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Knowledge And Practice Of Girls About Onset Of Menstruation And Menstrual Hygiene In Bangladesh

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Abstract: The research objectives of this study encompass the identification of socio-demographic characteristics, the evaluation of knowledge levels, the comprehension of the effects of menstruation, and the examination of menstrual hygiene practices among the participants. Utilizing a cross-sectional descriptive design, data was obtained from 400 secondary school girls from Yakubia Girl's High School. The study was conducted from September 2019 to March 2020. The survey, which was based on questionnaires, encompassed various aspects such as socio-demographic characteristics, knowledge about menstruation, and hygiene practices. The statistical analysis was performed by employing SPSS software. The findings divulged that the majority of participants were below the age of 16, with a significant number of girls experiencing menarche at or before the age of 13. The primary source of knowledge about menstruation for the girls was their mothers, followed by sisters and friends. Nevertheless, there were gaps in understanding the definitions and cycles of menstruation, with numerous girls lacking knowledge regarding menstrual hygiene prior to experiencing menarche. The study underscores the significance of comprehensive education about menstruation and the availability of hygienic facilities for adolescent girls. It advocates for targeted interventions aimed at enhancing menstrual hygiene practices and tackling the cultural taboos associated with menstruation. By augmenting the knowledge of girls and providing adequate support, the study strives to alleviate the adverse effects of menstruation on education and empower adolescent girls in Bogura, Bangladesh. The study investigates the socio-demographic characteristics, awareness levels, and practices related to menstruation among secondary school girls in a particular region. Findings reveal that mothers predominantly impart knowledge about menstruation, with limited influence from other sources. Participants commonly experience physical and mental challenges during menstruation, impacting their schooling. Recommendations emphasize the importance of education, involving men in menstrual health discussions, and promoting proper hygiene practices.

Keywords: Menstruation, Menstrual Hygiene, Girls, Mental Problem, Knowledge

I. INTRODUCTION

Menstruation has more profound effect on quality of education than other aspect of puberty because it involves a learning component as well as elements affected by the school environment and infrastructure. It is, therefore, imperative to assess the knowledge and practice regarding onset of menstruation and menstrual hygiene among Secondary School girls in Bogura, Bangladesh. Many adolescent girls in low-income and middle-income countries lack appropriate facilities and support in school to manage menstruation. My research has been conducted on how menstruation affects them. This study examines the association of menstrual hygiene management knowledge, facilities during menstruation among Bangladeshi school girls. During this transition, girls will experience first menstruation (menarche) and significant changes in lifestyle, behavior, growth, and development. With these changes comes a considerable amount of anxiety, emotional problems, and need for support. Premenstrual discomfort, menstrual symptoms, and associated gynecological disorders also have important medical and social consequences that influence adolescent females' life in a major way (e.g., loss of school days, mental problems, physical problem and knowledge of menstruation, menstrual practice, menstrual hygiene and decreased appetite). The practical challenges of menstrual hygiene are made even more difficult by various socio-cultural factors. To manage menstruation hygienically, it is essential that women and girls have access to water and sanitation. They need somewhere private to change

sanitary cloths or pads; clean water for washing their hands and used cloths and facilities for safely disposing of used materials or a place to dry them if reusable. Effective menstrual hygiene has direct and indirect effect on achieving development goals one (menstrual education), two (Menstrual knowledge) and, three (improving maternal health) four (Menstrual hygiene) and five (healthy Menstrual practice). However, in Bangladeshi is an issue which is insufficiently acknowledged in the reproductive health sector. The objective of this study therefore, is to assess the age of first menstruation (menarche) and knowledge of adolescents about menstrual hygiene management in Bogura province.

II. OBJECTIVE OF THE STUDY

The main objective of this study is to explore the knowledge on Onset of Menstruation and menstrual hygiene among secondary school girls at Selected Schools of Bogura, Bangladesh. The other objectives are as follows:

1. To identify Socio demographic characteristics of the respondents.
2. To identify the knowledge level regarding menstruation.
3. To identify effects of menstruation of the respondents.
4. To identify the practice behavior regarding menstrual hygiene of the respondents.

III. HYPOTHESIS

1. Secondary school girls have satisfactory knowledge about menstruation.
2. Secondary school girls have proper practice regarding menstrual hygiene.

IV. LITERATURE REVIEW

Menstruation is a phenomenon unique to the females. It is a physiological process, but its onset brings a profound change in an adolescent's girl's life. It is one of the most important changes occurring among the girls during the adolescent years. The first menstruation (menarche) occurs between 10 and 15 years with a mean of 13 years. Menstruation is regarded as something unclean or dirty in Bangladeshi society. It is linked with misconceptions. It is now becoming increasingly recognized that the social and cultural significance of menstruation interacts with the physiological process to produce culturally determined norms and practice.

Unni JC (2010) conducted a study on attitudes of the adolescents and relevance to family life education programs to understand adolescent attitudes. The result revealed that more than 50% of the adolescent's received information on sex and sexuality from peers; boys had started masturbating by 12 years age and 93% were doing so by 15 years of age. Although 73% of girls were told about menstruation by their parents, 32% were not aware, at menarche, that such an event would occur and only 8% were aware of all aspects of maintaining menstrual hygiene.

Adinma and Adinma (2008) conducted a study on perceptions and practices on menstruation amongst Nigerian secondary school girls to determine their perceptions, problems, and practices on menstruation. A majority of the students, (75.6%), were aged 15-17 years. Only 39.3% perceived menstruation to be physiological. Abdominal pain discomfort, (66.2%), was the commonest medical problem encountered by the respondents, although 45.8% had multiple problems. Medical problems were most commonly discussed with the mother, (47.1%), and least commonly discussed with the teachers (0.4%). Unsanitary menstrual absorbents were used by 55.7% of the respondents. The perceptions on menstruation were poor, and practices were often incorrect.

Dasgupta, A. and Sankar, M, (2008) conducted a descriptive cross sectional study on menstrual hygiene among 150 adolescent girls. The result revealed that among 150 respondents, 108 (67.5%) girls were aware about menstruation prior to attainment of menarche. The mother was the first informant. A majority of the girls, 138 (86.25%) believed it as physiological process. Only 18 (11.25%) girls used sanitary pads, 136 (85%) girls practiced different restrictions during menstruation.

Adhikaari P, et al., (2007) conducted a study on the adolescent girls to evaluate the knowledge and practice on different aspects of menstrual hygiene. It was found that they were not properly maintaining the menstrual hygiene. Only 6.0% of girls knew that menstruation is a physiologic process, and 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 properly. The overall knowledge and practice were 40.6% and 12.9% respectively.

Devi, S.M. (2007) conducted a study on assessment of awareness of reproductive health on 120 female adolescents in the age group of 16-18 years. The result showed a significant association between the type of school and the educational level of the parents. About half of the subjects (53%) felt shy and embarrassed to discuss and their knowledge was relatively very poor.

Dongre. AR, Desmukh. PR and Garg. BS (2007) conducted a study on the effect of community based health education intervention on the management of menstrual hygiene among rural Indian adolescent girls in 23 villages in Anji, in the Wardha district of Maharashtra state. After 3 years, significantly more adolescent girls (55%) were aware of menstruation before its initiation compared with the baseline (35%). The practice of using readymade pads increased significantly from 5% to 25% and reuse of cloth declined from 85% to 57%. The trend analysis showed that adolescent girls perceived a positive change in their behavior and level of awareness.

Nations Children's Fund (2018) conducted a study on menstrual hygiene management of adolescent school girls and nuns. The result revealed that more than 63.6% cleaned the genital area with only water followed by about 18.2 percent who used water and soap. The survey had also revealed that more than two-thirds (67.9%) of the adolescent nuns clean their genital area during menstruation. more than two-thirds (67.9%) reported to have changed only once a day.

UNICEF (2018) conducted a study on Fast Facts Nine things you didn't know about menstruation. The result revealed that 9 keys of menstruation.

Charles Patrick Davis conducted a study on Menstruation. Medically, menstruation (also termed period or bleeding) is the process in a woman of discharging (through the vagina) blood and other materials from the

lining of the uterus at about one monthly interval from puberty until menopause (ceasing of regular menstrual cycles), except during pregnancy. This discharging process lasts about 3-5 days.

