



The Status of Menstrual Hygiene Among Adolescent Girls

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Abstract: Menstruation is a normal physiological process indicates beginning of reproductive life occurs between 11 to 15 years of age. Hygiene related practices of women during menstruation are substantially important as it also has an impact on reproductive health. A descriptive study was carried out with sample size of about 100 girls from schools, colleges and slums areas of Hyderabad with the help of well structured questionnaire that includes both open and closed ended interview questions. This study describes about the status of menstrual hygiene management among adolescent girls in Hyderabad and depending upon the results obtained, it became mandatory to spread awareness among adolescents on menstrual hygiene to ensure safe and healthy lives that protects teenagers from urinary tract infections and other reproductive diseases. Apart from menstrual hygiene practices and its awareness, this study finds that teenage girls are with very low self esteem and low confidence. Various methods have also been carried out in this study to overcome this issue among adolescents as well.

Index Terms – Menstrual hygiene, Menstruation, Adolescent, Urinary tract infections, Reproductive health, Self esteem.

I. INTRODUCTION

Menstruation is a phenomenon unique to the females. The onset of menstruation is one of the most important changes occurring among the girls during the adolescent years. The first menstruation (menarche) occurs between 11 and 15 years with a mean of 13 years.

Adolescent girls constitute a vulnerable group, particularly in India where female child is neglected one. Menstruation is still regarded as something unclean or dirty in Indian society. The reaction to menstruation depends upon awareness and knowledge about the subject. The manner in which a girl learns about menstruation and its associated changes may have an impact on her response to the event of menarche. Although menstruation is a natural process, it is linked with several misconceptions and practices, which sometimes result into adverse health outcomes.

Most women of reproductive age have some physical discomfort or dysphasia in the weeks before menstruation. Symptoms are often mild, but can be severe enough to substantially affect daily activities. About 5–8% of women thus suffer from severe premenstrual syndrome (PMS)

Mood and behavioral symptoms, including irritability, tension, depressed mood, tearfulness, and mood swings, are the most distressing, but somatic complaints, such as breast tenderness and bloating, can also be problematic.

Women and adolescent girls should use a clean menstrual management material to absorb or collect blood that can be changed in privacy as often as necessary for the duration of menstruation period. There are four types of reusable sanitary products 1. Medium cloth pad 2.Regular period panties 3.Menstrual cup 4.Tampons.

Besides, the lack of knowledge and awareness also lead to some poor personal hygienic practices during menstruation leading to many reproductive tract infections. Menstrual hygiene depends upon the educational, socioeconomic, and cultural statuses of family. School curriculum also has some role in menstrual health. Therefore, increased knowledge about menstruation from adolescent period help in decreased suffering of millions of women. Various studies indicate that a huge information gap exists among rural and urban adolescent girls regarding menstrual hygiene.

Women having better knowledge regarding menstrual hygiene and safe practices are less vulnerable to RTI and its consequences. Therefore, increased knowledge about menstruation right from childhood may escalate safe practices and may help in mitigating the suffering of millions of women.

In India only about 12 percent of 355 million menstruation women use sanitary pads use sanitary napkins. India survey called sanitary protection: Every woman's health right. Throughout India showed that improper menstrual protection makes adolescent girls (age group 12 to 18 years) miss 5 days of school in a month and around 23% of these girls drop out of school after they start menstruating. The biggest challenge in this problem is affordability and accessibility. Moreover menstruation is culturally considered as dirty or impure. In many places in India menstruating women are kept away from temples and kitchens and some don't even bathe. In the survey conducted in Delhi, Kolkata, Bangalore, Lucknow, Hyderabad, Gorakhpur, Aurangabad and Vijayawada around 31% women reported a drop in productivity levels during their periods, missing 2.2 days of work on an average. Menstrual hygiene is lowest in Eastern Indian with 83% women saying their families can't afford sanitary napkins or pads.

Menstrual hygiene management is a problem for adolescent girls in low and middle income countries like India particularly when attending school. Poor water, sanitation and hygiene facilities in school, inadequate puberty education and lack of hygienic menstrual items (absorbents) cause girls to experience menstruation as shameful and uncomfortable. Qualitative studies report girls fear and humiliation from leaking of blood and body odor, and lead menstruating girls to absent themselves from school. In studies reported on school absenteeism associated with menstruation with one in four girls missing one or more school days during menstruation. Girls reason for absence were physical discomfort or pain, lack of water, hygiene and disposal facilities in school toilets, fear of staining their clothes and restrictions imposed by relatives or teachers. Menstrual hygiene may result in health symptoms involving the urinary and genital tract infection.

