

Menstruation issues among adolescent girls in Jaipur district

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■ **ABSTRACT :** Menstruation is a natural phenomenon occurring during adolescence. Due to the different taboos, cultural and social restrictions, adolescent girls remain ignorant about the scientific facts of menstruation and suffer silently. This study was conducted to assess the knowledge, practice and cultural taboos regarding menstruation among adolescent girls. Study was conducted among 161 adolescent girls of government residential schools (Kasturba Gandhi Balika Vidhyalaya (KGBV)) situated in different blocks of Jaipur, Rajasthan with the help of self-designed questionnaire. Out of 161 respondents, 53 per cent girls were partially aware about menstruation before menarche, friends were the main source of information in case of 73 per cent girls. Almost entire sample was ignorant regarding knowledge about basic physiology and hygiene maintenance during menstruation was very poor. Regarding practices, old cloth was found to be the most common absorbent material at home and only 4 per cent girls were using sanitary napkin at home. Almost entire sample believed in the prevalent cultural taboos followed during menstruation. Menstrual hygiene still remains a risk factor for RTI and hence it is recommended that menstrual hygiene management should become an integral part of girl's education. Teachers should be equipped with the basic knowledge and correct hygiene practices. Provisions should be made in the education system to disseminate it through life skill education or special health programmes.

■ **KEY WORDS :** Menarche, Reproductive health, Menstruation, Menstrual hygiene management

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Menstruation is a natural biological phenomenon that occurs throughout the reproductive years of women's life. Menarche is the important landmark in the process of growth and maturation.. Besides knowledge, it demands materials and facilities that enable hygienic practices and gives girls privacy and dignity they deserve. Inadequate knowledge about menstruation and hesitation results into raising queries among girls which often remain unanswered. Due to lack of information on this natural phenomenon and culturally divergent beliefs and practices, rural adolescent girls often manage menstruation in unsafe manner that leads to reproductive tract infections (Khanna *et al.*, 2005).

Various studies have been conducted on different issues of menstruation in and outside the country, but in the vast state of Rajasthan, there are few anecdotal evidence around this issue. This calls for immediate attention as menstruation

hampers the fulfillment of UN agreed Millennium Development Goals-2 and 3 that is universalization of elementary education and to promote gender inequality and empower women. According to statistics published by Directorate of education (Rajasthan Development Report, India), 60 per cent of children in Rajasthan drop out before class 5th among this majority are girls and one of the reasons is lack of toilet facilities. In the state, 61 per cent of women in the age group 15-49, years are illiterate and the proportion of women aged 15-19 years, bearing child is more than twice as high in rural areas (19 %) as in urban areas (9%) (NFHS-3). Above all, early child marriages and child bearing accompanied by a strong son preference in the community prove detrimental to a young girl who does not understand the scientific fact behind menstruation and manages it in a quite unhealthy manner.

However, urban adolescent girls have better exposure and dialogue with others on this issue compared to their

counterparts from backward settings. Keeping above in view, the present study was planned to explore the knowledge, practices and the cultural concern of the rural backward adolescent community of Rajasthan with regard to most sensitive issue of menstruation.

■ RESEARCH METHODS

The study was conducted on the adolescent girls of Kasturba Gandhi Balika Vidhyalaya (KGBV) in Jaipur district of Rajasthan. KGBV scheme is applicable only in identified educationally backward block by government of India. It is government approved schemes for setting up residential school with boarding facilities at elementary level for girls belonging predominantly to ST, SC, OBC and minorities in difficult areas. The study was conducted in these schools after taking the permission from the Rajasthan Council for Elementary Education (RCEE).

These schools being residential all facilities are given by the government for the girls. A total of seven KGBVs are there in Jaipur District and all were selected for the study. They were at Amber (Anooppura), Jamwa (Ramgarh), Bassi (Kalyanpur), Dudu (Bairaj), Phagi (Bhojura), Chaksu (Sheetla Mata Maindir) and Sanganer (Pavaliya). All these centres are situated within 20-50 km. from Jaipur city. Initially with the help of warden or teacher, a contact was built up with the students and after this, the data collection process was initiated. A total of 350 girls were registered at all centres and out of them 161 were menstruating. All menstruating adolescent girls studying from 6th to 8th standard were selected and the study was successfully carried out with the help of wardens and teachers of concern KGBVs. Questionnaire was used to collect the data.

