6 days in 89% , more than 7 days 1%. Mean duration of blood flow was 4.9+\_1.29. The mean duration for menstrual bleeding was reported by RamaRao A(1963) was 5.05+\_1.19 and by Prasad B.G et al was 4.9+\_1.35 days.

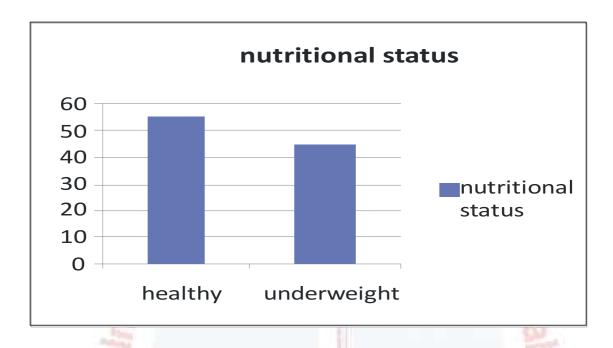
Shawn in table no.2





#### Duration of menstrual blood flow

The amount of blood flow was moderate in 64% girls, heavy in 22%, scanty in 14% girls findings were comparable to those of Wills Shiela et al & Vidya R.A et al. Menstrual related health problems were giddiness in 15% girls, nausea & vomiting in 18%, generalised weakness 47% these were mainly due to psychosomatic disorders or due to excess secretion of estrogen that required gynaecological assessment. Dysmenorrhea was in 59.25% girls white discharge in 22% girls. According to some international reports prevalence of dysmenorhea is very high & atleast 50% of women experience this problem throughout their reproductive years (Beck JS et al)and white discharge was reported in Will Shiela et al 7 because of unhygienic practices. In nutritional status according to BMI- 55.55% were healthy and 44.45% were underweight & all were non menstruating, In study conducted by Seema Choudhary et al. The risk of under-nutrition in adolescent girls was more in non-menstruating girls & low socio economic group. Table no.3show Nutritional status 55.55% healthy & 44.45% underweight.



## **Beliefs & Conceptions**

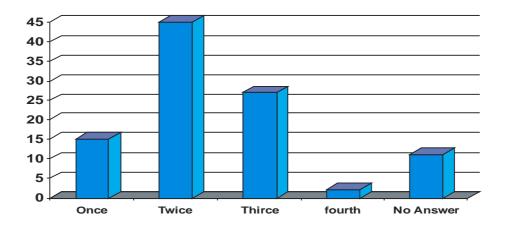
Isolation during menstrual period was reported by 45% girls, not visiting religious places was 55% was noted in this study. This shows the influence of socio-cultural beliefs and taboos regarding menstruation among these adolescent girls. Even literate females find it difficult to go against the restrictions by Das Gupta

#### **Menstrual and Practices in These Girls**

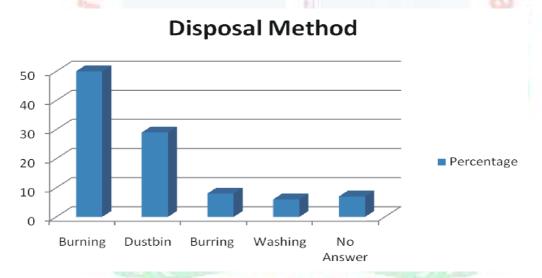
During menstrual period school attendance was 96%, doing regular work during menstruation was 70%, in study of Dipali Nemade et al, such findings were shown. In this study use of sanitary pads 65%, clothes 35% was reported this is because of less education & non affordability of sanitary pads.

In study conducted by Adinma et al, among Nigerian school girls, material used as menstrual blood absorbent toilet tissue paper was most commonly used followed by sanitary pads.

Frequency of change of pads was minimum, once in a day (15%) & maximum 4 times in a day (2%). No answer (11%), this is because of inadequate knowledge about menstrual practices. Detail frequency of change of pad is shown in (Frequency of change of pads) Table no 4



Cleaning of genitals with soap and water 77% & cleaning with water 23% was reported. Such findings were reported by Kadel B et al,



USe of types of clothes 94% were cotton, 6% were using synthetic, along with it use of clean& dry clothes.

In this study practices regarding disposal of pads, 50% was by burning, 29% in the dust bin, 3% burying, 7% no answer. Such practices were also reported in Kadel B et al study 7. Table no. 5 Disposal

#### Conclusion

Reproductive tract infections, have become a silent epidemic that devastates a woman's life is closely inter-related with poor menstrual hygiene. This study reveals that menstrual hygiene is far from satisfactory among a large proportion of the adolescents in the area of

 Maval Taluka, false perceptions, unsafe practices regarding menstruation and reluctance of the mother to educate her child are also common in this population Therefore girls should be educated about the facts of menstruation, secondary sexual characters, significance of menstruation and practices regarding it.

#### Recommendations

School education regarding menstrual practices is required. Universalized use of sanitary pads can be advocated to every girl only by making it available at affordable prices (social marketing). Special education to remove false beliefs. Education of mothers regarding menstrual hygiene is important

## Acknowledgement

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