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Study on hygiene and sanitary practices during menstruation among adolescent girls of Udham Singh Nagar district of Uttarakhand

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Abstract

Menstrual hygiene is an important issue of concern amongst adolescent girls in India where menstruation is still associated with shame and people avoid discussing it. Isolation of the menstruating girls and restrictions being imposed on them in the family reinforced a negative attitude towards this natural phenomenon. The present study was carried out on 2135 girls from class 9th to 12th from three different government school of district Udham Singh Nagar. The data was collected through personal interview with the help of questionnaire. The results of the present study showed that there were inappropriate knowledge and hygiene practices during menstruation among the school going adolescent girls. Only 35.28% girls were aware of menstruation before menarche. It was also seen that 92.50% girls don't change pads in school which leads to the longer gap between changing of pads. Awareness regarding the menstruation and menstrual hygiene practices is important and proper education regarding this should be imparted to the adolescent girls in India.

Keywords: Adolescent girls, hygiene, menarche, menstruation

1. Introduction

Menstruation is a woman's monthly bleeding, it flows out generally from the uterus which is connected with the cervix through certain small openings to the vagina. During menstruation, different parts of the woman's body is involved like the pituitary glands, the fallopian tubes, the brain, the cervix, the uterus, ovaries and most importantly the vagina. Menstruation is considered as a natural phenomenon which usually occurs during the stage of adolescence which starts by the age of 12 years. Menstruation thus reflects the start of the puberty period in the females. Most menstrual periods last from 3 to 5 days. When periods come regularly, this is called the menstrual cycle. Having regular menstrual cycles is a sign that important parts of your body are working normally. The menstrual cycle provides important body chemicals, called hormones, which keeps body healthy. It also prepares female body for pregnancy each month. A cycle is counted from the first day of 1 period to the first day of the next period. The average menstrual cycle is 28 days long. Cycles can range anywhere from 21 to 35 days in adults and from 21 to 45 days in young teens. The first menstruation (menarche) occurs between the age of 11 and 15 years with a mean age of 13 years (Banerjee *et al.*, 2007) [1]. Globally, it has been observed that different forms of beliefs and perception of menstruation exist which either negate or promote the adolescent females health. Studies have shown that superstitions, illogical beliefs and misinterpretation are more common than accurate in understanding of the process of menstruation, menstrual hygiene and self care practices (Uzochukwu *et al.*, 2009) [7]. These practices reflect the perception of menstrual blood loss as an 'impure' state and not as a normal human physiological phenomenon (Shukla, S., 2005) [5]. Prevalence of sanitary napkin use remains low in India in both rural and urban communities (Mudey *et al.*, 2010) [5]. Menstruation is still regarded as something unclean or dirty in Indian society. Menstrual hygiene is an important issue of concern amongst adolescent girls in India. Many girls and women are subject to restrictions in their daily lives simply because they are menstruating. In India entering the holy places is the major restriction among urban girls whereas, not entering the kitchen is the main restriction among the rural girls during menstruation. Menstruating girls and women are also restricted from offering prayers and

touching holy books. The underlying basis for this myth is also the cultural beliefs of impurity associated with menstruation. It is further believed that menstruating women are unhygienic and unclean and hence the food they prepare or handle can get contaminated. According to study by Kumar and Srivastava in 2011, participating women also reported that during menstruation the body emits some specific smell or ray, which turns preserved food bad. And, therefore, they are not allowed to touch sour foods like pickles. However, as long as general hygiene measures are taken into account, no scientific test has shown menstruation as the reason for spoilage of any food in making. Such taboos about menstruation present in many societies impact on girls' and women's emotional state, mentality and lifestyle and most importantly, health. Keeping this in mind the present study was formulated to assess the knowledge and the practices of menstrual hygiene among school going adolescent girls.

2. Materials and methods

The present study was conducted in three different government school of district Udham Singh Nagar in the state of Uttarakhand in India. The sample size of 2135 girls from class 8th to 12th was selected and the study was carried out from October 2016 to May 2017. A questionnaire was formulated for the study having questions related with

practices and knowledge about the menstruation which includes questions related with restricted activities practiced during menstruation, the age of menarche, type of absorbent used, its disposal and the frequencies of changing them, bathing during menses etc. The data was collected through personal interview.

