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Knowledge and practices regarding menstruation among adolescents of Kailali district

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Abstract

The present study was undertaken to assess the knowledge and practices regarding menstruation among school going adolescents. The descriptive cross sectional method was adopted to carry out this research. The sample for the study comprised of 46 girls of 9th and 10th grade in the age group 10-19 years. A combination of convenience and random sampling technique was used for selection of the sample group Saraswati High School Dhangadhi of Kailali district. Self administered Questionnaires was used assess their knowledge and practice regarding menstruation among adolescent girls. The most common source of information about menstruation for the majority of the sample girls were mothers. Most of the girls had faced the menstrual problems like dysmenorrhoea and almost respondents had applied the remedial measures. Their ideal thing to use during menstruation was sanitary pads and somebody was using some absorbents too. The reactions to first menstruation were scare, indifferent, discomfort, disgust and guilt and other reactions, but there were several socio-cultural taboos related to menstruation. So it can be recommended that further studies can be done to explore detail information.

Keywords: Adolescents. Menstruation, restrictions, knowledge, menstrual hygiene

Introduction

Adolescence is recognized as a special period that signifies the transition from girlhood to womanhood (Thakre & *et al.* 2011) ^[9]. Most of the changes like: hormonal, psychological and cognitive change occur in this stage. Among them, menarche is the most important event in the life of an adolescent girl (Nagar & Aimol, 2010) ^[5]. And they have to face several challenges with emotional, social and behavioral dimensions (Gaudineau, 2010) ^[3]. Menstruation is taken as a restriction or as a taboo on women's religious and social traditions rather than just a physiological process (Um, Yusuf & Musa, 2010) ^[13].

Menstruation is a normal, recurrent, physiological event (UNICEF, 2008) ^[14]. Women make up half the population over the world (49.58%, 3.55 billion) (United Nations, 2013). But, menstruating girls and women are considered as unclean and untouchable during menstruation (Thakur & *et al.* 2014) ^[11]. But, mothers, teachers and friends are the primary source of information related to menstrual awareness (Aniebie, Anieb, & Nwankwo, 2009s) ^[2] for adolescent girls. Social prohibitions and negative attitudes of parents in discussing the related issues openly have blocked the access of adolescent girls to the appropriate of information (Thakre & *et al.*, 2011) ^[10]. They feel shy to share their feelings and problems; therefore, it is important to pay more attention in this phenomenon. But, research about menstruation has been neglected for a long time (Yagnik, 2012) ^[16].

Moreover, It has been demonstrated that menstrual hygiene practices are still lacking and vary according to socio cultural beliefs prevalent in different societies (Guterman, Mehta, & Gibbs, 2008) ^[4]. Very few studies, conducted in developing countries, have revealed that girls usually share the customs and socio cultural beliefs of their parents (Ali & Rizvi, 2009) ^[1]. Cultural and societal taboos regarding menstruation leads to widening gender disparity in Nepal. Some examples of menstruation restrictions in Nepal are: cooking, entering a kitchen, touching men, having sexual intercourse, clothing, eating together and many more (Water Aid Nepal, 2009) ^[15]. Many of these restrictions are still prevalent in societies having their own versions of restrictions for menstruating females (Thomas, 2007) ^[12].

This study was carried to evaluate adolescent secondary school girls' knowledge of menstruation and menstrual hygiene, as well as their practices of menstrual hygiene. In many parts of the developing countries like Nepal, a culture of silence surrounds the topic of

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menstruation and related issues (Singh, 2006) [8]. As a result many young girls lack appropriate and sufficient information regarding menstrual hygiene. This may result in incorrect and unhealthy behavior during their menstrual period. Poor personal hygiene and unsafe sanitary conditions result in the girls facing many gynecological problems (Shanbhag, 2012) [6].

Menstruation and its practices are still clouded by taboos and socio-cultural restrictions resulting in adolescent girls remaining ignorant of the scientific facts and hygienic health practices, which sometimes result into adverse health outcomes (Shokry, Allah, Elsayed and Elsabagh, 2011) [7]. Our traditional society discourages open discussion on these issues. Such type of study will help to plan and implement necessary educational program or interventions to create awareness and prioritize problems.

