

# Knowledge and practices related to menstruation among rural college going girls in Varanasi district

■ SADHANA SINGH RAJPOOT AND KALPNA GUPTA

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■ **ABSTRACT :** The main objective of this study is to assess knowledge, practices, and perception of rural college going girls, during their menstruation. The study was carried out from August, 2013 to November, 2013 in Varanasi, India. Data was collected by using pre-structured and pre tested questionnaire. Total 360 college going girls were included in the study who were studying in graduation courses. Girls were between the age group of 17 to 23 year with mean age 18.89 year. Result shows that only 29.2 per cent girls having prior knowledge about menstrual cycle before their menarche while rest 70.8 did not know about the same, among 44.8 per cent respondent source of information were mothers. Majority (76.1%) of participants were suffering from pain during menstruation. Except 1.7 per cent girls rest were following some kind of restrictions during these days. This paper reemphasizes the important, urgent and neglected need of providing correct knowledge to the community including adolescent girls.

■ **KEY WORDS:** Knowledge, Menarche, College going girls, Restriction

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See end of the paper for authors' affiliations

**SADHANA SINGH RAJPOOT**

Department of Home Science,  
Mahila Mahavidyalaya, Banaras  
Hindu University, VARANASI  
(U.P.) INDIA  
Email : sadhana86.singh@gmail.com

**M**enarche is an essential event of sexual maturation and a major indicator of female maturity (Parent *et al.*, 2003). The mean age of menarche is known to be affected by various factors which includes body fat accumulation, nutrition, environmental conditions, socio-economic status, genetic cause, and exposure to endocrine disruptors (Parent *et al.*, 2003; Khan *et al.*, 1996; Kaplowitz *et al.*, 2001 and Chowdhury *et al.*, 2000). Menstruation is a physiological process, which is associated with the ability to reproduce. The name menstruation comes from the Latin "menses" meaning moon, with reference to the lunar month and lasting also approximately 28 days long. Its onset

profoundly changes a young woman's life. There are differences between countries, cultures, religions and ethnics groups. In many low- income countries, women and girls are restricted in mobility and behaviour during menstruation due to their impurity during menstruation. In many parts of the world, menstruation is still related to a number of cultural taboos as well as feelings of shame and uncleanness. Even today menstruation is a secret of mother and daughter in many families. It is not discussed in the open. The onset of menarche brings physical as well as psychological changes. Lack of knowledge about sexuality, reproduction, contraception and sexually transmitted diseases increase vulnerability

of adolescent girls. The knowledge and practices related to menstruation influenced by socio-economic conditions as well (Drakshayani and Venkata, 1994). There are some practices related to menarche and menstruation, in many traditional societies when girl attain menarche it is celebrated. This leads to positive impact. It helps in removing anxiety and fear related to menstruation, creates awareness about nutrition and promotes positive outlooks towards women-hood.

However, in majority of cases menstruation is considered as dirty and it leads to poor genital hygiene and use of dirty clothes or napkin, poor menstrual hygiene result in genital infections contribute to female morbidity (Garg *et al.*, 2011).

### Objective :

With this background the aim of the study was to assess the knowledge, practices, source of information and perception regarding menstruation among rural college going girls of Varanasi district, Uttar Pradesh, India.

### ■ RESEARCH METHODS

Present study was conducted among 360 rural college going girls which were selected randomly from two colleges namely Sardar Bllabh Bhai Patel degree College of Kashividyapeeth block and Deen Dayal Uppadhyaya Degree College of Sewapuri block of Varanasi district in Uttar Pradesh. Data collection was done from August, 2013 to November, 2013. Before visit permission was taken from the authority and purpose of the study was explained. A self-structured questionnaire was administered to collect the information. Researcher visited college for several times to make rapport with the girls and data collection was done as per the convenience of girls (during free hours and lunch time). Before filling the questionnaire they were instructed and written consent was taken from girls. Socio-demographic information and menstruation related practice were asked. Adequate time was given to fill up the questionnaire. After data collection data were analyzed by using SPSS (Statistical package for social sciences) version 16. Appropriate statistical test were applied to test the significance of the study.

### ■ RESEARCH FINDINGS AND DISCUSSION

In the present study respondents (n=360) were

included were between the age group 17 to 23 years with the mean age 18.89 year. The study population were mainly hindu (91.7 %) and living in nuclear family (75.5 %). Out of total 22.5 per cent (n=81) respondents mother were working (engage in government services, labourer and agriculture worker) while rest 77.5 per cent (n=279) were housewives.

