Menstrual Knowledge and Hygiene Management of Adolescent Girls

ABSTRACT

The study is to measure the menstrual knowledge and hygiene practice of adolescent girls of low socio income group. Purposive sampling method was used for selection of sample. A self-developed Questionnaire was used to measure the knowledge and hygiene practice among the adolescent girls. Results showed that the levels of knowledge regarding the menstrual health is low among the respondents as this was rarely discussed in homes because of it being surrounded by social taboos and restriction. The hygiene practice and management of menstruation was also very low. There exists a positive correlation among menstrual knowledge and hygiene management of adolescent girls which clearly indicates that if the menstrual knowledge of the adolescent girls increases that there can be improvement in the hygiene practices of the adolescent girls.

KEYWORDS

Adolescent, Menstruation, Menarche, Knowledge, Hygiene

INTRODUCTION

Adolescence is a unique phase of human development that spreads between the age of 10 and 19 years. Accelerated growth in reproductive organs is the most significant change during adolescent period. The girls attain puberty and their menstrual cycle starts. Menstruation is a normal and unique phenomenon to the females. It is the natural process of the reproductive cycle in which blood from the uterus exits through the vagina. Menstruation knowledge and its hygiene practices are clouded by taboos and socio cultural restrictions resulting in adolescent girls remaining ignorant of the scientific practices and facts and hygienic health practices, which sometimes result into adverse health outcome. Hygienic practices of women during menstruation are of considerable importance, as it has a health impact and it can cause reproductive tract infections. The menstruation knowledge and hygiene practices are rarely discussed at home or in schools, because of it being marked by taboos and social restrictions. Lack of information given to adolescent girls about the menstruation knowledge and the hygienic practices to be followed, leads to adverse health outcomes like reproductive tract infection, UTIs etc. Inadequate hygiene practices and management among adolescent girls increase susceptibility to infection. It is assumed that the risk of infection (including sexually transmitted infection) is higher than normal during menstruation because the blood coming out of the body creates a pathway for bacteria to travel back into the uterus.

MATERIALS AND METHODS

The study was carried out in Hyderabad, mainly focusing the low socio income group economic status. A self-developed questionnaire, structured and close ended questions was used to assess the menstruation knowledge and hygiene practice of the adolescent girls of low socio income groups. The knowledge questions consisted of questions such as process of menstruation, cause, source, duration of menstruation along with menarche. The hygiene practice question included use of absorbent material in menstruation, about personal hygiene during menstruation, and frequency of changing pads. The information collected was tabulated and statistically analyzed by using percentages, frequencies and correlation.

RESULTS AND DISCUSSION

Table 1 Knowledge levels for process of menstruation in Adolescent Girls

n=30

Menstruation process is a	Frequency	Percentage
Physiological process	7	23.33%

Pathological process	2	6.66%			
Don't know	21	70.00%			
Cause of Menstruation					
Hormones	16	53.33%			
Caused by the disease	4	13.33%			
Don't know	10	33.33%			
Source of Menstrual					
blood					
Uterus	2	6.66%			
Vagina	8	26.00%			
Don't know	20	66.66%			
Duration of Normal					
Menstrual cycle					
20-28 days	10	33.33%			
28-40 days	2	6.66%			
Don't know	18	60.00%			
Heard about Menstruation					
before attaining					
menarche					
Yes	3	10.00%			
No	27	90.00%			

The above table indicates that about $3/4^{\text{th}}$ of the adolescent girls in the study "Don't know" What is menstruation process ,23.33% of adolescent girls pointed out that menstruation is physiological process and 6.66% said that menstruation process is pathological process. Physiological process refers to the process that occurs naturally in the human body, this process is the vital function for the human body. On the other hand, pathological process refers to the disease due to invasion of the body by pathogenic microorganisms and their multiplication which can lead to tissue damage and disease

 Majority (53.33%) of the adolescent girls were aware of the fact that menstruation process is caused due to hormone. Hormones are the chemical messenger of the body. It was very depressing to see that 13.33% of the adolescent in the study have a believe that menstruation is caused by the disease. As much as 33.33% of the adolescent girls don't know the cause of menstruation. This figure indicates that menstrual knowledge is poor because no proper information channel is available for adequate and proper information. Menstruation is still a social taboo in our society. This might be because nobody talks much about the menstruation. There is gap in educational system where reproductive health is not taught because either considered non-important or unsocial. It is assumed that knowledge regarding menstruation will come gradually by its own.

The above table shows that knowledge about the source of the menstruation blood was answered as vagina by only 26.66% clearly indicating low knowledge and information about the menstruation cycle. It is also to be indicated that 66.66% of adolescent girls "Don't know" the source of menstruation blood.

The duration of normal menstruation cycle of 20-28 days was indicated correctly by less than 50 % of the adolescent girls. Menstrual cycle is the normal 28 days cycle of the girls who have attained menarche. This normal cycle indicates the normal and healthy life of the girls. This cycle is the normal cycle of the females

 Prior information about menarche before its attainment was not available to 90% of the adolescent girls in the present study. A mere population of 10% had heard about menarche and menstruation cycle before they actually experienced it. The prior information is not given to adolescent girls before the actually experience because of the social taboo and belief that is still prevailing in the present society. Thakre *et al* [4] found that only 36.95% of the girls were aware of menstruation before menarche. The major source of information about menstruation for them was found to be their mothers. More than three fourth of the girls in the study were not aware of the cause and the source of the bleeding.

hygiene, and 71% had inadequate knowledge about menstrual hygiene. Composite practice scores showed that 19%, 69%, and 12% samples had poor, fair, and good score of practices regarding menstrual hygiene, respectively. It was further pointed that, significant positive association between good knowledge of menstruation and educational status of the mother only.