1.2 METHODS FOR MENTRUAL MANAGEMENT:

1.2.1 SANITARY PADS:

About 68% rural women cannot afford sanitary napkins available in the market. Adolescent girls in rural India are unable to attend up to 50 days of schooling in a year due to inadequate menstrual care. The nationwide survey was conducted in October on the sample size of 1,033 rural women and 151 gynecologists and it believed that sanitary napkins can act as a preventive measure against reproductive tract infection, while 64% noted that it can act as precautionary measure to reduce the risk of cervical cancer. Poor financial conditions does not allow majority of the women to buy quality sanitary napkins. Of the 355 million menstruating women in India, only 12% use sanitary napkins.

1.2.2 CLOTH:

Cloth used for absorbing menstrual flow is a product that majority of the rural girls and women prefer. Women in villages and smaller towns still use reusable unhygienic cloth during their periods. And since periods are considered unclean, they are not even allowed to use detergent for washing the soiled cloth well in some households. If old cloths are not cleaned well they can become unhygienic. The other issue was disposal of the used cloth pieces. Women who do use cloth are often embarrassed to dry them in sun, which means they don't get disinfected. Approximately 70% of all reproductive diseases in India are caused by poor menstrual hygiene and it can also affect material mortality. Users need to wash and dry the cloths with the water supply and soap. But Indian women use it due to its easy access, cheaper cost, reusable and comfortable to use. Economic considerations seemed to be the main reason for using cloth instead of pads, other reasons included difficulty in disposal, unawareness of pads or personal preference.

1.2.3. NATURAL MATERIALS:

Women use a leaf with mud which was tied around their waist. In turn the women did suffer numerous episodes of infections which resulted in loss of work, and if they were able to reach a doctor then the doctor bills. Both in urban slums and rural India, lack of affordability is a common reason why women continue using unhygienic practices during menstruation. Most of the women have to choose between sanitary pads and food.

1.2.4. TOILET PAPER OR TISSUES:

Many women resort to toilet papers. But the main problem is it loses strength when wet and can fall apart, difficult to hold in place and it may be too expensive for the poorest users.

1.3 RECENT MARKET TRADITION FOR MENTRUAL PRODUCTS:

There are a large number of products available in the market for menstrual management. The most important factors in menstrual hygiene management is maintaining cleanliness and hygiene during menstruation. Details of some of the products are as follows;

1.3.1 REUSABLE, ABSORBABLE PERIOD PANTIES:

These are newest menstrual products in the market. The crotch is 4 layers thick and absorbs light to medium amounts of menstrual flow. Girls / Young women can wear this type of underwear with or without a tampon. The cost of the underwear is pricey, starting at \$24 to \$38. However they are washable, reusable and environmentally friendly.

1.3.2 NON-CHLORINE BLEACHED ALL- COTTON PADS AND TAMPONS:

These are available at many natural food stores, some of the larger super market chains and online stores as well. They are a bit more expensive than regular pads and tampons. They are disposable so they aren't as environmentally friendly as reusable products, but they are not made using chemicals.

1.3.3 REUSABLE, WASHABLE CLOTH PADS:

These products work just like regular disposable pads, but instead of throwing them after use; it can be rinsed out, washable and can be reused again. They come in different sizes and absorbencies and are usually less irritating because they are made of cotton and not plastic. Cloth pads are more expensive than disposables but they economical in long run because they last for years.

1.3.4 REUSABLE MENSTRUAL CUPS:

Menstrual cups are other alternative to tampons. Most menstrual cups are made of rubber or medical grade silicone which makes the cup easy to fold so that it can be inserted into the vagina to catch menstrual blood rather than absorb it. A menstrual cup is placed inside the vagina few inches below the cervix.

All these products are very good for menstrual hygiene and even expensive for middle class Indian women. The market penetrations of these products are less than 1% in context of the Indian market.