Table 1 depicts that out of total 29.2 per cent (n=105) knew about menstruation cycle before their menarche rest 70.8 per cent (n=255) were not having prior knowledge about the same. Significant relation was found between knowledge and age ( $p < 0.05$ ), religion ( $p < 0.05$ ), mother occupation ( $p < 0.05$ ) and father occupation ( $p < 0.05$ ).

Table 2 describes the source of information, 44.76 per cent (n=47) from mothers, 40.95 per cent (n=43) from elder sister or friends, while 14.29 per cent (n=15) get knowledge either from different magazines, radio television or more than one sources, among girls who were having prior knowledge about menstruation. This shows that mother or elder sister or peer members play important role in the prior knowledge about menstruation.

Table 3 illustrate experience and practices during menstruation, respondents were asked about the experience during the first menstruation, for majority 46.1 per cent (n= 166) of respondents it was a painful experience, for 7.2 per cent (n=26) it was a bitter experience, 6.1 per cent (n=22) respondents reported good for them while 40.6 per cent (n=146) taken this as normal. Daily cleanliness practices indicate that 80.3 per cent (n=289) girls were washing their private part daily rest were not. Pelvic pain most gynecological problem in menstruating girls, 76.1 per cent (n=274) respondents were reported about pain (dysmenorrhea) while 23.9 per cent (n=86) were not.

Girls who reported dysmenorrhea (n=274) were asked about the precaution they take during the pain 66.4 per cent (n=182) girls reported that they take medicine, 7.7 per cent (n=21) applying hot water and 24.1 per cent (n=66) do nothing because lack of support of mother and family members. Disposal practices of napkin by the respondents shows that 48.6 per cent (n=175) dispose in dustbin, 30.3 per cent (n=109) were dumping, 19.2 per cent (n=69) girls threw into the farms rest 1.9 per cent (n=7) dispose in nearby ponds.

Skipping of meal affect the occurrence of pelvic pain during the menstruation. Result shows that girls who

were skipping meals were more prone for dysmenorrhea in comparison to who were not skipping the meals during the menstruation (Table 4).

Table 5 clarify that except 1.7 per cent (n=6) respondents all were following one or other kind of restriction. Other restriction includes touching of pickles and stored food items.

In present study 360 respondents of age group 17 to 23 years with the mean age 18.89 year were included, study revealed that only 29.2 per cent (n=105) girls were

aware about the menstruation before the menarche. Prior knowledge before onset of menarche also affect the behaviour (Goel and Mittal, 2011) several studies also revealed the low level of awareness about menstruation among girls when they first experience it (Ahuja and Tewari, 1995; Singh, 2006 and Khanna *et al.*, 2005). An ICMR study reported that main source of information to the adolescent girls was their mothers (37.6 %), siblings (32.8 %) and 27.6 per cent from friends. In this study 44.8 per cent girls informed through their mother. Several

**Table 1 : Distribution of college going girls on the basis of their knowledge status on the basis regarding menstruation before commencement in relation to different socio-demographic variables**

Social variables	Prior knowledge about menstruation						Total	
	Yes		No		n	Per cent	n	Per cent
	n	Per cent	n	Per cent				
Upto 18	50	36.2	88	63.8	138	100		
>18	55	24.8	167	75.2	222	100		
Total	105	29.2	255	70.8	360	100		
	$X^2 = 5.41, df=1, P < 0.05$							
Religion								
Hindu	91	27.6	239	72.4	330	100		
Muslim	14	46.67	16	53.33	30	100		
	$X^2 = 4.85, df=1, P < 0.05$							
Caste								
SC/ST	21	31.8	45	68.2	66	100		
OBC	65	28.8	161	71.2	226	100		
General	19	27.9	49	71.1	68	100		
	$X^2 = 0.29, df=2, P > 0.05$							
Family type								
Nuclear	49	44.5	151	75.5	200	100		
Joint	56	35	104	65	160	100		
	$X^2 = 4.75, df=1, P > 0.05$							
Year of education								
I Year	28	32.6	58	67.4	86	100		
II Year	55	28.8	136	71.2	191	100		
III year	22	26.5	61	73.5	83	100		
	$X^2 = 0.78, df=2, P > 0.05$							
Mother occupation								
Working	16	19.8	65	80.2	81	100		
Non-working	89	31.9	190	68.1	279	100		
	$X^2 = 4.48, df=1, P < 0.05$							
Father occupation								
Service	26	33.3	52	66.7	78	100		
Business	6	27.3	16	72.7	22	100		
Agriculturist	27	20.5	105	79.5	132	100		
Labourer	46	35.9	82	64.1	128	100		
	$X^2 = 8.38, df=3, P < 0.05$							