Table 2. To assess the practices regarding menstrual hygiene among adolescent girls

88 n=30

Statements	Yes		No	
	Frequency	Percentage	Frequency	Percentage
Uses absorbent materials during menstruation	30	100	_	_
Uses commercially made sanitary pad as absorbent material during menstruation	12	40.00	22	73.33
Clean clothes with soap and water	15	68.00	07	31.81
Dry cloths in sunlight	14	63.36	8	36.36
Changing pads or cloths more than three times and above during menstruation	10	33.33	20	66.66
Do you change /reuse the cloth for every cycle	14	46.66	16	53.33
Disposes used sanitary pads in dustbin	17	56.66	13	43.33
Uses paper to dispose the pads by wrapping	9	30.00	21	70.00
Takes bath daily with soap during menstruation	18	60.00	12	40.00
Clean external genitalia during menstruation	16	53.33	14	46.66
During Menstrual cycle, I use undergarment separately	4	13.33	26	86.66

The above table revealed the menstrual hygiene practice among adolescent girls. All the adolescent girls in the study used absorbent cloth during their periods. The commercially available pads were used by only 40 % of the adolescent girls and more than half (60%) adolescent girls used old clothes during their periods. Use of the old clothes by the majority of the adolescent girls was due to lack of affordability and accessibility of the sanitary pads made commercially. Sharma *et al* [2] found that majority of the girls preferred cloth pieces rather than sanitary pads as menstrual absorbent. Apparently, poverty, high cost of disposable sanitary pads and to some extent ignorance discouraged the girls from using the menstrual absorbents available in the market.

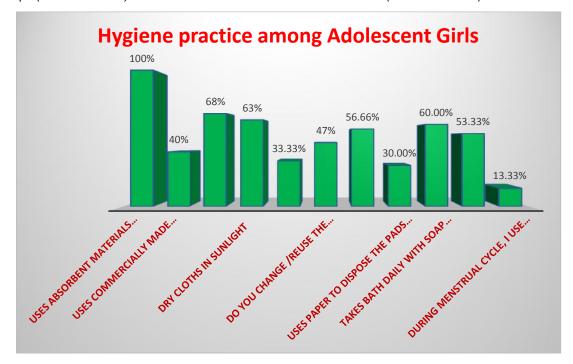
As much as 70.00% of the adolescent girls used soap and water to clean their used sanitary pads. This figure is noteworthy and indicates some good practice in them. A majority of the adolescent (63.36%) dried the clothes in sunlight.

The percentages clearly indicated low hygiene practices in the adolescent girls. Majority of the adolescent girls did not change their pads or cloths more than three times and above during menstruation and, hence indicated low hygiene practice during menstruation. Majority of the adolescent girls (56.66%) did not Disposes used sanitary pads in dustbin. Moreover 70.00% of the respondents did not wrap the pads with papers to dispose it. Majority of the adolescent girls i.e. 86.66% during Menstrual cycle, did not have practice of using undergarment separately for period.

Ramchandra *et al* [3] revealed that around 34% participants were aware about menstruation prior to menarche, and mothers were the main source of information among both groups. Overall, 69% of adolescent girls were using sanitary napkins as menstrual absorbent, while 6% were using both cloth and sanitary napkins. Almost half of the rural participants dried the absorbent inside their homes.

Varghese *et al* [5] pointed out the average level of menstrual hygiene practices was 75 % of proper menstrual hygiene. Factor analysis on menstrual hygiene showed highest scores on frequency of changing the pad, bath during menstruation, absorbent used and access to water. Average level of hygiene practices was comparatively more among girls who belonged to higher socio-economic

groups (Pvalue = 0.003) and those who had access to a covered toilet (P value = 0.000).



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Table 3. Testing of Hypothesis

Null Hypothesis

There will be no association between menstrual health knowledge and hygiene practice of adolescent girls.

Alternate Hypothesis

There will be a significant association between menstrual health knowledge and hygiene practice of adolescent girls.

Knowledge

Hygiene

		S	Practices	
	Pearson Correlation			
Knowledge	Sig. (2-tailed)			
	N	.626		
Hygiene practice	Pearson Correlation			
	Sig. (2-tailed)			

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An inference could be drawn from the above table that knowledge about menstruation and menstrual hygiene practice have a positive correlation with each other, This correlation clearly indicates that if the menstrual knowledge of the adolescent girls increases that there can be improvement in the hygiene practices of the adolescent girls.

CONCLUSION

The main problem areas identified in this study were poor knowledge of menstruation, and hygiene practice. This study has highlighted the need of adolescent girls to have accurate and adequate knowledge about menstruation and its appropriate hygiene management. Formal as well as informal channels of communication such as mothers, sisters and friends need to be emphasized for the delivery of such knowledge.

Schools should be another entry point for improving menstrual health by integrating menstrual hygiene into curriculum. Menstrual health is an important part of life cycle approach to women's health, so loud and clear messages and services on this issue must reach adolescent girls.

There is a need to provide education and equip them with skills regarding safe and hygienic practices and to make appropriate choices so as to enable them to lead a healthy reproductive life and prevent the risk for reproductive tract infections. There is also a need to empower mothers and teachers to function as primary sources of information on menstruation including reproductive health as they are accessible to handle adolescent issues and facilitate referrals as the need arises.

Education has been the key stone in propagating menstrual hygiene practices. Although there is repeated sensitization and reinforcement of all these components among adolescent school girls, certain components are not being practiced. Strategies such as access to water, sanitation, hygiene of external genitalia and access to covered toilets are still deficient and it plays a major role to adopt safe practices.

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