Methods

This was a descriptive cross sectional study carried out in educational year 2018-2019 A.D. Dhangadhi Sub metropolitan city Kailali district was chosen as per convenience as it is the resident area of this researcher. The study was conducted in Saraswati High School Manehara which was selected randomly. Total 46 students of 9 and 10 grade from the age group 10 to 19 years and those who already had menarche were included in the study. Age of the girls was ascertained from school records and rounded off to nearest completed year. A predesigned, pre-tested structured questionnaire regarding perceptions and practices about menstruation was provided which included questions related to awareness about menstruation, source of information regarding menstruation, taboos and restrictions as result of hygiene during menstruation. The queries of respondents were answered by principal researcher during study. Oral consent was taken from respondents and assent from concerned school authority as an ethical consideration. Data were entered into Microsoft Excel and then transferred to Statistical Package for Social Sciences (SPSS) 20.0 version. Descriptive statistics like frequency, mean, standard deviation and percentage were used.

Results

On the basis of asked questionnaire, the responses of the respondents are presented below. The questions were mainly based on their demographic characteristics, their attitude towards menstruation, practice and adopted remedial measures.

Table 1: Socio demographic characteristics of respondents

Characteristics	Categories	Frequencies	Percentage
Age	10-14 years	19	41.30
	15-19 years	27	58.69
Religion	Hindu	42	91.30
	Christian	3	6.52
	Islam	0	0
	Buddhist	1	2.17
Ethnicity	Brahmin	10	21.73
	Chhetri	8	17.39
	Ethnic Minorities	20	43.47
	Dalit	8	17.39
Total		46	

Table 1 shows that the demographic characteristics of the respondents. According to this table more than of the respondents 27 out of 46 (58.69%) were in late adolescence

and rest of were in early adolescence. Similarly, almost of the respondents 42(91.3%) were Hindus followed by Christian 3 (6.52%) and 1 (2.17%) were Buddhist and most of the respondents were from ethnic group 20(43.47%) and followed by the Brahmin 10 (21.73%).

Table 2: Menstruation and its Related Experiences

Characteristics	Categories	Frequencies	Percentage
Knowledge Regarding Menstruation	Monthly cycle where blood flows from vagina for 4-5 days in matured female	19	41.30
	Monthly flow of dirty blood from vagina	8	17.39
	Natural process in every adolescent female	7	15.21.
	A sign of maturity	7	15.21
	Do not know	5	10.86
Sources of information	Mother	26	60.46
	Friends	5	10.86
	Teachers	1	2.17
	Reading Materials	0	0
	Health Workers	0	0
First sharing menarche	Mother	29	60.04
	Sisters	8	17.39
	Friend	9	19.56
	Lady Teachers	0	0
Experience at Menarche	Scared/ worried	17	36.95
	Indifferent/ unconcerned	3	6.52
	Discomfort	15	32.60
	Disgusted/ shocked	4	8.69
	Guilty	4	8.69
	Others	5	10.86
Attitude towards Menstruation	Undesirable	9	19.56
	Unprepared	12	20.08
	Satisfactory	25	54.34
Menstrual Problems	Dysmenorrhoea	29	60.04
	Loss of Appetite	2	4.34
	Tired/Back Pain	8	17.39
	Excessive Blood Loss	6	13.04
	Nothing	1	2.17
Remedial Measure Adopted	Maintain Personal Hygiene	20	43.47
	Do not Know	5	10.86
	Drink lots of Water/Eat Fruits	2	4.34
	Exercise	2	4.34
	Take Rest/ Sleep	15	32.6
	Seek for Health Care services	2	4.34

