Menstrual Hygiene in Rural Telengana - A Study

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Abstract: Menarche is the visible evidence that a girl has “grown up” into a woman and is celebrated all over the world. In most countries, it is still considered a subject to be discussed only in private. Any queries a girl has are addressed behind closed doors by peers who may be as ignorant as she is regarding menstruation. Inadequate menstrual hygiene leads to reproductive tract infections which contribute to morbidity later on. Keeping this in mind, a first time study regarding knowledge, source of information and menstrual hygienepractices among young girls was conducted in rural Telengana.

Aims And Objectives: To study the awareness and beliefs regarding menstrual hygiene in rural Telengana.

1) To find out the main source of knowledge regarding menstruation and menstrual hygiene in young girls
2) To educate these girls on the importance of menstrual hygiene

Methodology: A target population was selected in rural Telengana. Young girls (both married and unmarried) in the age group of 15-20 years were included. A pre-validated questionnaire was distributed. An informal question and answer session was organized to educate these girls about menstrual hygiene. The collated data was analysed by simple proportions.

Results And Conclusions: A good proportion of girls in Telengana are using disposable sanitary pads. Dietary restrictions are being practised by girls during menstruation. Some of them are housebound during this period. The method of disposing the pads was satisfactory in two thirds of the girls. The source of knowledge about menstruation and menstrual hygiene seems to stem from the peer group.

Keywords: Menstrual hygiene, menarche, reproductive tract infections, sanitary pads

I. Introduction

Background: Even in the twenty first century menstruation is still a subject to be discussed behind closed doors. Women are reluctant to openly come out with their problems much less the adolescent teenage girls¹. All published Indian studies have targeted North Indian populations.

Menstrual hygiene refers to the effective management of menstrual bleeding by women and girls, is an important aspect of reproductive health. If this is neglected, it can cause infections of the urinary tract, pelvic inflammatory disease and vaginal thrush as well as bad odor, soiled garments, and ultimately shame leading to infringement on the girls dignity². Menstruation can predispose women to life threatening RTI (Reproductive Tract Infections) if proper hygiene is not maintained during menstruation².⁴.

The purpose of this study is to see the level of menstrual hygiene practised among young girls in rural Telengana. Their knowledge, attitude and practices will be highlighted. The knowledge, practices and attitude which develop at this age are usually followed by them throughout their life and also into the next generation². The use of unhygienic material may lead to infections which may hamper the reproductive life of the female².

Menstruation is considered unclean from time immemorial leading to them being isolated from society and a number of restrictions being imposed on them⁵. These restrictions involve both physical activities and dietary restrictions⁶. Menstruation is also construed to be a matter of embarrassment in most cultures⁷.

II. AIM

1) To study the knowledge, attitude and practices and source of information regarding menstrual hygiene among young girls in rural Telengana.
2) To determine the status of menstrual hygiene among them

III. Material And Methods

A cross sectional study was done in rural Telangana for four months (from 1st November 2015 to 29th February 2016). The girls were selected by simple random sampling and were all below the poverty line (they all had the white ration cards which in the state of Telengana means they were from poor families).

Two hundred and forty young girls (both married and unmarried) in the age group of 15-25 years were included in the study. The age was corroborated with written records (Aadhar cards, ration cards, birth certificates, school records etc). The purpose of the study was explained to the girls and verbal consent was taken. A pre-validated
questionnaire was then distributed among the population. This questionnaire tested their knowledge, attitude and practices regarding menstruation and menstrual hygiene. The primary source of knowledge of menstrual hygiene was also included. An informal question and answer session followed, where the girls were educated about menstruation and menstrual hygiene. The data was analysed by simple proportions.

IV. Results

Fig 1: Distribution of girls in the study

Age distribution of girls

<table>
<thead>
<tr>
<th>Age (years)</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>26</td>
</tr>
<tr>
<td>16</td>
<td>28</td>
</tr>
<tr>
<td>17</td>
<td>64</td>
</tr>
<tr>
<td>18</td>
<td>82</td>
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<tr>
<td>19</td>
<td>24</td>
</tr>
<tr>
<td>20</td>
<td>16</td>
</tr>
</tbody>
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Fig 2 Level of education

Education levels

<table>
<thead>
<tr>
<th>Education level</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRIMARY</td>
<td>7%</td>
</tr>
<tr>
<td>MIDDLE</td>
<td>12%</td>
</tr>
<tr>
<td>HIGH</td>
<td>43%</td>
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<tr>
<td>INTER</td>
<td>38%</td>
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</tbody>
</table>

Fig 3 Marital Status

Marital Status

<table>
<thead>
<tr>
<th>Marital Status</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>MARRIED</td>
<td>48</td>
<td>20%</td>
</tr>
<tr>
<td>NOT MARRIED</td>
<td>192</td>
<td>80%</td>
</tr>
</tbody>
</table>