II. REVIEW OF LITERATURE

2.1 Background - Lack of menstrual knowledge, poor access to sanitary products and a non-facilitating school environment can make it difficult for girls to attend school. In India, interventions have been developed to reduce the burden of menstruation for school girls by government and non-governmental organizations (NGOs). We sought to identify challenges related to menstruation, and facilitators of menstrual management in schools in three states in India. **Methods** - Surveys were conducted among menstruating school girls in class 8-10 (above 12 years of age) of 43 government schools selected through stratified random sampling in three Indian states (Maharashtra, Chhattisgarh, Tamil Nadu) in 2015. For comparison, ten model schools supported by NGOs or UNICEF with a focussed menstrual hygiene education program were selected purposely in the same states to represent the better-case scenario. We examined awareness about menarche, items used for menstruation, and facilitators on girls' experience of menstruation in regular schools and compared with model schools. Factors associated with school absence during menstruation were explored using multivariate analysis. **Conclusions** - Menstrual hygiene education, accessible sanitary products, pain relief, and adequate sanitary facilities at school would improve the schooling-experience of adolescent girls in India. (Muthusamy Sivakami et.al., 2019)

2.2 An increasing number of studies have found that girls in low-income settings miss or struggle at school during menstruation if they are unable to manage their menstrual hygiene effectively. This study explores the menstrual hygiene practices and knowledge of girls at rural government primary schools in the Rukungiri district in Uganda and assesses the extent to which poor menstrual hygiene management (MHM) affects their education. **Methods** - A self-administered questionnaire was completed by schoolgirls in six government-run primary schools in the Rukungiri district. Focus groups were held with girls from each school and semi-structured interviews were conducted with headteachers and female teachers from the participating schools. A toilet assessment was also conducted in each school. **Results** - One hundred and forty schoolgirls completed the questionnaire. The girls reported a lack of access to adequate resources, facilities and accurate information to manage their menstrual hygiene effectively at school. They reported that, as a result, during menstruation they often struggle at school or miss school. Eighty-six girls (61.7%) reported missing school each month for menstrual-related reasons. **Conclusion** - It is common for girls who attend government-run primary schools in the Rukungiri district to miss school or struggle in lessons during menstruation because they do not have access to the resources, facilities, or information they need to manage for effective MHM. This is likely to have detrimental effects on their education and future prospects. A large-scale study is needed to explore the extent of this issue. (Robyn Boosey et.al., 2014)

2.3 Menstrual hygiene has emerged as an under-recognized barrier to human rights. Activism and preliminary research have highlighted the challenges women face in managing their menses in resource-limited contexts. However, despite enthusiasm in the field and the dissemination of a variety of interventions, menstrual management is severely underresearched. I argue that a human rights approach to menstrual hygiene necessitates an evidence-based approach. My purpose here is to critically appraise the current state of the evidence in understanding the problem and in developing and evaluating interventions. I highlight present inadequacies and unanswered questions and propose avenues for future improvement. (Julie M. Hennegan – 2017)

2.4 Objective - This study was done in the adolescent girls to evaluate the knowledge and practice on different aspects of menstrual hygiene. **Methods** - One hundred and fifty adolescent girls of age 13-15 years from 3 schools of Shivanagar and Patihani village development committees of Chitwan district were involved in this study. Altogether 27 questions were asked to each of them. **Results** - During our study, we found that they were not properly maintaining the menstrual hygiene. Only 6.0% of girls knew that menstruation is a physiologic process, 36.7% knew that it is caused by hormones. Ninety-four percentages of them use the pads during the period but only 11.3% dispose it. Overall knowledge and practice were 40.6% and 12.9% respectively. **Conclusion** - Although knowledge was better than practice, both were not satisfactory. So, the girls should be educated about the process and significance of menstruation, use of proper pads or absorbents and its proper disposal. This can be achieved by giving them proper training and health education (by teachers, family members, health educators, and media) so that there won't be any misconception to the adolescent girls regarding menstrual hygiene. (Adhikari P et.al., 2007)