M Rees (1995) conducted a study on The Age of Menarche. In females, the first menstrual period, menarche, signals the beginning of the capacity to reproduce and is associated with the development of secondary sexual characteristics. Menarche is one of the most significant milestones in a woman's life. The first cycles tend to be anovulatory and vary widely in length. They are usually painless and occur without warning. Menarche occurs between the ages of 10 and 16 years in most girls in developed countries.

V. METHODOLOGY

The central focus of this study was to determine the knowledge of menstruation, menstrual hygiene and practice of the adolescent (aged 10-17) female students. The following sub-sections entail the detailed methodology involved in this study.

5.1 Study Design

This is a Cross sectional descriptive study.

5.2 Study Period

This study was carried out in September 2019 to March 2020 in a school of the Bogura district in Bangladesh.

5.3 Target Population

Target population is 2000 girls those were already had first menstruation at selected school. 2000 respondents are in class six, seven, eight, nine, and ten. They experienced Menstruation. They give me much important information related to this study.

5.4 Study Population

Study population is 400 respondents.

5.5 Study Place

Yakubia Girl's High School, Bogura, Bangladesh.

5.7 Sample Size Calculation

Total target population is 2000 students. I have to exclude 1600 students for reasonable Exclusion criteria. In this study I have been taken 400 respondents.

5.8 Sampling Technique

In this study sampling technique is simple random which is purposively taken 400 respondents.

5.9 Research Instruments

Research instrument is questionnaire. Data was collected using structured and self-administered questionnaire. The questionnaire was developed from different literatures and contextually adapted to the cultural norms of the study area. The questionnaire had different section consisting of socio-demographic characteristics and questions used to measure hygienic practices of menstruation and knowledge of menstruation. The sample size was aimed at 27 questionnaires in total, first 6 questionnaires for the socio demographic characteristics of the respondents, 21 questionnaires for specific question related to menstrual knowledge, menstrual hygiene and menstrual practice at the onset of menstruation. The sample size of the study is based on the frequency of respondents answer. All contents of the questionnaire was first prepared in English and translated to the local language (Bangles) and back to English to check its consistency. Before the interview, verbal consent was obtained from all participants the age of <16. It is already known that menstruation is a sensitive issue surrounded by supernatural perceptions. Females, particularly adolescent girls often afraid of discussing topics related menstruation. Therefore, I recruited data collection by considering that I can have better experience to communicate people regarding sensitive topics with therapeutic relationship because I have passed BSS and also Diploma in Medical Assistant.

5.10 Data Collection

I administered the survey verbally and recorded responses using a computer tablet-based structured questionnaire. Visits to schools were unannounced and surveys were conducted after obtaining informed consent from the school authority. The respondents were asked for menstrual knowledge, menstrual hygiene and menstrual practice. . I gave them questionnaire and translated it bangle, respondent's the appropriate box or write an answer in other option. Finally, I reviewed a presentation for understand the current menstrual hygiene education, knowledge about menstruation and good menstrual practice.

5.11 Data Analysis

Data obtained with the help of questionnaire were entered in the SPSS data entry form and data were analyzed using SPSS software (IBM) version 23.

5.12 Ethical Considerations

- a) I am doing this study for my MPH program in public health department from Pundro University of science and technology.
- b) Permission was secured from Yakubia Girl's High School through a formal letter. School Head teacher was briefed on the relevance and objectives of the study.
- c) The purpose of the study was explained to the students and verbal consent was obtained from each participant. For those students who were under the age of consent, informed verbal consent was obtained from their parents.
- d) Confidentiality of information was maintained by me from the questionnaire.
- E) Students were informed of their full right to skip or ignore any question or withdraw from their participation at any stage.

f) Those are not interested to my study I exclude them.

VI. ANALYSIS AND RESULTS

6.1 Socio Demographic Characteristic of the Respondents

Socio demographic characteristic of the respondents like as Age, Class in school, Father's occupation, occupation of Mother, Monthly Family income and The Age of first Menstruation shows in table 1. This table deals with the socio-demographic characteristics of the respondents who took part in this study. The analysis in this table begins at the secondary school girl's level and belongs with their agreed and disaggregated information.

Table 1: Socio Demographic Characteristic of the Respondents

Age of the respondents	Age	Frequency	Percentage (%)	Cumulative Percentage (%)
	<16 years	380	95	95
	16 years	20	5	100
	Total	400	100	
Respondents class in school	Class	Frequency	Percent (%)	Cumulative Percent (%)
	Six	98	24.5	24.5
	Seven	242	60.5	85
	Nine	60	15	100
	Total	400	100	
Respondents Fathers Occupation	Father's occupation	Frequency	Percent (%)	Cumulative Percent (%)
	Teaching	32	8	8
	Farming	14	3.5	11.5
	Business	186	46.5	58
	Driving	14	3.5	61.5
	Laborers	6	1.5	63
	Others	148	37	100
	Total	400	100	

Table 2: Socio Demographic Characteristic of the Respondents

Respondents Mothers occupation	Mother's occupation	Frequency	Percent (%)	Cumulative Percent (%)
	Teaching	24	6	6
	Farming	6	1.5	7.5
	Business	8	2	9.5
	Housewife	334	83.5	93
	Others	28	7	100
	Total	400	100	
Monthly family income	Monthly Family income	Frequency	Percent (%)	Cumulative Percent (%)
	< 5000	52	13	13
	5000 - 10000	76	19	32
	10001 - 15000	48	12	44
	> 15000	224	56	100
	Total	400	100	
Age of first Menstruation	Age of first Menstruation	Frequency	Percent (%)	Cumulative Percent (%)
	less than/equal to 13 years	328	82	82
	14 years	48	12	94
	Others	24	6	100
	Total	400	100	

Table 1 & 2 show that socio demographic characteristics of the respondents. Majority 95% (380) respondents have their age less than 16 years, less 5 % (20) respondents been 16 years old.

In This study sample size is 400 respondents, they read in different class.24.5% (98) good number of respondents are in class six, 60.5 % (242) major number of respondents are in class seven, 15% (60) a smaller number of respondents are in class nine. Respondents father is doing different works .8% (32) less number of respondents father occupation is Teaching .3.5% (14) poor number of respondent father's occupation is Farming. 46.5% (186) major number of respondents father's occupation is Business, 3.5% (14) poor number of respondent father's occupation is Driving. 1.5% (6) very poor number of respondent father's occupation is Laborers.37.0% (148) good number of respondents father's occupation in others option. In other option some respondents father occupation is Doctor, some are Banker, some are in Army, and some are Foreigner some are in governmental or nongovernmental service.

Occupation of Mother of the respondents is an image of respondent's family. 6% (24) poor number of respondents mother occupation is Teaching, 1.5 % (6) very poor number of respondents mother occupation is Farming. 2 % (8) respondents mother relates with Business, 83.5% (334) Major are Housewife. 7% (28) relate with others occupation. Like as Nurse, Doctor.

Respondent's monthly family income is a reflection of their family economic status. 13% (52) respondents' family's monthly family income is less than 5000 taka, 19 % (76) respondents monthly family income is 5000-10000, 12 % (48) respondents monthly family income is 10001-15000 taka, 56 % (224) respondents monthly family income is more than 15000 takas.

Age of first menstruation is called menarche .82% respondents Age of first menstruation less than/equal to 13 years, so that we can said that most of respondents age is less than or equal 16 years. Few 12% respondents Age of first menstruation is 14 years, very poor 6% respondents Age of first menstruation in others option.