studies revealed that the majority of the adolescent girls had incomplete and inaccurate information about the menstrual physiology and hygiene. Studies also revealed that mothers, friends, relatives teacher and television were

main sources of information on these matters (Thakre *et al.*, 2011; Mudey, 2010; Ghattargi and Deo, 2005; Dasgupta and Sarkar, 2008).

Experience about menarche indicates that for 46.1

Sources	n	Percentage
Through mother	47	44.76
Siblings or peers	43	40.95
Different magazines	2	1.91
Radio / Television	6	5.71
1+2	3	2.85
2+3	2	1.91
2+4	2	1.91

Experience during first menstruation	n	Percentage
Normal	146	40.6
Good/ pleasant	22	6.1
Bitter	26	7.2
Painful	166	46.1
Total	360	100
<b>Daily cleanliness of vaginal parts</b>		
Yes	289	80.3
No	71	19.7
<b>Pain (dysmenorrhea) during menstruation</b>		
Yes	274	76.1
No	86	23.9
<b>Precaution during pain</b>		
Application of hot water	21	7.7
Intake of medicine	182	66.4
No action/ Do nothing	66	24.1
1+2	5	1.8
Total	274	100
<b>Disposal of Napkin</b>		
Dumping	109	30.3
In farms	69	19.2
Garbage	175	48.6
Ponds	7	1.9

Skipping of meal	Occurrence of pain					
	Yes		No		Total	
	n	Per cent	n	Per cent	n	Per cent
Yes	86	81.90	19	18.10	105	100
No	79	65.80	41	34.20	120	100
Sometime	109	80.70	26	19.30	135	100
Total	274	76.1	86	23.9	360	100

$X^2=10.50, df= 2, P<0.01$

**Table 5 : Distribution of subject on the basis of restriction during menstruation**

Restriction	n	Percentage
No restriction	06	1.70
Restriction for cooking food	24	6.70
Worship	286	79.40
Other restriction	44	12.20
Total	360	100.0

per cent girls it was a painful experience, for 40.6 per cent it was normal. Daily cleanliness shows that 19.7 per cent do not clean their private part daily.

Dysmenorrhea is a common gynecological problem faced by menstruating girls. Present study shows that three fourth (76.1%) girls reported pain during menstruation. Chauhan and Kala (2012) study depicts that girls who were underweight (BMI < 18.5) and severely underweight (BMI < 16.5) were suffering from moderate to severe dysmenorrhea while girls with normal BMI had no dysmenorrhea. Dysmenorrhea reported a common problem (67.2 %) and effect girls in daily activities (Sharma *et al.*, 2008 and Banikarim *et al.*, 2000). Treatment for dysmenorrhea by study subject shows that 66.4 per cent were taking medicines, 7.7 per cent applying hot water. Graz *et al.* (2014) revealed that most frequent used treatments for dysmenorrhea were ibuprofene (53%), paracetamol (51%), hormonal contraception (40%), hot-water bottle (or hot pad) (35%), food supplements or medicinal plants (23%), hot-water bottle as most satisfactory. In present study skipping of meals significantly ( $p < 0.01$ ) related with occurrence of pain.

Study also illustrate that except 1.7 per cent rest of the respondents were following some taboos or restrictions, similar result were also found by Yasmin *et al.* (2013). Dasgupta and Sarkar (2008) reported 85 per cent school going adolescent girls practicing different forms of restriction. Isolation and restrictions imposed during menstruation may incorporate negative attitude towards this phenomenon among these girls. Entry into kitchen area and worship were restricted during these days resulting in development of negative thought (Goel and Mittal, 2011).

### Conclusion :

At the end we can say that rural adolescent girls lacking in awareness, availability of resources reproductive health education and family support. Study highlighted the need of college going girls about accurate

and adequate information about menstruation and its management. Mother bridges the gap and play vital role in communication of information hence mothers be armed with the correct information and necessary skills.

Authors' affiliations:

**KALPNA GUPTA**, Department of Home Science, Mahila Mahavidyalaya, Banaras Hindu University VARANASI (U.P.) INDIA

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