Table 2 shows the menstruation and its related experiences of respondents. According to this table, 19 (41.3%) respondents answered that the menstruation is the monthly cycle where blood follows from vagina for 4-5 days in matured female but 5(10.86%) of the respondents didn't know about menstruation. In the same way, majority of the respondents (60.46%) had got the information from their mothers and the first sharing person of 60% respondents was also their mother. The reactions to first menstruation were scare, indifferent, discomfort, disgust and guilt and other reactions. In which 36.95% respondents had the scared experience, 6.52% had the indifferent experience, 32.6% had discomfort experience, 8.69% had the disgusted, and 8.69% had the guilty and 10.86% had other experiences like

surprise, depression, and fear and so on. Another question was about perception towards menstruation in which more than half of the respondents' (54.34%) attitude was satisfactory. Similarly, more than half of the respondents (60.04%) had the experience of Dysmenorrhoea problems, 13.4% had excessive blood loss problems, 2.17% have nothing problems. Another question was about adopted remedial measures for menstruation problem, in which similar type of answer was found, but 10.86% respondents didn't know about the remedial measures of menstruation.

Table 3: Practices Related to Menstruation

Characteristics	Categories	Frequencies	Percentage
Ideal Thing to Use During Menstruation	Sanitary Pad	34	73.91
	Cloth	24	52.17
	Both	31	67.39
Absorbents in Practice among the Respondents	Sanitary Pad	17	36.95
	Cloth	33	71.73
	Both	15	32.60
Number of Absorbents changed in a day	Once a day	21	45.65
	Twice a day	32	69.56
	Thrice a day	17	36.95
	More than once in a day	21	45.65
Traditional Practice	Not allowed to participate in religious activities	18	39.13
	Not allowed to do household activities	21	45.65
	Not allowed to touch male member of family	25	54.34
	Not allowed to touch fruit trees and battles	22	47.82
	Use older cloths at the time of menstruation	13	28.26
	Take a bath only after 4 days and allowed to enter home only after 7 days	21	45.65
	Keep far from home and separate place	8	17.39
	Nothing such	3	6.52

Multiple response questions, thus percentage does not equal to 100.

Sanitary pad was the ideal thing to use during menstruation for almost three fourth of the respondents (73.91%, 46), while cloth of 52.17% and both materials of 67.39% of the respondents. Similarly, majority of the respondents 71.73% used cloths, 36.95% sanitary pads and 32.60% had used both materials during menstruation. Almost half of the girls (45.65%) changed their pads once a day, in contrast to this, 69.56% changed their pads two times a day, 36.95% changed the pads thrice a day and 45.65% of the girls changed the pads more than once per day. Another question was about several traditional practices regarding menstruation. Almost half of the respondents (39.13%), reported that menstruating ladies are not allowed to participate in religious activities, 45.65% of the girls answered that we are not allowed to do household activities, and another interesting point is here, according to 54.34% girls, menstruating women are not allowed to touch male members of the family and menstruating women are not allowed to touch fruit trees, they have to use old cloths, they

have to take bath only after four days to enter into the kitchen and they have to live in shed during their period were also the responses given by them.

Table 4: Different Types of Restrictions Experienced By Respondents

S.N.	Categories	Frequencies	Percentage
1.	Not allowed to sleep on usual bed	9	19.56
2.	Not allowed to go to temple and prayer	17	36.95
3.	Not allowed to touch male family members	8	17.39
4.	Not allowed to do household activities	12	26.08
5.	Others	0	0

Table 4 presents the description of restrictions faced by respondents during their period. This table shows that all the respondents had the restriction practice during menstruation. Among them, 19.56% of the respondents practiced not allowed to sleep on usual bed, 36.95% of the respondents faced not to go to temple and prayer, in the same way 17.39% of the respondents practiced not to touch male members during their period and 26.08% of the respondents had experienced not allowed to do household activities.

Table 5: Methods of Disposal of Absorbents after Use

S.N.	Categories	Frequencies	Percentage
1.	Wash cloth and dry it in Sun	25	54.34
2.	Burn cloth/ pad	4	8.69
3.	Throw somewhere	3	6.52
4.	Only dry in sunlight	14	30.43

Table 5 presents the description of absorbent disposal methods. This table shows that 54.34% of the respondents washed cloths and dry them in sunlight for disposal, 8.69% had burnt the cloths, 6.52% reported that they practiced throwing absorbents somewhere and 30.43% of the respondents have experience of only drying in sunlight. It shows that all the respondents have the absorbent disposal experience but they have adopted the ideas which they could afford.