2.5 Background: Menstrual hygiene is an issue that is insufficiently acknowledged. Lack of adequate privacy and sanitation of toilets for school girls; make them vulnerable to mental, emotional and physical problem especially during their menstruating days. **Objectives:** To identify the issues and challenges of menstruation faced by the adolescent girls, to determine the factors behind the existing practices of menstrual hygiene and to find out the proportion of the study population complaining of symptoms related to genitourinary tract and related health care seeking behavior. **Methods:** A descriptive, cross-sectional study

was conducted among 190 adolescent girls of a rural secondary school of West Bengal. **Results:** Out of 190 respondents, 80(42%) girls were aware about menstruation prior to attainment of menarche. After bivariate analysis, the significant risk factors of good menstrual hygiene were entered into the multivariate model. It revealed that good menstrual hygiene was more among those whose mothers were literate [AOR 2.3 (1.06-5.01)], girls studying in more than grade X in school [AOR 2.71(1.16-6.35)],having prior knowledge about menstruation before menarche [AOR 2.97(1.29-6.85)],usage of proper sanitary latrine at home [AOR 3.14(1.42-6.00)] and exposure to advertisements promoting usage of sanitary towels in mass media[AOR-2.52(1.10-5.70)]. **Conclusions:** Adoption of high quality menstrual hygiene will play an important role in prevention of RTI and Cancer of cervix among the women population. Therefore promoting positive attitudes towards management of menstruation and related problems among the adolescent girls is the need of the hour. (Sudeshna Ray and Aparajita Dasgupta – 2012)

III. METHODOLOGY

3.1 OBJECTIVES:

1. To assess the status of menstrual hygiene management among adolescent girls in Hyderabad.
2. To spread awareness among adolescent girls on menstrual hygiene and to ensure safe disposal of sanitary napkins in an environment friendly manner.
3. To boost self esteem and empower girls to develop confidence among them.

3.2 SAMPLE SIZE : 100samples

3.3 SAMPLE AREA : Samples were selected from college premises, vicinal schools, slum areas of various regions of Hyderabad.

3.4 TOOLS AND TECHNIQUE:

Questionnaire was developed which included open and closed ended questions.