6.2 Source of Knowledge about Menstruation

The sources of knowledge about menstruation are given in the following figure:

Figure 1: Source of Knowledge about Menstruation

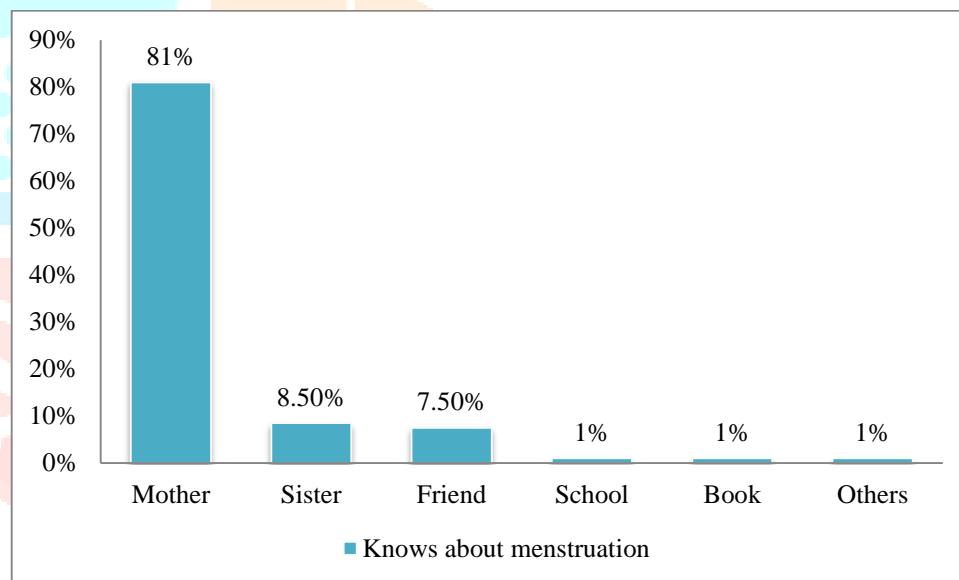


Figure 1 show the respondent by their frequency of sources of knowledge about menstruation.81% (324) most of the respondent knows about menstruation from their mother. Comparatively less respondents 8.5 % (34) knows about menstruation from their sister. 7.5% (30) respondent knew it from their Friends, only 1% (4) respondents know about menstruation from books and 1% (4) respondent knew it about from others like grandmother.

6.3 Knowledge about Definition of Menstruation

Knowledge about definition of menstruation is mentioned the following figure:

Figure 2: Knowledge about Definition of Menstruation

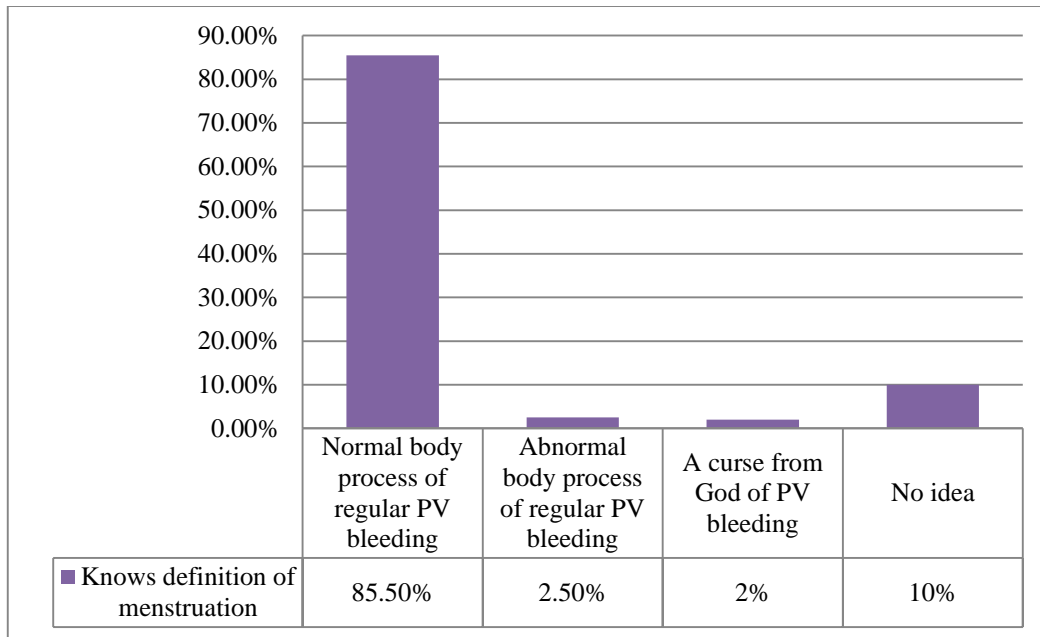


Figure 2 shows that how much respondents know about menstrual definition. 85.5 % (342) most of the respondents said that it is a normal body process of regular per virginal bleeding. 2.5% (10) poor number of respondents said that it is an abnormal body process of regular per virginal bleeding. 2% (8) very poor number of respondents said that it is a curse from god of per virginal bleeding & 10% (40) respondents have no idea about it.

6.4 Knowledge about Menstrual Cycle

Knowledge about menstrual cycle of respondents is pointed out in the following figure:

Figure 3: Knowledge about Menstrual Cycle

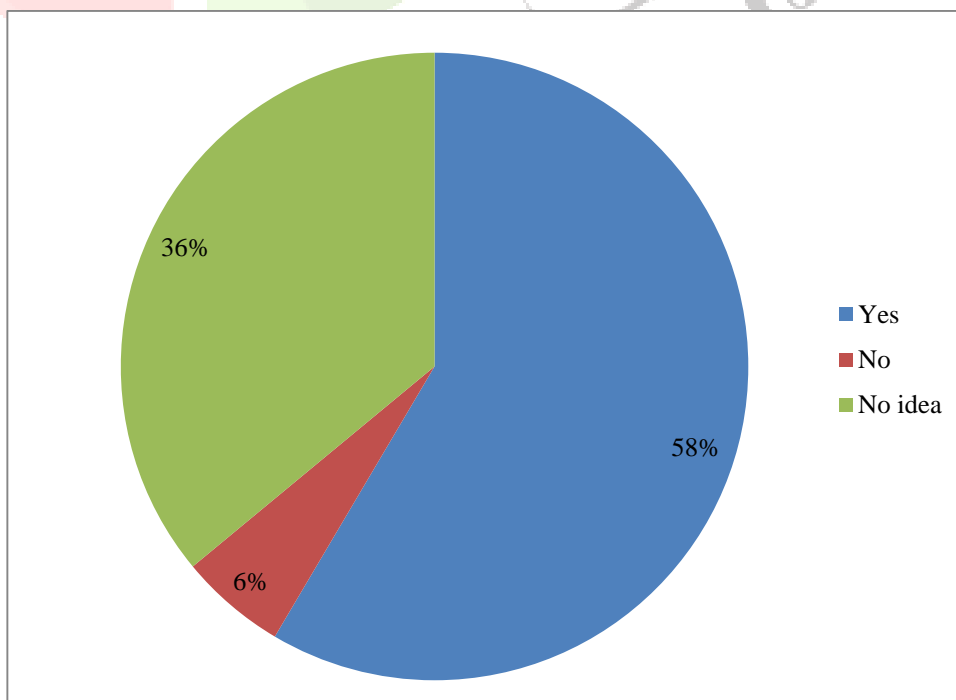


Figure 3 show respondents thought pain during menstrual cycle is normal. 58% (231) respondents think that pain during menstrual cycle is normal. 6% (25) respondents think that pain during menstrual cycle is not normal, 36 % (144) moderate number respondents think that they have no idea at all.

6.5 Knowledge about menstrual hygiene before starting menstruation (menarche)

Knowledge of girls about menstrual hygiene before starting menstruation (menarche) is given here:

Figure 4: Knowledge about Menstrual Hygiene Before Starting Menstruation (Menarche)

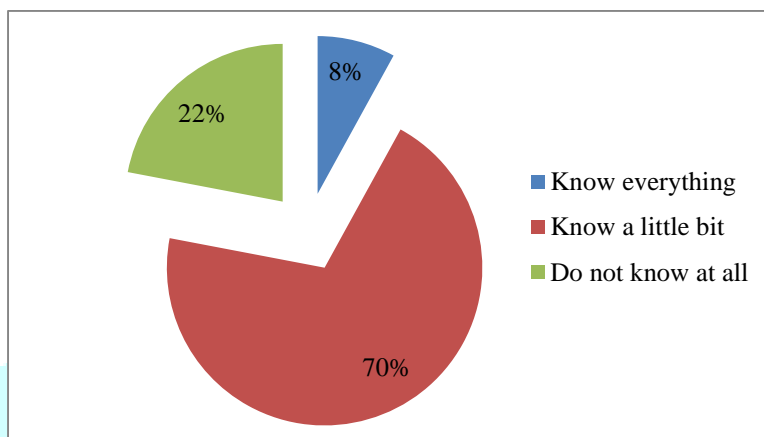


Figure 4 shows that how much respondents know about menstrual hygiene before starting their menstruation. Very few numbers of 8% (32) respondent answer that they know everything, Majority 70% (280) respondents said that they knew a little bit, Moderate 22 % (86) respondents said that they did not know it at all about Menstrual hygiene before starting menstruation.

