FACTORS INFLUENCING MENSTRUAL HYGIENE PRACTICE AMONG ADOLESCENT GIRLS

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Abstract

Adolescents were classified as a healthy group and far from risk factors for illness, but most health problems can occur due to their poor behavior. Menstruation is a sign of adulthood. When menstruation came, the vagina becomes moister, and it increases the risk to stimulate fungus and bacteria to grow. That why menstrual hygiene is important to suppress the occurrence of infection. The purpose of this study is to determine the factors that influencemenstrual hygiene practice in adolescents. A survey method conducted on 82 students from seven and eight grade using a purposive sampling technique. Collected data analyzed by using logistic regression. The results showed that factors related to menstrual hygiene practice were knowledge (p-value: 0.002) and family (p-value: 0.004), while unrelated factors were friend (p-value: 0.07) and media (p-value: 0.1). Based on the logistic regression test, the knowledge factor is the most influential (p-value: 0.006 and Exp (B): 4.07). It is recommended to do health promotion regarding menstrual hygiene practices through collaboration with health services.

Key Words: Practice, Menstrual Hygiene, Adolescent

1. Introduction

According to the World Health Organization (WHO), adolescents are any person between ages 10-19 years. Demographically, adolescents divided into two groups; they are between ages 10-14 years and 15-19 years. According to Law Number 23/2002 concerning Child Protection, any person up to 18 years old categorized as a 'child' including adolescents. Indonesia, in 2010 had 18.3% of adolescents from the total population of around 43 million people. Adolescence is a transitional period of physical and psychological development between childhood and adulthood. Changes in girls marked by the onset of menarche and for boys may have 'wet dreams'. Those changes may cause relatively turbulent psychology compared to other developmental periods. Sexual maturation in girls shows at the age of 10-11 years started to have menarche. During menstruation, the vagina will secret become moist. This condition makes bacteria enter easily into the vagina and can cause infection in the reproductive organs. Therefore, the vagina's humidity and cleanliness must be maintained. According to Clement (2011), in Sina (2017), menstrual hygiene aims to prevent disease and increase feelings of well-being by maintaining the cleanliness and humidity of the reproductive organs. Praktik hygiene menstruasi ini masih kurang baik di kalangan remaja. Based on the previous research, most girls practicing menstrual hygiene. The study results

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note that the practice of menstrual hygiene in students of SMP Negeri 1 Terbanggi Besar, Central Lampung, which is good are 62.4% and 37.6% of the poor ones.[6] The importance of practicing good menstrual hygiene is to prevent infection, and this can be done by taking into account the associated factors. According to Green in Maulana (2013), some factors can affect the practice of menstrual hygiene. There are predisposing factors (knowledge, attitudes, beliefs, habits, cultural values, and socio-demographic factors), enabling factors (environment, advice, facilities) and reinforcing factors (attitude and behavior of officers, reference groups and community leaders).[7] Knowledge was significantly associated with menstrual hygiene practices. Based on a previous study, due to a lack of information about reproductive health from home or school, 66% of adolescents at the age of 10-11 years had a lack of knowledge compared to 34% of respondents.[8] The environment significantly influenced the menstrual hygiene practice. Parents were the most influential in providing initial information and providing solutions to menstrual hygiene problems. The previous study of Fajri and Khairani (2012) statistically showed the value of correlation coefficient of $r = 0.547$ with $p = 0.000$, which means there was a significant positive correlation between mother-child communication and readiness to face menarche. Most teenagers seek help and closures to their parents, including to comfort their confusion about menstrual hygiene problems.[9] The previous study of Gustina and Jannah (2015) stated that friends as information sources had a significant correlation with menstrual hygiene knowledge.[8] Mainbolagh et all (2012), in the previous study, stated that model-based nutrition education through friends had a positive impact on students' nutritional behavior. Media was another environmental factor that had a significant influence on teenagers' behavior. They were seeking information through the internet, social media, posters, leaflets, and other media.[11] This study aims to determine what factors influence menstrual hygiene practice among adolescents girls.