IV. RESULTS AND DISCUSSION

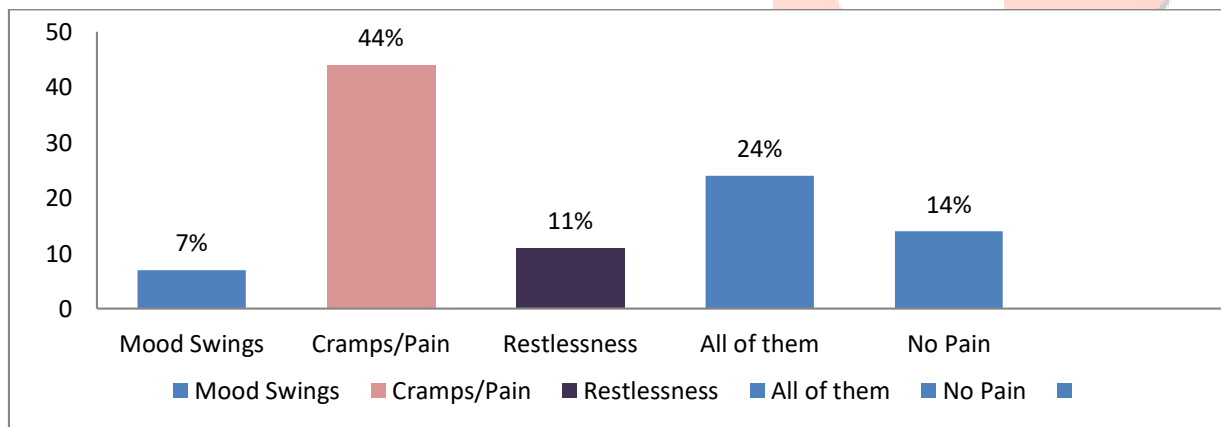


Figure 4.1 Observation of PMS symptoms in samples

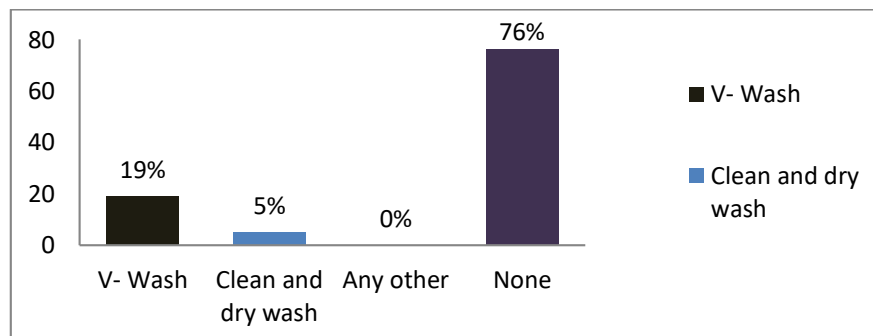


Figure 4.2 Usage of products for intimate hygiene among samples

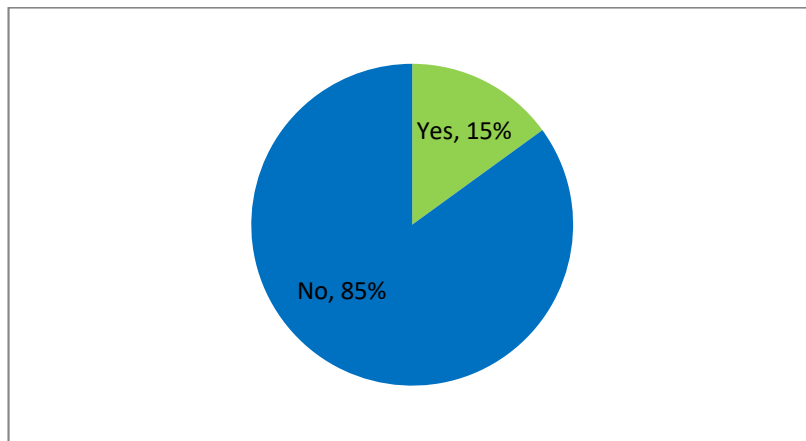


Figure 4.1 Percentage of people suffering from urinary tract infections among the samples

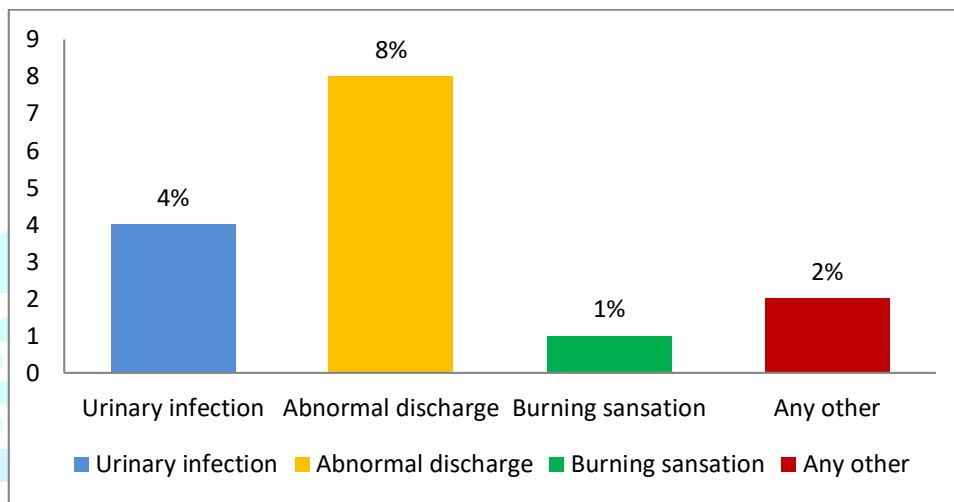


Figure 4.4 Percentage of people suffering from types of urinary tract infections

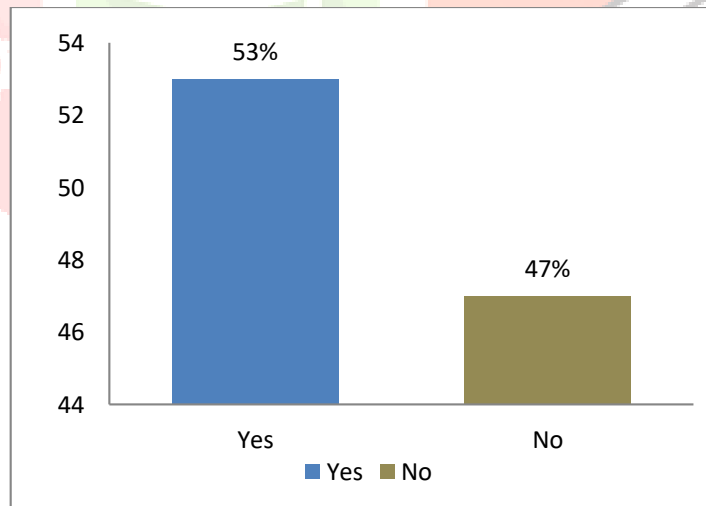


Figure 4.5 Percentage of people for not consuming any medications during PMS symptoms