6.6 Physical Problem Suffers at the Onset of Menstruation

Physical problem suffered by girls at the onset of menstruation is stated in figure 5:

Figure 5: Physical Problem Suffers at the Onset of Menstruation

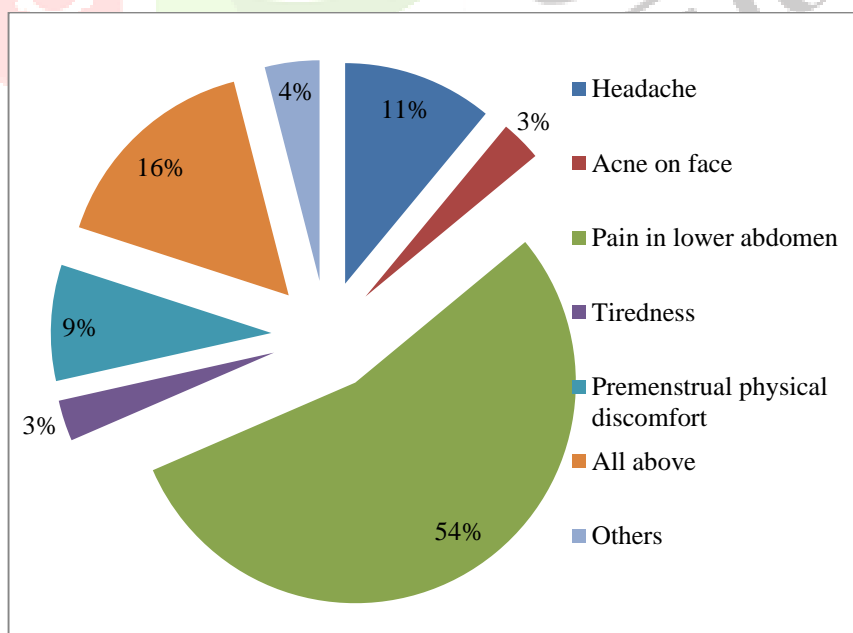


Figure 5 shows that the physical problem suffers at the onset of menstruation. 11% (44) respondents said that they suffered headache at the onset of menstruation. 3% (12) poor respondents said that they suffered Acne on their face at the onset of Menstruation. 54% (218) majority respondents said that they suffered pain in

lower abdomen at the onset of Menstruation .3% (12) poor respondents said that they suffered Tiredness at the onset of Menstruation. 9% (37) respondents said that they suffered premenstrual physical discomfort at the onset of Menstruation,16% (64) respondents said that they suffered all physical problem those are given above,4% (16) respondents said that they don't suffer any physical problem at the onset of Menstruation.

6.7 Mental Problem Suffer at the Onset of Menstruation

Mental problem suffered by girls at the onset of menstruation is pointed here:

Figure 6: Mental Problem Suffer at the Onset of Menstruation

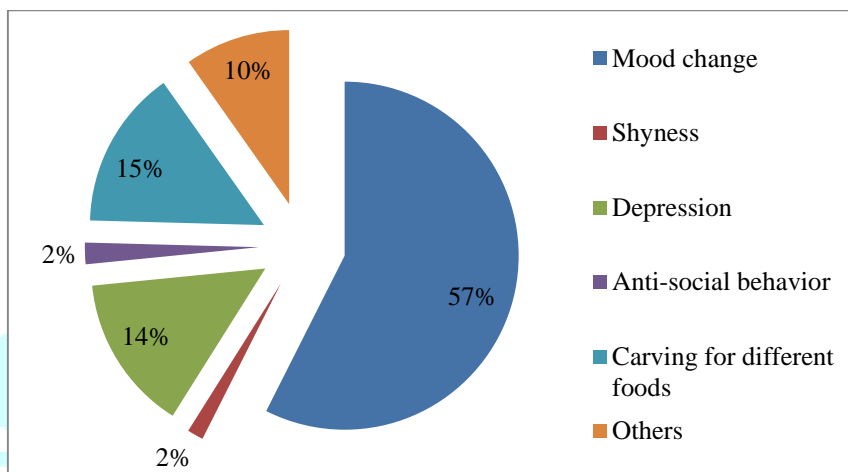


Figure 6 show that respondents suffer any mental problem at the onset of Menstruation. 57% (227) most of the respondents said that they suffer Mood change at the onset of menstruation, 2 % (8) very poor respondents said that they suffered shyness at the onset of Menstruation. 15% (60) respondents said that they suffered from depression at the onset of Menstruation, 2% (8) respondents said that they suffered anti –social behavior at the onset of Menstruation, 14% (58) respondents said that they suffered from carving for different foods,10% (39) respondents said that they did not suffer any Mental problem at the onset of Menstruation.

6.8 Effect of Menstruation on Schooling

Effect of Menstruation on Schooling is measured as follows:

Figure 7: Effect of Menstruation on Schooling

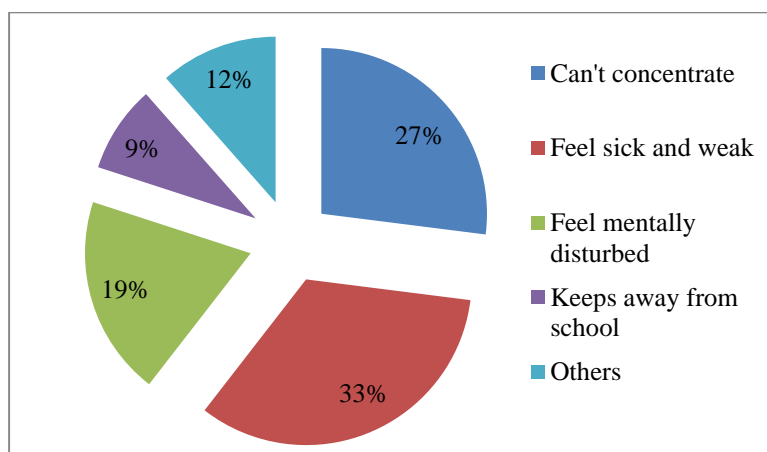


Figure 7 shows that their menstruation effects on schooling at the onset of Menstruation. One of the fundamental question in the study focuses on impact of menstrual management including potential drop out. 27% (108) Respondents can't concentrate at the school onset of Menstruation, 33% (134) Majority respondents feel sick and weak at the school onset of Menstruation, 19% (78) Respondents feels mentally disturbed at the school onset of Menstruation that's why they feeling angry. 9 % (34) less respondents wants to keeps their out of school at the onset of Menstruation. 12 % (46) respondents said that they have no problem at the school onset of Menstruation.

6.9 Menstrual Hygiene Management Before Starting Menstruation (Menarche)

Menstrual hygiene management before starting menstruation (menarche) is charted in below:

Figure 8: Menstrual Hygiene Management Before Starting Menstruation (Menarche)

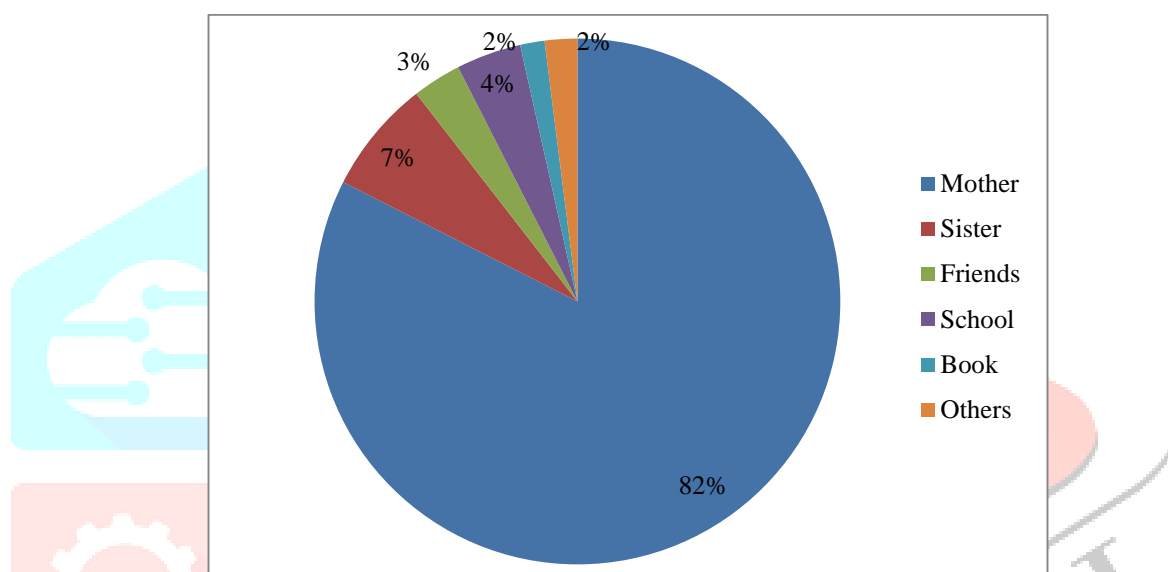


Figure 8 shows that sources of respondents know about menstrual hygiene management before starting Menstruation. 82.5% (330) Majority respondents knew it from their mother, 7% (28) respondents knew it from their sister, few 3 % (12) respondents knew it from their friends, 4 % (16) respondents knew it from their school, Less 1.5 % (6) respondents knew it from their Books, 2% (8) respondents knew it from others way. Like as Grandmother.