Table 6: Perception of Menstruation related Problems due to Poor Personal Hygiene

S.N.	Categories	Frequencies	Percentage
1.	Irregular Menstruation/ heavy flow/dysmenorrhoea	13	28.46
2.	Environment pollution	15	32.60
3.	Fear of curse of God/ Unseen power	13	28.46
4.	Don't Know	5	10.86

Table 6 presents that the perception of menstruation related problems due to poor personal hygiene. This table shows that 28.46% of the respondents believed the poor hygiene can cause dysmenhorrea or heavy flow, 32.60% believed that it can cause environmental pollution, similarly, 28.46% of the respondents believed that it leads to fear of curse of God and 10.86% respondents didn't know about problems occurred due to poor personal hygiene.

Discussion

Menstruation is a significant process that begins in the life of a girl at the time when she enters or is about to enter

adolescence. The first menstruation is often horrifying and traumatic to an adolescent girl because it usually occurs without her knowing about it.

Results show that 91.3% of the respondents were Hindus and 43.47% of the respondents were from ethnic groups. Knowledge of menstruation was also seems satisfactory. 41.3% respondents answered that the menstruation is the monthly cycle where blood follows from vagina for 4-5 days in matured female, 15.21% of the respondents believed that it is a natural process in every adolescent female and 15.21% of the respondents believed that it is a sign of maturity. But, 10.86% of the respondents had no any idea about menstruation. In the same way, majority of the respondents (60.46%) had got the information from their mothers they share their feelings with mothers. The reactions to first menstruation were scare, indifferent, discomfort, disgust and guilt and other reactions. In which 36.95% respondents had the scared experience, 6.52% had the indifferent experience, 32.6% had discomfort experience, 8.69% had the disgusted, and 8.69% had the guilty and 10.86% had other experiences like surprise, depression, and fear and so on. More than half of the respondents' 54.34% attitude towards menstruation seems satisfactory. More than half of the respondents (60.04%) had the Dysmenorrhoea problems. Similar type of answers was found in the question of remedial measures due to menstruation problems. Similarly, sanitary pad was the ideal thing to use during menstruation for almost three fourth of the respondents (73.91%, 46), and majority of the respondents 71.73% used cloths during menstruation. Almost half of the girls (45.65%) changed their pads once a day, in contrast to this, 69.56% changed their pads two times a day. Almost half of the respondents (39.13%), reported that menstruating ladies are not allowed to participate in religious activities, 45.65% of the girls answered that we are not allowed to do household activities, according to 54.34% girls, menstruating women are not allowed to touch male members of the family and menstruating women are not allowed to touch fruit trees, they have to take bath only after four days to enter into the kitchen and they have to live in shed during their period. This result highlights that adolescent students are still facing such kinds of taboos in our society. In the context of absorbent disposal methods, 54.34% of the respondents washed cloths and dry them in sunlight for disposal, 8.69% had burnt the cloths, and 6.52% throw absorbents somewhere and 30.43% of the respondents dry in sunlight. In the same way, 28.46% of the respondents believed the poor hygiene can cause dysmenhorrea or heavy flow, 32.60% believed that it can cause environmental pollution, 28.46% of the respondents believed that it leads to fear of curse of God and 10.86% respondents didn't know about problems occurred due to poor personal hygiene. From the above results, we can say that adolescent girls should be armed to defense against these taboos and mothers should be empowered to effectively manage the problems of their daughters. Similarly, Education regarding MHM should be included in school curricula. Finally, it can be recommended that effective intervention should be launched there to address the restrictions have been facing by adolescent girls.