Table 4.6 Awareness of sanitary products used during menstruation

Category	Yes (%)	No (%)
Tampons	10 %	55 %
Sanitary pads	98%	2 %
Menstrual cups	15%	55%

V. SUMMARY AND CONCLUSION

Menstruation is a normal physiological process indicates beginning of reproductive life occurs between 11 to 15 years of age. The reaction to menstruation depends upon awareness and knowledge about the subject, the manner in which learning about the menstruation and its associated changes. Women of reproductive age experience various physical and emotional changes that occur in 1 or 2 weeks before the start of menstrual cycle. Symptoms often vary between women. Common symptoms include; acne, tender breast, bloating, abdominal cramps, irritability, headache, and mood swings.

Hygiene related practices of women during menstruation are substantially important as it also has a health impact. Menstrual hygiene depends upon educational, socio-economic and cultural statuses, school curriculum etc have role in menstrual health. Poor menstrual hygiene causes vulnerability to reproductive tract infection (RTI). There are millions of women who suffer from RTI due to lack of knowledge towards menstrual hygiene when compared to a women who is having knowledge and also follows hygiene related practices. Therefore, increased knowledge about menstruation and its hygiene practices should be put into practices from the adolescent period itself.

Sanitary protection is every women's health right. In the survey, our objective was to assess the status of menstrual hygiene, to spread awareness on menstrual products, hygiene and various activities to be carried out during menses to relieve pre-menstrual syndrome. For the collection of sample; school, colleges and slum areas were covered and the detailed information on menstrual hygiene were recorded with the help of questionnaire.

It has been found that 55% of the sample doesn't know about the sanitary products which include tampons, menstrual cups, reusable period panties and washable cloth pads. About 98% of the sample size uses sanitary pads and only 2 to 3% use cloth during menses as they find it costly and difficult in discarding. The cloth users also reuse the cloth by washing it with detergent or soap. It has also been found that 12% of the sample are not aware of cleaning pubic hair and 76% of the total sample doesn't uses the products for intimate hygiene such as V-wash, clean and dry wash etc, 47% are not aware of avoiding the consumption of various kinds of medications to lower the symptoms of PMS and 20% doesn't know the frequency of changing pads every 4 to 6 hours in a day and 42% of the sample changes the sanitary pads twice a day during their menses.

Thus, it has been concluded that more than half of the samples are not aware about the sanitary products and menstrual hygiene as most of them experienced itchy sensation, observed rashes over the genital area and suffered from urinary tract infections.

VI. REFERENCES AND BIBLIOGRAPHY

- [1] Dasgupta A and M.Sarkar. – (2008) Menstrual hygiene: How hygienic is the adolescent girl?. Indian Journal of community medicine.
- [2] Thakre SB, Thakre SS, Reddy M, Rathi N, Pathak K, Ughade S. 2011.
- [3] Dhingra R, Kumar A, Kour M. 2009.
- [4] Dasgupta A, Sarkar M. 2008.
- [5] Dr. Lakhwinder Pal Singh, et al.,(2016) Humanizing work and work environment; Department of Industrial and Production Engineering; Jalandhar -144011, Punjab , India.(Pg no. 231-233).
- [6] (Muthusamy Sivakami et.al., 2019) <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6286883/>
- [7] (Robyn Boosey et.al., 2014) <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4382073/>
- [8] (Julie M. Hennegan – 2017)
<https://www.tandfonline.com/doi/full/10.1080/23293691.2017.1388720?scroll=top&needAccess=true>
- [9] (Adhikari P et.al., 2007)
<https://europepmc.org/article/med/18604059>
- [10] (Sudeshna Ray and Aparajita Dasgupta – 2012)
<https://www.njcmindia.com/index.php/file/article/view/1699>