6.10 Comfortable to Disclose Menstruation with their Family Member

How comfortable to disclose menstruation with their family member is depicted below:

Figure 9: Comfortable to Disclose Menstruation with their Family Member

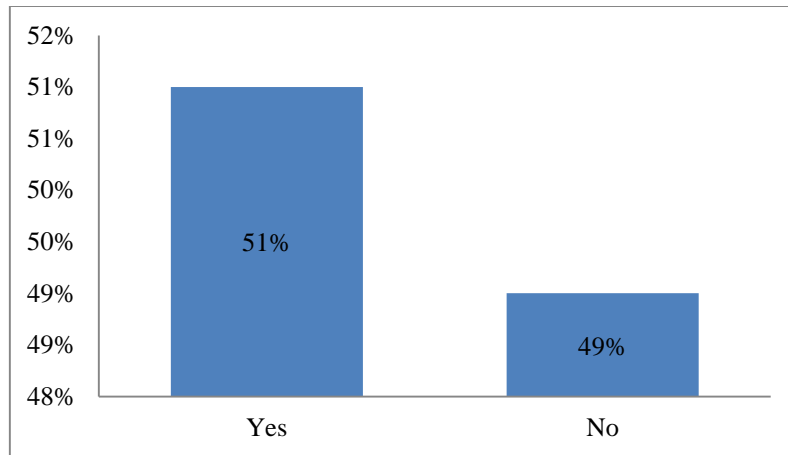


Figure 9 shows that respondents are comfortable to disclose their onset of Menstruation with their Family member. 51% (204) Major respondents said that they are comfortable to disclose onset of menstruation with their Family Member, computably less 49% (196) respondents said that they are not comfortable to disclose it with their family member.

6.11 Source of Respondents Share Their First Menstruation (Menarche)

Source of respondents share their first menstruation (menarche) is sated in following figure:

Figure 10: Source of Respondents Share Their First Menstruation (Menarche)

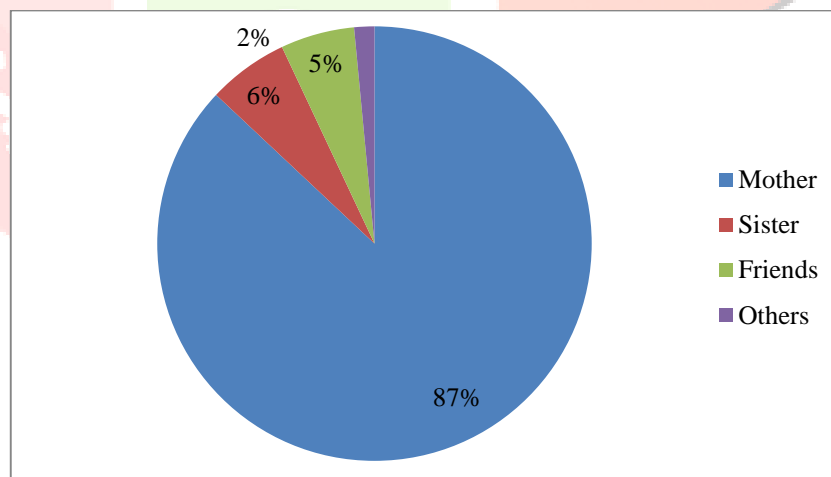


Figure 10 shows that source of respondents share their first Menstrual Experience. 87% (348) most of the respondents share their first Menstrual experience with their mother, 6% (24) respondents Share it with their Sister, 5 (20) respondents share it with their Friends, 2% (8) Less respondents share it with others. Like as Grandmother.

6.12 Types of Material Used at the Menstruation

Types of material used at the menstruation are described as under:

Figure 11: Types of Material Used at the Menstruation

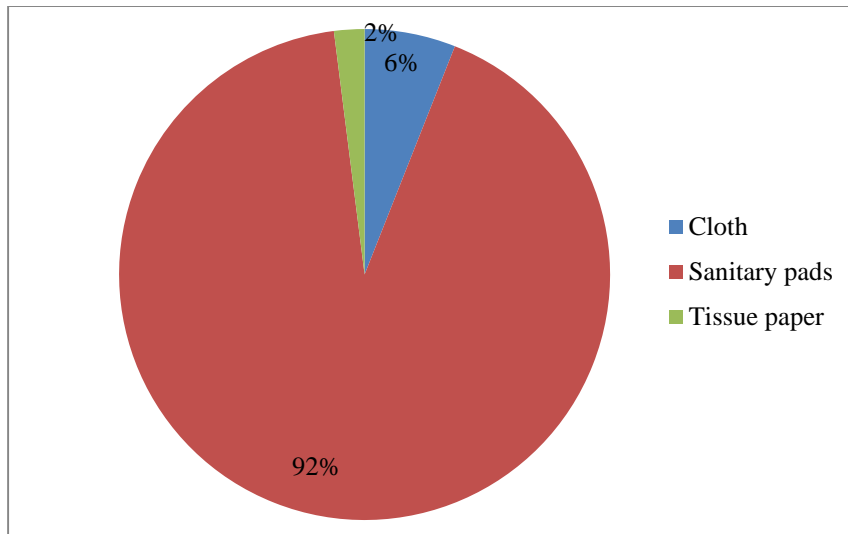


Figure 11 shows that respondents' types of Material used during Menstruation. 6% (24) less respondents used cloth, 92% (368) Most of the respondents used Sanitary Pads. 2% (8) very less respondents used Tissue Paper at the onset of Menstruation.

6.13 Procedure of Cleaning Their Absorbed Cloth

Procedure of cleaning their absorbed cloth is focused here:

Figure 12: Procedure of Cleaning Their Absorbed Cloth

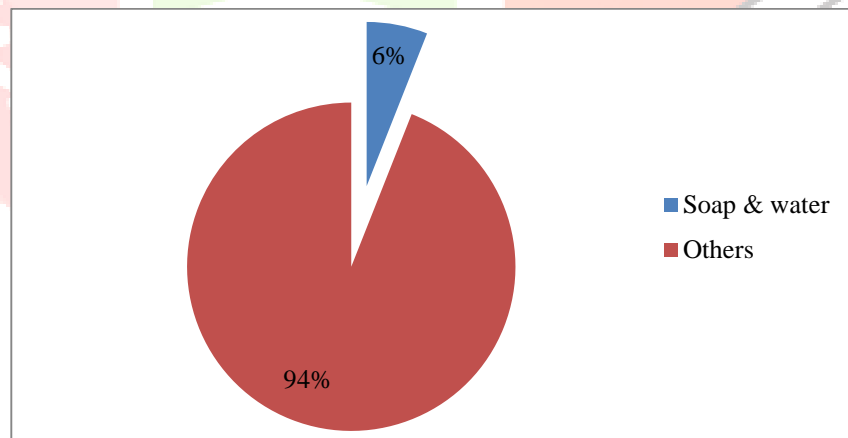


Figure 12 shows that procedure of clean their absorbed cloth. 6% (24) very less respondents use cloth & clean their used cloth by soap and water. 94% (376) most of the respondents said that they don't use cloth or others material that's why they don't need to wash it in other option.