■ RESEARCH FINDINGS AND DISCUSSION

Out of total 350 adolescent girls studying, 161 menstruating adolescent girls were selected for the study. The maximum number *i.e.* 51 per cent were between 13-14 years, 22 per cent were of 12-13 years, 14 per cent were of 14-15 years, 9 per cent were in 11-12 years and the rest 4 per cent were in the age group of 15-17 years (Table 1). The class wise distribution of the girls showed that out of 161 menstruating girls, 16 per cent were in 6th class, 39 per cent in 7th class and the rest 45 per cent in 8th class. Forty one per cent girls reported having had their menarche between the ages of 13-14 years, 30 per cent had menarche at the age of 12-13 years, 19 per cent reported between 11-12 years, 8 per cent subjects reported at the age of 9-11 years and only 2 per cent had the menarche at 14-16 years. The mean age of menarche was found to be 12.7 years in this sample. In various studies most of the girls have their menarche between 12-14 years in Indian settings (Khanna *et al.*, 2005, Dasgupta *et al.*, 2008, Sanyal and Ray, 2008, Garg *et al.*, 2001).

Table 1 : Sample characteristics (n=161)

Category	No.	Percentage
Age of respondent		
11-12 years	14	9
12-13 years	35	22
13-14 years	82	51
14-15 years	23	14
15-17 years	7	4
Class		
6 th	26	16
7 th	63	39
8 th	72	45
Age at menarche		
9-11 years	13	8
11-12 years	31	19
12-13 years	48	30
13-14 years	66	41
14-16 years	3	2

Table 2 presents that 47 per cent of the respondents were completely unaware and 53 per cent of the girls were partially aware about menstruation before menarche. These girls were acquainted with the word menstruation and have a vague idea of blood passing out through their genital organs during menstruation. Apparently they take menarche as traumatic and fearful event resulting into crying when they first see the menstrual blood. Girls should be educated about menstrual pattern, its significance so that they face it with less anxiety. Different studies conducted in different states also reported that majority of girls had no prior information about menstruation (Khanna *et al.*, 2005, Nair *et al.*, 2007, Garg *et al.*, 2001, Singh, 2009, Dhingra *et al.*, 2009). In this study, most of the girls (73%) receive information about the menstruation from their friends; the reason for this is that the girls stay in hostel. Similar results were also found in other studies where friends were the major source of information among adolescent girls, though the girls were residing with their families (Singh, 2009, Dhingra *et al.*, 2009). Another report (Garg *et al.*, 2001) clearly indicated that none of the respondents receives information from mothers. Few studies reflect that mother is the major source of information about menstruation (Khanna *et al.*, 2005, Dasgupta and Sarkar, 2008, Nair *et al.*, 2007, Singh *et al.*, 2006). Data also reveal that only 13 per cent, 11 per cent and 3 per cent, girls received information from their mothers, teacher/warden and relatives, respectively. This study indicated that there was not an open channel between girls, their mothers and the teacher/ wardens. Surprisingly the girls coming to hostel were not briefed by their mothers about this issue, the 'culture of silence' prevails between mother and daughter too nor the teacher or warden take the lead to brief the girls in hostel. Table depicts in hostel,

Table 2 : Information about menstruation/ its related complications (n=161)

Category	No.	Percentage
Awareness about menstruation at Menarche		
Partially aware	85	53
Unaware	76	47
Source of information before menstruation		
Mother	21	13
Friends	117	73
Relatives	5	3
Teacher	18	11
Use of material during menstruation at home		
Sanitary napkin	7	4
Cloth	143	89
Both napkins and cloth	11	7
Reason for not using sanitary napkin at home		
Economic reason	140	87
Not available at time	16	10
Cloth is easily available at home	5	3

*Multiple responses

all girls used sanitary napkin, but at home the scenario was different. At home 89 per cent girls used cloth to manage menstrual bleeding. Only 4 per cent are using sanitary napkins at home and 7 per cent are able to use it sometimes. Majority of respondent (87 %) revealed that they can't afford sanitary napkin. Different studies state that in Indian rural area cloth is mainly used by girls to manage menstruation (Khanna *et al.*, 2005, Singh, 2009, Dhingra *et al.*, 2009, Acharya *et al.*, 2006). Here, only (4%) few girls could afford to use sanitary napkins at home. So, availability, accessibility and affordability of sanitary napkin are big issues for healthy practices as even clearly pointed out by other studies (Garg *et al.*, 2001, Acharya *et al.*, 2006) (Table 2).