2. Method

A survey study conducted in August 2019 among 82 students of seven and eight grade of MTs N 1 Magelang City. The sample size was being determined using purposive sampling. A structured questionnaire instrument used to collect the data. The collected data were analyzed using the univariate analysis to describe each variable with a frequency distribution. Bivariate analysis was conducted to analyze each independent variable's relationship with the dependent variable using the chi-square test and multivariate analysis to see the factors that most influence the menstrual hygiene practice with logistic regression.

3. Results and Discussion

The results and discussion of this study are:

<table>
<thead>
<tr>
<th>No</th>
<th>Variable</th>
<th>Good (%)</th>
<th>Poor (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Menstrual Hygiene Practice</td>
<td>50</td>
<td>50</td>
</tr>
<tr>
<td>2</td>
<td>Knowledge</td>
<td>54</td>
<td>46</td>
</tr>
<tr>
<td>3</td>
<td>Family</td>
<td>41.46</td>
<td>58.54</td>
</tr>
<tr>
<td>4</td>
<td>Friends</td>
<td>47.56</td>
<td>52.44</td>
</tr>
<tr>
<td>5</td>
<td>Media</td>
<td>41.46</td>
<td>58.54</td>
</tr>
</tbody>
</table>

The table showed that some respondents were practicing poor menstrual hygiene. According to Blum (1974), in Maulana (2009), the behavior is the second biggest factor after environmental factors that affect individuals, groups, or communities.[7] Behavioral change is needed, especially
regarding menstrual hygiene practice so that adolescents have healthy reproductive organs.

The results showed there were still 46% of respondents who had a lack of knowledge. This result is consistent with other studies that showed most respondents at the age of 10-11 years have a lack of knowledge about external genitalia care, which is 66% compared to 34% of respondents, and it was due to lack of information about reproductive health from parents or school.[8] The results showed that 58.54% of respondents did not get information from the family as the person closest to the teenager. Before practicing menstrual hygiene, teens usually seek out people who have experience like a mother or sisters. According to a previous study of Gusti and Jannah (2015), 81% of students received information about menstrual hygiene from their mother, and 72.2% were from their sisters.[12]

Most teenagers were trying to find information from their friends, and based on the result, a friend indeed is their main source. Schools can be an ideal place to promote adolescent health in schools through peer education. It is considered useful for promoting healthy behavior among young people. The previous study of White et al. (2009) stated that peer educators play an important role in promoting health behavior like reducing alcohol use, drug use and increasing consumption of nutritious foods.[14] Information influence people's knowledge. The more information they get, the more knowledgeable they become. Information can be obtained from the media such as printed media, electronics (TV, radio, or computers), and outdoor media. The aim of using media is to get more significant people to their knowledge and indirectly change their behavior, such as practicing good menstrual hygiene. [15]

<table>
<thead>
<tr>
<th>Variable</th>
<th>Menstrual Hygiene Practice</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge</td>
<td>Poor 24 (29.3%)</td>
<td>9 (11%)</td>
</tr>
<tr>
<td></td>
<td>Good 17 (20.7%)</td>
<td>32 (39%)</td>
</tr>
<tr>
<td>Family</td>
<td>Poor 24 (29.3%)</td>
<td>10 (12.2%)</td>
</tr>
<tr>
<td></td>
<td>Good 17 (20.7%)</td>
<td>31 (37.8%)</td>
</tr>
<tr>
<td>Friends</td>
<td>Poor 26 (31.7%)</td>
<td>17 (20.7%)</td>
</tr>
<tr>
<td></td>
<td>Good 15 (18.3%)</td>
<td>24 (29.3%)</td>
</tr>
<tr>
<td>Media</td>
<td>Poor 18 (22%)</td>
<td>25 (30.5%)</td>
</tr>
<tr>
<td></td>
<td>Good 23 (28%)</td>
<td>16 (19.5%)</td>
</tr>
</tbody>
</table>