6.14 Procedure of Drying Their Used Cloth

Procedure of drying used cloth is figured in below:

Figure 13: Procedure of Drying Their Used Cloth

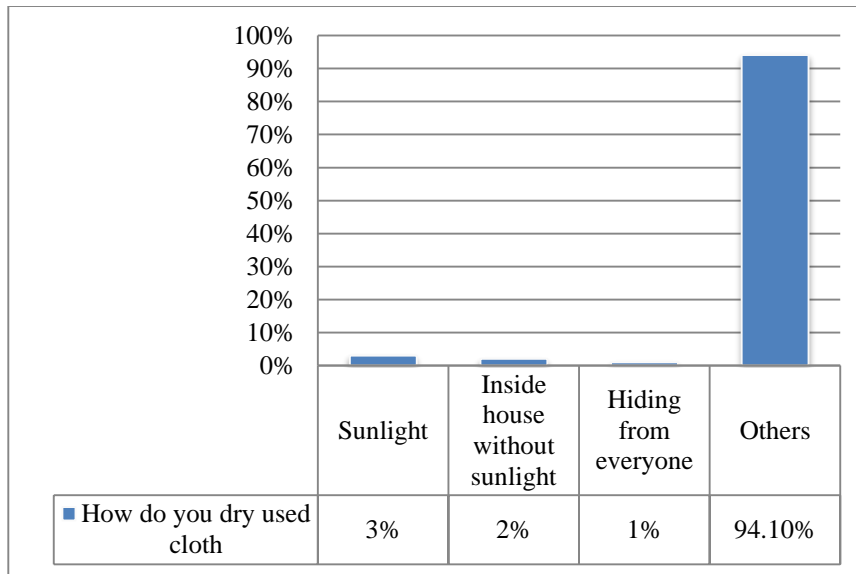


Figure 13 shows that if any respondents use cloth than how do they dry it. 3% (12) respondents said that they dry their cloth in the sunlight. 2% (8) respondents said that they dry their cloth inside house without sunlight .1% (4) respondents said that they dry their cloth hiding from everyone.94.10% (376) respondents choose other option and they written that they did not use cloth that's why they don't need to dry cloth.

6.15 Frequency of Changing Their Used Material at the Onset of Period

Frequencies of changing their used material at the onset of period are given as under:

Figure 14: Frequency of Changing Their Used Material at the Onset of Period

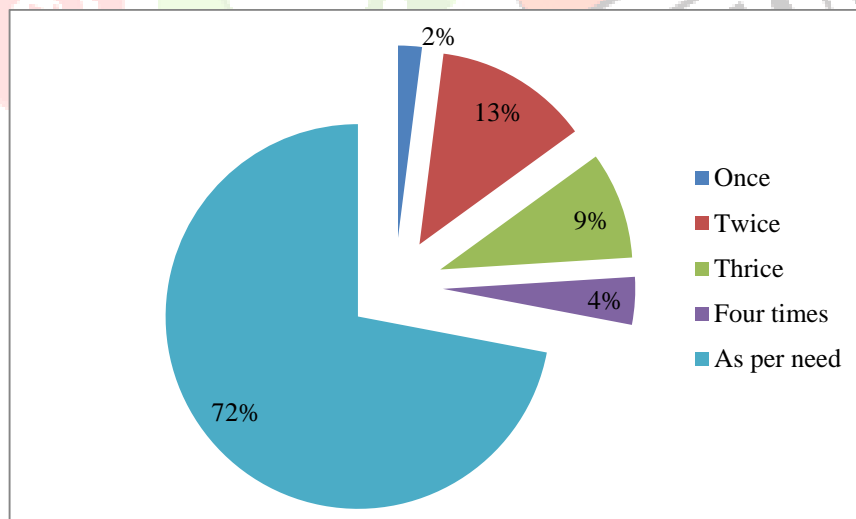


Figure 14 shows that frequency of respondent changed their material in a day onset of Menstruation.2% (8) less respondents changed their material once time per day at the onset of menstruation, 13% (52) respondents changed their material two times per day, 9% (36) respondents changed their material three times per day, 4% (16) respondents changed their material four times per day, 72% (288) majority respondents changed their material as per need.

6.16 Respondents Wash Their Hands Before and after Changing Material

Respondents wash their hands before and after changing material is pointed her here with **Yes** and **No** answer:

Figure 15: Respondents Wash Their Hands Before and after Changing Material

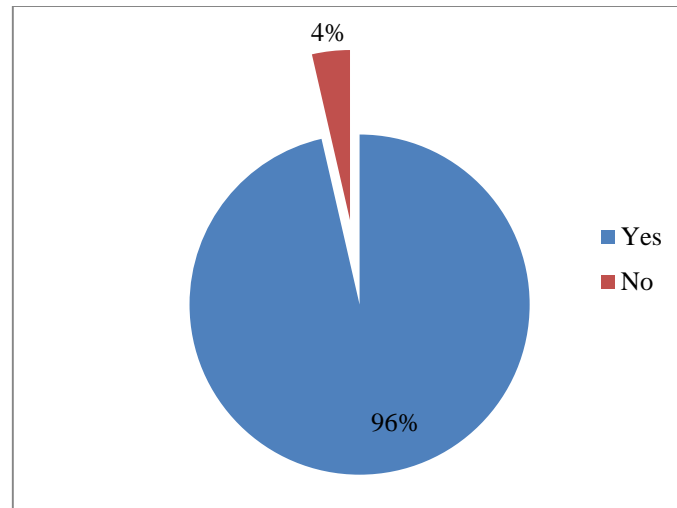


Figure 15 show that respondents wash their hands before and after changing material.96% (384) most of the respondents said that they wash their hands before and after changing material, 4% (16) less of the respondents said that they do not wash hands before and after changing material.

6.17 Frequency of Taken Bath During Period

Frequency of taken bath during period is given as under:

Figure 16: Frequency of Taken Bath During Period

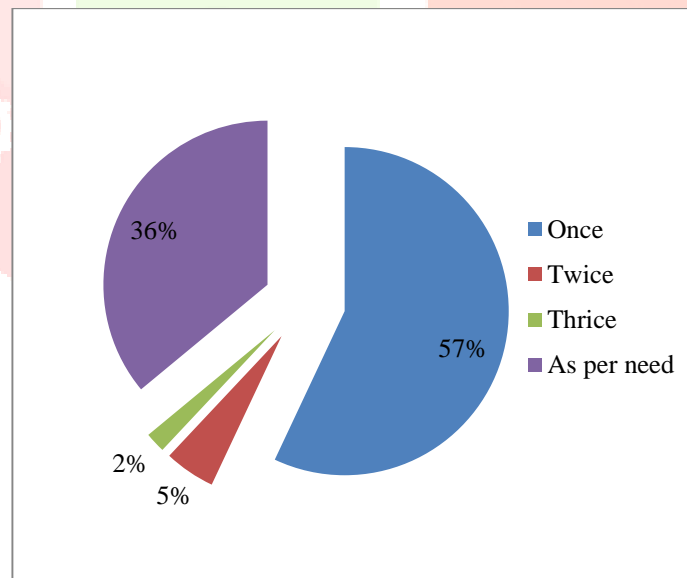


Figure 16 shows that frequency of respondents taking bath during period. 57% most of the respondents taking bath one times per day at the onset of Menstruation, 5% respondents take bath two times per day,2% less of the respondents take bath three times per day,36% respondents take bath as per need.

6.18 Frequency of Cleaning Their Genitalia During Period

Frequency of cleaning their genitalia during period is pointed out in the following figure:

Figure 17: Frequency of Cleaning Their Genitalia During Period

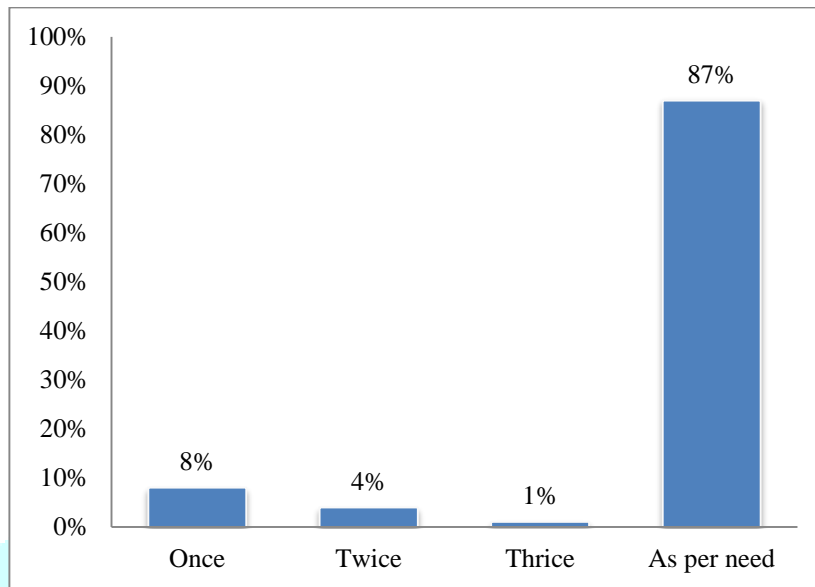


Figure 17 shows that respondent cleaning their genitalia per day during period. 8% (32) respondents clean their genitalia one times per day during period, 4% (16) respondents clean their genitalia two times per day, 1% (4) less of the respondents clean their genitalia three times per day, 87% (348) most of the respondents clean their genitalia as per need.