Conclusion

Menstruation is a normal physiological process in women. Normally, it starts with adolescence stage. It is a transitional

phase in which every change take place. This study presents that the situation of menstrual hygiene management is not satisfactory among adolescents as ignorance, wrong perceptions, unsafe practices regarding menstruation are still prevailing and there are several personal, behavioral and environmental factors which directly or indirectly influence this phenomenon. There is a lack of sensitivity on the part of parents and teachers to cater to the basic reproductive health information needs of adolescents. Similarly, this study shows that mother is the first sharing person and source of information, their mothers should be empowered with proper information regarding reproductive health and mother, family members and their friends can play a vital role in keeping MHM. This was a small scale study for only academic purpose that's why findings cannot be generalized for large scale study. And several misconceptions and menstrual problems were identified during this study so it can be recommended that further studies can be done to explore detail information.

References

1. Ali TS, Rizvi SN. Menstrual knowledge and practices of female adolescents in urban Karachi, Pakistan. *Journal of Adolescence*. 2009; 33:531-541.
2. Aniebue UU, Anieb PN, Nwankwo TO. The impact of pre-menarcheal training on menstrual practices and hygiene of Nigerian school girls. *Pan African medical Journal*, 2009, 2.
3. Gaudineau A, Ehlinger V, Vayssiere C, Jouret B, Arnaud C, Godeau E. Factors Associated with Early Menarche: Results from the French Health Behaviour in School-Aged Children (HBSC) Study. 2010; 10:175.
4. Guterman A, Mehta P, Gibbs M. Menstrual taboos among major religions. *Internet Journal of World Health and Societal Politics*, 2008, 5.
5. Nagar S, Aimol KR. Knowledge of Adolescent Girls Regarding Menstruation in Tribal Areas of Meghalaya. 2010; 8(1):27-30.
6. Shanbhag D, Shilpa R, Souza DN, Josephine P, Singh J, Br G. Perceptions regarding menstruation and Practices during menstrual cycles among high school going adolescent girls in resource limited settings around Bangalore city, Karnataka. *Int. J Collaborative Res Intern Med Pub Health*. 2012; 4(7):1353-62.
7. Shokry E, Allah A, Elsayed E, Elsabagh M. Impact of Health Education Intervention on Knowledge and practice about Menstruation among Female Secondary School Students in Zagazig City. *J Am Sci*. 2011; 7(9):737-47.
8. Singh A. Place of menstruation in the reproductive lives of women of rural North India [Internet]. *Ind. J Comm Med*. 2006; 31(1):10-4. Available from: <http://www.ijcm.org.in/text.asp?2006/31/1/10/54923>
9. Thakre S, Thakre S, Reddy M, Rathi N, Pathak K, Ughade S. Menstrual Hygiene: Knowledge and Practice among Adolescent School Girls of Saoner, Nagpur District. *Journal of Clinical and Diagnostic Research*. 2011; 5:1027-1033.
10. Thakre SB, Thakre SS, Reddy M, Rathi N, Pathak K, Ughade S. Menstrual Hygiene: Knowledge and Practice among Adolescent School Girls of Saoner, Nagpur District. *J Clin Diag Res*. 2011; 5(5):1027-33.
11. Thakur H, Aronsson A, Bansode S, Lundborg CS, Dalvie S, Faxelid E. Knowledge, practices and

- restrictions related to menstruation among young women from low socioeconomic community in Mumbai, India. *Front Public Health*. 2014; 2:2-7.
12. Thomas EM. Menstruation Discrimination: The Menstrual Taboo as a Rhetorical Function of Function of Discourse in the National and International Advances of Women's Rights. *Contemporary Argumentation & Debate*, 2007, 2865-90.
 13. Um L, Yusuf NW, Musa AB. Menstruation and menstrual hygiene amongst adolescent school girls in Kano, Northwestern Nigeria. *Afr. J Reprod Health*. 2010; 14(3):201-8.
 14. United Nations Children's Fund. Sharing simple facts: useful information about menstrual health and hygiene. New Delhi, India: Child's Environment Section, UNICEF House, 2008.
 15. Water Aid in Nepal. Is Menstrual Hygiene and Management an Issue for Adolescent Girls? A Comparative Study of four Schools in Different Settings of Nepal. Water Aid in Nepal. Working Paper No. ESA/P/WP.227, 2009.
 16. Yagnik AS. Construction of negative images of menstruation in Indian TV commercial. *Health Care for Women International*. 2012; 33(8):756-771.