3. Result and discussion

Table 1 inferred the information about the menstruation. It was seen that 49.30% girls had menarche at the age of 13 where as 29.62% at 12 years of age and 11.95% girls had it at 14 years of age. The present study is in the line with the study conducted by Thakre *et al.* (2011) [6] among the adolescent School Girls of Saoner, Nagpur District in which 47.03% girls were at 13 years of age, 26.10% were at 12 years of age when they had menarche. Regarding the awareness about the menstruation before menarche it was observed that there were only 35.28% girls who had knowledge about menstruation before menarche. Raina and Balodi (2014) [2] also reported that there were 34.67% girls who knew about menstruation before menarche in their study conducted on adolescent girls of Dehradun, Uttarakhand. There were 59.11% girls who observed menstrual cramping and pain and there 33.86% girls who were having periods more than 5 days.

Table 1: Information about menstruation

Variables	No. of girls (N=2135)	Per cent (%)
Age of menarche		
≤ 11	179	8.38
12	632	29.62
13	1053	49.30
14	244	11.45
≥15	27	1.25
Awareness about menstruation before menarche		
Yes	753	35.28
No	1382	64.72
Cramping or pain during periods		
Yes	1262	59.11
No	873	40.88
Periods last more than 5 days		
Yes	723	33.86
No	1412	66.13

It is evident from table 2 that most of the girls i.e 76.29% were using commercial sanitary pads during menstruation while 23.70% were using old cloth. It was seen that 83.72% threw their used pads in routine waste and 16.28 burnt them. Data also revealed that a very big no. of girls i.e. 92.50% girls

don't change pads in schools due to which a very long gap in changing pads was observed which is not good from the hygiene point of view. It was also observed that 98.22% girls washed their hands after changing pads and almost all the girls took bath during periods which is a good sign of hygiene.

Table 2: Menstrual hygiene practices

Practices	No. of girls (N=2135)	Per cent (%)
Use of material during menstruation		
Commercial sanitary pad	1629	76.29
Old cloth	506	23.70
Method of disposal		
Burn it	348	16.28
Throw it in routine waste	1787	83.72
Change of pad in school		
Yes	160	7.49
No	1975	92.50
Washing hands after changing sanitary pads		
Yes	2097	98.22
No	38	1.77
Taking bath during period		
Yes	2132	99.85
No	3	0.14

Table 3 inferred that 1571 (73.58%) girls were following different restriction practices during menstruation. Among these 1571 girls 94.33% girls were restricted to attend religious functions and places. Study conducted by Thakre *et al.* (2011) [6] also revealed that there were 94.74% girls who were not allowed to attend religious functions. 43.73% girls

were restricted from household work and 79.31% followed separation practices, 80.71% girls were not allowed to attend school during periods. There were 94.14% girls who were not allowed to touch pickles and 86.31% girls were not allowed to have some specific food items during menstruation

Table 3: Restriction practices during periods

Restrictions	No. of girls (N=2135)	Per cent (%)
Not practiced	564	26.41
Practiced	1571	73.58
Practiced for (N=1571)		
Attend religious functions	1482	94.33
Household work	687	43.73
Separated	1246	79.31
Not allowed to go to school	1268	80.71
Play outside	476	30.29
Not allowed to touch pickles	1479	94.14
Not allowed to have curd/ rice/sour food products etc	1356	86.31

4. Conclusion

Results of the present study revealed that the knowledge and hygiene practices during menstruation are not proper among the adolescent school going girls. Good hygienic practices such as the use of commercial sanitary pads and changing them frequently are essential during menstruation. The results showed that about one fourth of the study population still was using old cloth as pads during periods and 92.50% girls don't change pads in school which leads them to use only one pad for a very long time which can cause genital infections. The population covered was from less educated families and low socio economic background which could be a reason for inappropriate menstrual knowledge and practices among these girls. Awareness about menstruation before menarche is also a big issue in India. Menstruation is generally considered as unclean and matter of shame in the Indian society. It was observed that 64.72% girls were not aware about the menstruation. Much more efforts are needed to curb misbeliefs and taboos among the Indian society related with the menstruation which leads to useless restrictions among the adolescent girls. It was also seen that the most influencing factors that affect the restrictions during menstruation are education level and the place of living i.e. rural or urban conditions. The families which are educated and residing in urban areas do not pose such restrictions during periods as compared to the families residing in rural settings. It can be concluded that with the increase of education the followed practices will diminish and the taboos attached with the menstruation will disappear. Need is to give more emphasis on girls education. Awareness regarding the need for information on healthy menstrual practices is important. Education should be imparted on reproductive health including menstrual hygiene to the girls in the schools and education material on sanitary and hygiene practices should be formulated and distributed among adolescent girls.

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