6.19 Procedure of Disposable of Used Material

Procedures of disposable of used material are focused in the following figure:

Figure 18: Procedure of Disposable of Used Material

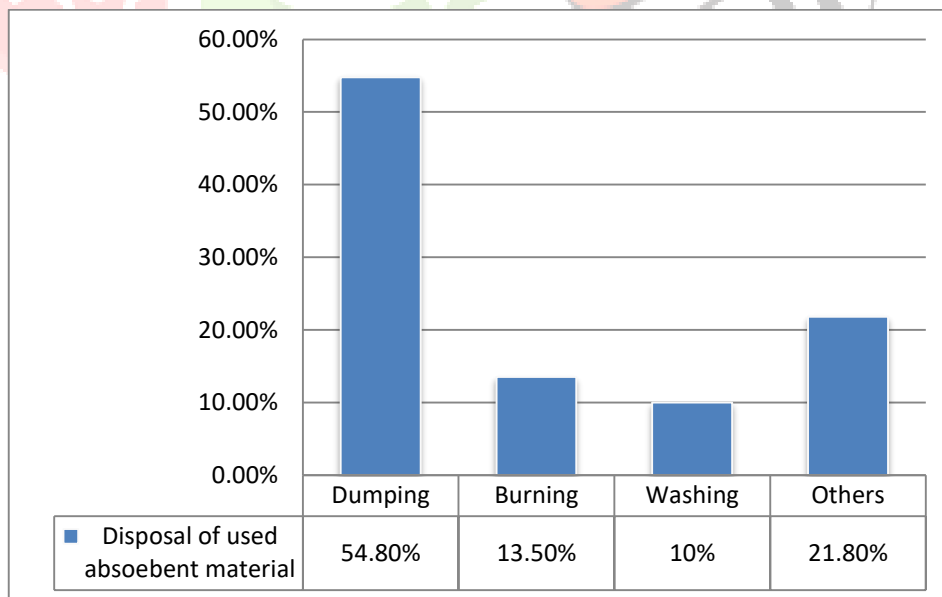


Figure 18 shows that procedure of dispose of used absorbent material at the onset of Menstruation. 54.8% (219) Most of the respondents Dumping their absorbed material, 13.5% (54) respondents Burning their used material, 10% (40) less of the respondents washing their used material, 21.8% (87) respondent said in other option they raping their used material with paper and throw it into the dustbin.

6.20 Types of Activities to Reduce Their Menstrual Pain

The measurable activities to reduce their menstrual pain are focused here:

Figure 19: Types of Activities to Reduce Their Menstrual Pain

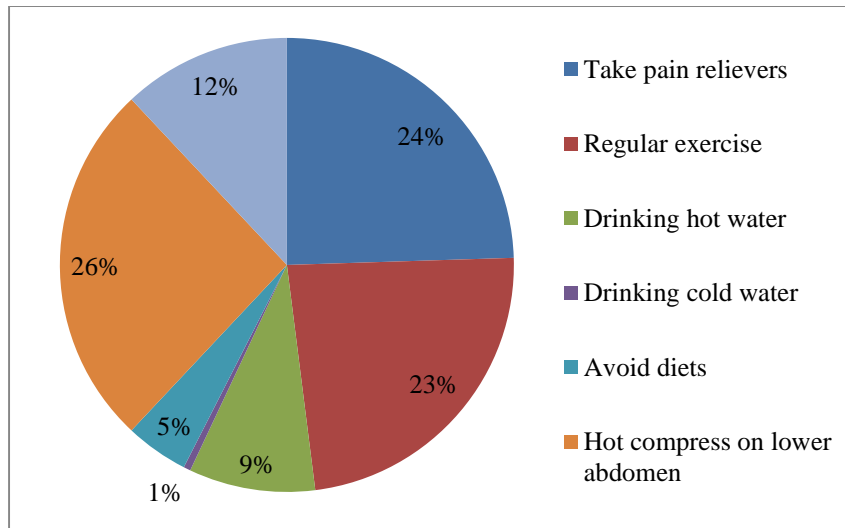


Figure 19 shows that types of Activities to reduce their menstrual pain. 24% (96) respondents take pain relievers, 23% (92) respondents do regular exercise, 9% (36) respondents drinking hot water, 1% (4) less of the respondents drinking cold water, 5% (20) respondents avoid diets, 26% (104) majority respondents take hot compress on lower abdomen, 12% (48) respondents said that they do no face pain during menstruation.

6.21 Respondents were Allowed to Attend All Religious Programs During Period

Respondents' opinion about attending all religious programs during period are stated in figure 20:

Figure 20: Respondents were Allowed to Attend All Religious Programs During Period

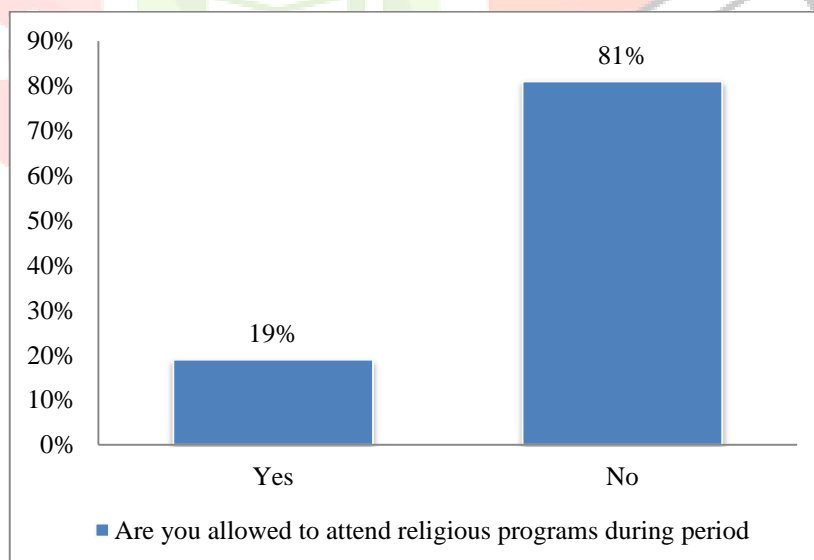


Figure 20 shows that respondents were allowed to attend all religious programs during period. 19% (76) less of the respondents are allowed to attend all religious programs during period. 81% (324) Most of the respondents said that they were not allowed to attend all religious programs during period.

6.22 Society Feeling about Menstruation

Societal feeling about menstruation are as follows:

Figure 21: Society Feeling about Menstruation

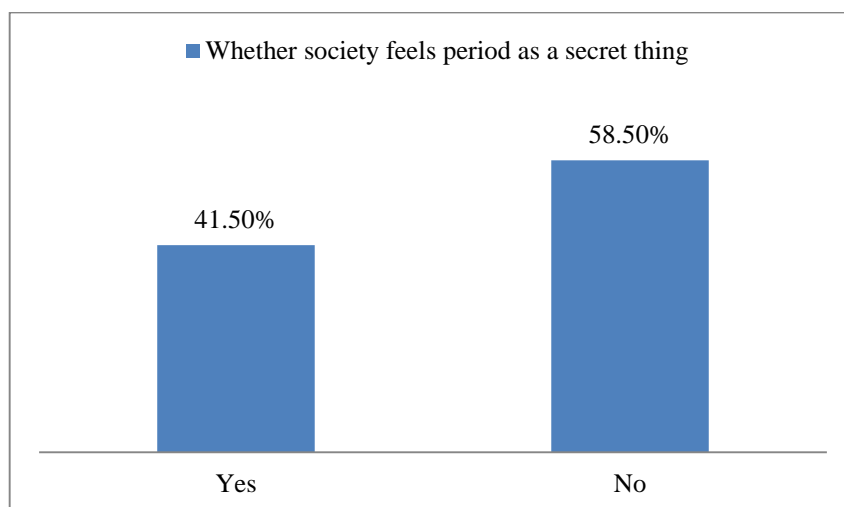


Figure 21 shows that whether society feels Menstruation is a secret thing. 41.5% (166) said that it is a secret thing, 58.5% (234) Most of the respondents said that it is not a secret thing.