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Fig 4: Kind of pads used

Type of Pad used
- Sanitary pad: 68%
- Reusable: 32%

Fig 5: Restrictions during menstruation

Restrictions during menstruation
- Yes: 24%
- No: 76%

Fig 6: Methods of Disposal

Methods of disposal
- Adequate: 110
- Inadequate: 98
V. Summary

Two hundred and forty girls included in the study. Their mean age was 17.4 years (Fig 1). In our study, all girls attended school. A majority of them (44%) went to high school (Fig 2). Only 20% of the girls were married (Fig 3). 68% of the girls used disposable pads. These included sanitary pads bought from local stores and cut up old clothes like sarees etc. A few girls used a combination of sanitary pads and old clothes. Regarding restrictions practised during menstruation, all girls, except two, abstained from religious activities. With respect to other activities 76.25% practised all kinds of restrictions. These included limitations on physical activity, absence from school, refraining from household work, not having regular baths etc. Some girls did not eat some kinds of food like sour food, “hot” food like chicken etc. 40.8% (n= 98) disposed their pads in an unsatisfactory way. “Unsatisfactory” in our study was defined as disposal of pads in the open air, uncovered bins etc. If they wrapped the pads in a paper bag and disposed them in a place meant for solid waste disposal, it was considered adequate. 35.8% were not aware about menstruation prior to their own menarche. The first informant about menarche and menstruation was the mother in 37.5% of the cases and peer group in 34.1%.

VI. Discussion

It is heartening to note that 44% of the girls went to high school. The girls were aware of the value of education, and more important their parents sent them to school. 80% of the girls were unmarried prior to the age of twenty. About two-thirds of the girls used disposable pads (68.3%). In a previous study by Dasgupta et al in West Bengal, only 11.25% of the girls used sanitary pads. In a similar study by Kamath R et al, 65% of the respondents used disposable sanitary pads. In our study, the reusable pads were dried in the house (not outside) as menstruation was considered impure and meant to be hidden. 67% of the girls using sanitary pads disposed them adequately. A few girls told us that they disposed their pads in the toilet basin inspite of knowing it could block it. In other studies, adequate disposal was done in 56% of the cases only.

**Fig 7: Knowledge prior to onset of menses**

<table>
<thead>
<tr>
<th>Prior Knowledge</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td></td>
<td>36%</td>
<td>64%</td>
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**Fig 8 First Informant**

<table>
<thead>
<tr>
<th>First Informant</th>
<th>Mother</th>
<th>Peer</th>
<th>Teacher/School</th>
<th>Media</th>
<th>Relatives</th>
<th>Others</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>90</td>
<td>82</td>
<td>24</td>
<td>7</td>
<td>16</td>
<td>21</td>
</tr>
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</table>
Mothers, friends, teachers, television and relatives were the main source of information on menstruation to the adolescent girls according to the various studies\(^1\,3\,4\,5\). In our study the main source of information was mothers and their peer group. It was possible to question a few of the mothers of girls who attained menarche prior to the girls’ having any knowledge of menstruation. They said that their daughters attained menarche very early (before ten years of age) and hence they did not discuss this issue with them. In our study, 64.1 % of the girls were aware of menstruation prior to the onset, in contrast to only 32%- 35% in similar studies\(^5\,8\). In another study by Rupali Patle et al\(^9\), there was a 30% increased awareness on this subject by urban girls as compared to rural girls. In our study, all girls said they bathed everyday during menstruation, in contrast to other studies\(^7\), where some girls did not bathe during menstruation. Likewise 60% of the girls used soap and water to clean their private parts in our study\(^7\).

VII. Conclusion

Poor menstrual hygiene which contributes to silent reproductive tract infections is a public health problem which should be tackled at the home itself. Since a majority of the girls are using disposable pads, the initiative of the government in providing subsidised pads to these girls is welcome. Since a majority of them disposed the pads adequately, only a few need to be educated about proper disposal. Peer group seems to emerging as playing a major role in one’s lives. They are replacing the traditional mother as the first teacher slowly. Both the peer group and the mothers have to be educated scientifically to educate the young ones. Mothers have to educate their daughters from an earlier age, or else wrong ideas about menstruation will impregnate the mind of these girls. There is a need to implement appropriate public health measures at various levels of prevention\(^7\) as has also been noted in various other studies. The need of the hour for girls is to have the information, education and an enabling environment to cope with menstruation issues\(^1\).

Menstrual hygiene and management will directly contribute to the Millennium Development Goal (MDG)- 2 on Universal education and MDG – 3 on gender equality and women empowerment\(^7\).

References