Table 2 shows that family knowledge and information significantly related to menstrual hygiene practices (p-value < 0.05), while friends and media significantly not related to menstrual hygiene practices (p-value > 0.05). Behavior is the result of experience and the process of interaction with the environment, which manifested in the form of knowledge, attitudes, and actions. These findings are consistent with the results from studies done by Mularsih (2017), which stated that knowledge was significantly influencing BSE practice and to change their behavior, efforts should be made to increase their knowledge.[16] Family involvement in providing information had a significant influence on increasing knowledge and changing behavior. Adibat et al. (2016), in their previous study, stated that there was a significant correlation between education from a family with hygiene practice.[17] Gusti and Jannah (2015) stated that most students received health information from their mother (81%) and the sisters.[10] Based on statistic analysis shows, there is no correlation between friends'
involvement and menstrual hygiene practices (p-value: 0.07). This study disagrees with results obtained from a study by Afriyani et al. (2019), which stated that peer education is very effective in increasing knowledge and behavior on genitalia hygiene (p-value: 0.0001). The reason could be that information provided by peer information mostly incomplete or incorrect. Even though they were of the same age and experience, but each individual had a different reaction and solution.

Statistical analyses show there is no correlation between media and menstrual hygiene practices (p-value: 0.1). Unlike Sri (2015), in the previous study, she stated that there is a correlation between media exposure and menstrual hygiene practices. The media can increase peoples’ interest, help achieve goals, help overcome many obstacles in understanding, stimulate people to pass on to others, facilitate the delivery of health information, encourage people's desire to know and explore, and gain a better understanding and help enforce acquired understanding. In this study, adolescents may not necessarily get complete and appropriate information through the media so that it is possible that adolescents do not correctly carry out menstrual hygiene practices.

**Table 3** Factors influencing Menstrual Hygiene Practice

<table>
<thead>
<tr>
<th>Variable</th>
<th>Sig</th>
<th>Exp(B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge</td>
<td>0.006</td>
<td>4.067</td>
</tr>
<tr>
<td>Family</td>
<td>0.015</td>
<td>3.468</td>
</tr>
</tbody>
</table>

Knowledge related to menstrual hygiene practice (p-value: 0.006) and a good knowledge four times more likely to have a good practice of menstrual hygiene. Family involvement in providing information also related to menstrual hygiene practice (p-value: 0.015). Family involvement is three times more likely to practice menstrual hygiene. Knowledge has more influence on changing peoples' behavior, and family involvement can also encourage them to practice menstrual hygiene. This finding is consistent with Dolang et al. study that stated there was a relation between knowledge and menstrual hygiene practice (p-value: 0.0001). Ningrum and Indriyani (2018) also found several factors that influence menstrual hygiene practices, and one of the most influencing was knowledge (p-value: 0.011; OR: 8.645).

Knowledge defines as an impression of the human mind as a result of the use of the fivesenses. Knowledge is everything that is known based on the experience gained by every human being. Some factors that influence a person's knowledge are education, occupation, age, interests, experience, culture, and information. Knowledge significantly affects people to practice menstruation hygiene properly from maintaining a healthy body up to do other things that support like selecting the type of underwear and the use of pads. Following health behavior definition is a process of a person to a stimulus or object associated with illness and disease, the health care system, food and drink, and the environment. Behavior is also known as the second most significant factor after the environment that affects individuals, groups, or communities. According to Green in Maulana (2013) factor that affects peoples’ behavior are predisposing factors (knowledge, attitudes, beliefs, habits, cultural values, and socio-demographic factors), enabling factors (environment, advice, facilities) and reinforcing factors (attitude and behavior of officers, reference groups and community leaders).

Knowledge is an essential domain in shaping peoples’ actions/behavior. Previous studies have proven that behavior can last longer when based on knowledge. Knowledge is an
essential domain in shaping peoples' actions/behavior. Previous studies have proven that behavior can last longer when based on knowledge. When adolescent girls have good knowledge about menstrual hygiene and practice it correctly, it can affect the reproductive organ's health. It needs an effort to increase knowledge about proper menstrual hygiene through accurate sources and collaboration with health facilities, adolescent reproductive health program holders, and health education institutions.

4. Conclusions

Factors that influence menstrual hygiene practice are knowledge (p-value: 0.002) and family (p-value: 0.004), while the factors of peers and media do not affect. The knowledge factor is the most influential in changing behavior towards practicing menstrual hygiene. It is recommended to research sites to collaborate with the holders of adolescent health programs, health facilities, or educational institutions to provide information to students about menstrual hygiene practices.

5. Acknowledgment

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6. References