VII. DISCUSSION

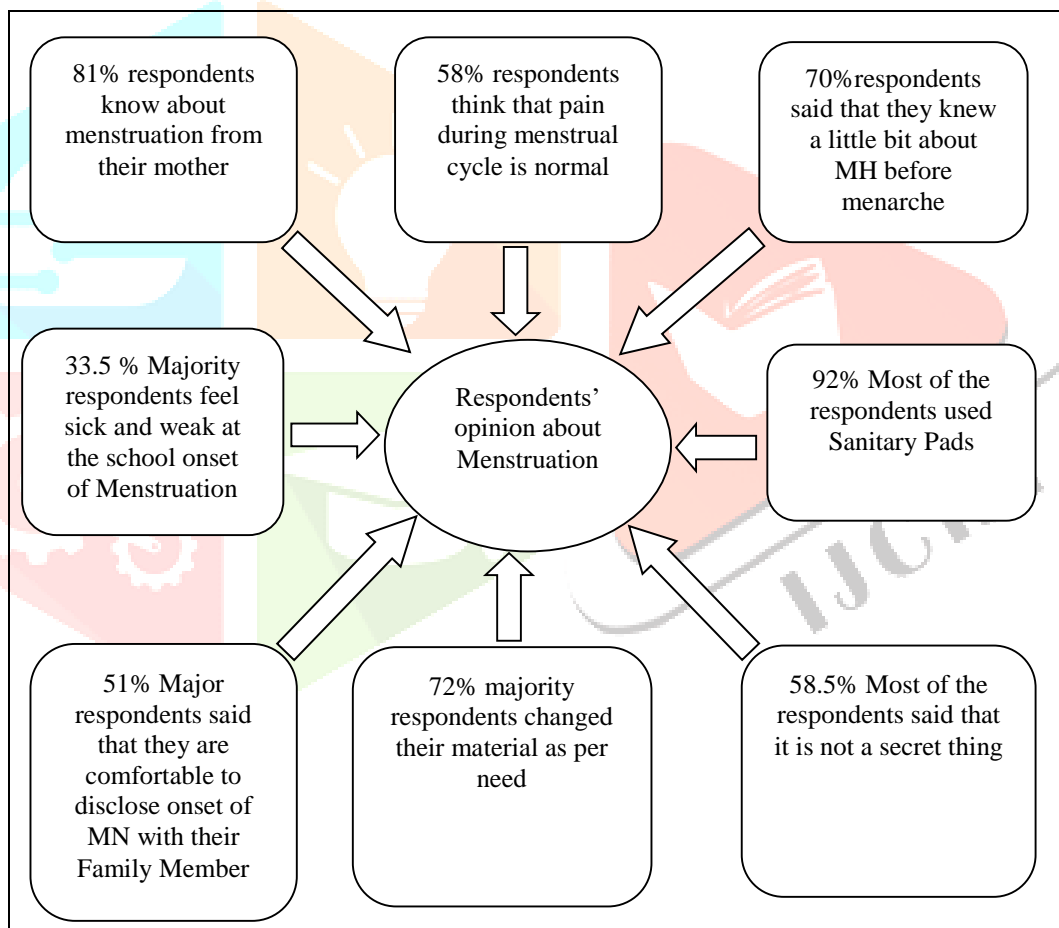
The analysis presented in Tables 1 and 2, in conjunction with the subsequent figures, offers a comprehensive understanding of the socio-demographic characteristics and awareness of menstrual health among the participants. Commencing with Table 1, it delineates the distribution of ages among the participants, indicating a predominant population (95%) below the age of 16, which aligns with the study's focus on secondary school girls. The distribution across different school classes reveals a majority (60.5%) in class seven, with fewer participants in classes six and nine. The occupation of the participants' fathers represents a diverse range, with business being the most prevalent (46.5%), followed by the "others" category, indicating a varied array of professions among the fathers. Similarly, the mothers' occupation predominantly consists of housewives (83.5%), reflecting the traditional gender roles prevalent in society. The distribution of monthly family income indicates a substantial portion (56%) with an income exceeding 15000 taka, providing insights into the economic background of the participants' families. Transitioning to Figures 1-21, these figures shed light on the participants' knowledge, practices, and societal perceptions related to menstruation. Figures 1-3 reveal the sources of knowledge about menstruation, understanding of its definition, and knowledge about the menstrual cycle. The findings emphasize the crucial role of mothers in imparting knowledge about menstruation, with relatively less influence from other sources such as sisters, friends, or books. Figures 5-7 highlight the physical and mental challenges experienced by participants during menstruation and the impact on their schooling. The majority report experiencing abdominal pain and mood changes, which can significantly affect their academic performance and overall well-being. Figures 11-13 provide insights into menstrual hygiene practices, such as the types of materials used, cleaning procedures, and disposal methods. The preference for sanitary pads over cloth indicates an increasing awareness of menstrual hygiene products. However, there is still room for improvement in ensuring proper disposal practices to maintain hygiene and

environmental sustainability. Figures 19 and 20 underscore the coping mechanisms employed by participants to alleviate menstrual pain and the restrictions imposed on their participation in religious activities during menstruation. Finally, Figure 21 reflects societal attitudes towards menstruation, with a significant proportion considering it a confidential matter. This indicates the existence of taboos and stigmas surrounding menstruation, highlighting the necessity for comprehensive menstrual health education and efforts to destigmatize it in the community. In conclusion, the analysis provides valuable insights into the socio-demographic characteristics, levels of knowledge, and practices related to menstruation among the participants, shedding light on areas that require targeted interventions to enhance menstrual health and overall well-being.

VIII. MAJOR FINDINGS OF THIS STUDY

The major findings of this study are depicted by the following figure:

Figure 22: Major Findings



IX. RECOMMENDATIONS

- ❖ It is a strong belief that an educated woman is a first teacher of a family that is why education of the mother and the adolescent girl is very important.
- ❖ Presently, as we live in a male-dominated society, educating men about basic needs of women of his family during menstruation will help in contributing toward cleaner and healthier menstrual practices.
- ❖ Teachers can play an influential role in informing them about changes during adolescence, especially about menarche and other issues related to menstruation.
- ❖ Sisters and mothers were the major source of information. Therefore, there is a need for the provision of comprehensive family life education for the parents also.
- ❖ They need to clean their genital area with hot water.
- ❖ They need to change their pad 3 to 4 hourly per day during period
- ❖ They have to take bath regularly.
- ❖ They have to wash their hands with soap after changing the pad.
- ❖ They need to keep their body clean during period.
- ❖ They need to change underwear regularly.
- ❖ Apply perfume to avoid bad smell.
- ❖ They need to more open up with their family for learn more knowledge about menstruation.
- ❖ Mother and school teacher should have to teach them about menstrual hygiene.
- ❖ They need to know a proper way to dispose absorbed material.
- ❖ We need to teach them a proper way of menstrual hygiene practice.

X. LIMITATION OF THE STUDY

- ❖ The study might try to evaluate the social and cultural barrier regarding menstruation.
- ❖ The cross-sectional nature of the study design might not show the cause-and-effect relationships between study variables.
- ❖ This study follows only qualitative data collection, and it is not triangulated by other approaches. Therefore, further longitudinal and mixed approach study design with more exhaustive and mutually exclusive categories of variables is recommended.
- ❖ Limited facility to set and discuss with supervisor.

XI. CONCLUSION

Half of the participants had good knowledge of menstruation. The practice of menstrual hygiene was low. Indeed, the findings showed a significant positive association between good knowledge of menstruation and menstrual hygiene of the respondents. Menstruation is an important indicator of reproductive health and development; thus, menstrual hygienic practices are of major concern. This study revealed that menstrual hygiene was unsatisfactory among adolescent girls. This was because of low level of education and improper assumptions about the phenomenon of menstruation. Hence, it is very crucial to educate girls about the physiological facts of menstruation, lead them to proper hygienic practices to safeguard themselves against reproductive tract infections. Various school, social welfare foundations, and nongovernment organizations should stand to disseminate awareness about menstrual hygiene, pattern, and problems.

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