Table 3 spectacles that most of the girls (74%) had no knowledge about the difference between two menses. Almost entire sample was unaware about calculation of next

Table 3 : Knowledge regarding facts about menstruation and hygiene management (n=161)

Category	Yes (%)	No (%)
Correct diffences between two menses.	26	74
Calculation of next menstruation date.	3	97
Relationship of menstruation to pregnancy.	16	84
Physiology of female reproductive organs.	3	97
Organ from which bleeding comes.	2	98
#Frequently changing the menstrual material	5	95
S.N. is the best absorbent material.	100	0
Reusable cloth should be dried in sunlight.	34	64
Hand washing before and after changing menstrual material	2	98

Multiple Responses # Changed more than three times

menstruation date (97%), physiology of female reproductive organs (97%), relation of menstruation to pregnancy (84%), organ from which blood comes during menstruation (98%), and frequency of changing menstrual material (95%). Sanitary napkin is known to be the most appropriate material to all the adolescent girls. 64 per cent reported cloth should be dried in the dark place or under other clothes. It is very sad to see that the knowledge of girls about basic facts of menstruation was very poor. Menstruating girls having no knowledge about normal menstrual cycles and their inability to calculate their next expected menstrual cycle which makes them feel afraid and less confident to the phenomena which will occur in the near future. An understanding of normal physiology will help the girls to combat with problems associated with menstruation. Dasgupta *et al.*, 2008 and Singh *et al.*, 2006 clearly reported that most of the girl (97.5%, 56.5%) didn't know the source of menstrual blood. Though Singh *et al.*, 2006 reported 89.7 per cent knew about the relation of menses to pregnancy and 76 per cent knew the duration of menstrual cycle. Except the knowledge of using sanitary napkins other indicators like frequency of change, drying of washed used material and washing hands depict poor knowledge. The reflection of this was clearly seen on the practices.

Table 4 shows only 18 per cent girls were doing preparation for upcoming menstruation. Only 4 per cent girls changed menstrual material two or three times in a day. Only 2 per cent of the respondents washed their hands before and after changing menstrual material and 98 per cent respondents washed hands only after changing the menstrual material. Data revealed that most of the girls (86 %) did not take any special care to maintain their personal hygiene. Very few girls washed their external genital organs after changing absorbent material (4%) and after urination (5%). Only 10 per cent took two time bath to maintain hygiene during menstruation. Ignoring hand washing and washing of external genital organs after changing absorbent material and urination and other hygiene practices were found to be very poor. Khanna *et al.* (2005) states that girls using unsafe practices during

Table 4 : Hygiene management during menstruation (n=161)

Category	No. (Yes)	Percentage
Preparation for upcoming menstruation	29	18
Twice or thrice changing the menstrual Cloth	5	3
Hand washing before and after changing material	3	2
Hand washing after changing material	158	98
No special care	138	86
Washing external genital organs after changing material	6	4
Washing of genital organs after urination	8	5
Take Two Time Bath	16	10

menstruation had thrice the risk of getting RTIs compared to those having safe practices. In the present study, 86 per cent respondents were not concerned to maintain hygiene during this period though in some regions hygiene practices like washing of external genital organs were found to be satisfactory in 85 per cent of the respondents (Dasgupta, 2008). Lessons can be learned from experience from family health awareness campaign launched by National Aids Control Organization where 28.9 per cent women changed menstrual material more than three times and 95.3 per cent cleaned their private parts during menstruation (Acharya *et al.*, 2006).

Certain taboos are very strongly reflected in the girls as all the girls believed that going to temple, praying, touching religious books and tulsi plant should not be performed. A very large number (87%) want to abide to the restriction of not entering the kitchen and performing related activities. 56 per cent believed that they should not take out water from pot. Fifty seven per cent believed that they should not go outside in the evening time during menstruation period. Different taboos which were believed by the community were transferred to the girls through mothers. Results revealed that girls wanted to abstain themselves from all religious activities during these days. They agreed not to enter in kitchen and perform kitchen related activities as indicated by others also (Khanna *et al.*, 2005, Dasgupta and Sen, 2008, Nair *et al.*, 2007, Dhingra *et al.*, 2009) (Table 5).

Category	No.	Percentage
No entry in kitchen	140	87
Don't take water from pot	90	56
Sleep lonely	48	30
Don't take pickle	157	98
Don't make papad /mangodies	145	90
Don't go outside home at evening	92	57
Don't touch religious books	161	100
Don't go to temple	161	100
Don't pray	161	100

Conclusion:

Inadequate knowledge regarding menstruation makes the girls less confident and dignified in meeting out the challenges of adolescent age. This is further reflected in practices followed by these girls. In the present study, though the girls were living in residential schools but no impact was seen as regards to the improvement in knowledge and practices on this issue. Their beliefs system for taboos also reflected their confirmation with their mother's belief system in specific and to the whole community in general. Hence, it is urgently needed to develop and evaluate a planned teaching programme

with respect to the identified needs. Next step should be to acquaint and train the teachers/wardens for the programme and further care should be taken to incorporate it in life skill education and special health programmes for girls so that it reaches to all the girls. Girls know sanitary napkin to be the ideal material but affordability issue prohibits them to practice. Efforts should be made to design and develop low cost sanitary napkin for economically backward classes.

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