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Menstrual hygiene practices among rural adolescent girls of Saharanpur district, Uttar Pradesh

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Abstract

Menstrual hygiene practices of adolescent girls in rural areas are still affected by social taboos and beliefs. Thus, it has become a barrier in the motive of Swachh Bharat Mission, as well as a big producer of various vaginal diseases. 85 adolescent girls of 13 -23 years belonging to Saharanpur district (U.P.) were interviewed and the data was analyzed through statistical tools. Most of the girls had least awareness about the ideal MHM practices. Their disposal technique of used sanitary pads was not too eco- friendly. They expressed a dire need of menstrual hygiene training programmes for school children and their families.

Keywords: Menstrual hygiene practices, adolescent, girls, Swachh Bharat Mission

Introduction

Menstrual hygiene practices are still considered a subject not discussed openly and surrounded by taboos and social restrictions resulting lack of proper knowledge of scientific facts and sufficient hygiene practices among adolescent girls. Unhygienic menstrual practices can lead to various reproductive tract infections and pelvic inflammatory diseases and other complications.

Adolescent is an age of enormous bodily changes, hormonal transformation and development of reproductive organs in form of menstruation. The onset of menstruation means a new phase of maturation and new vulnerabilities in the lives of adolescents. Yet many adolescent girls face stigma, harassment and social exclusion during menstruation. Gender inequality, discriminatory social norms, cultural taboos, poverty and lack of basic services of toilets and disposal of sanitary products can lead to menstrual health hygiene problems which are not addressed to in their environment. It is a natural fact of life and a monthly occurrence for the 1.8 billion girls, women, transgender men and non- binary persons of reproductive age. Yet millions of menstruators across the world are denied the right to manage their monthly menstrual cycle in a dignified, healthy way. This guidance was developed for WASH, education, health and gender specialists or focal points in country offices who are working with their partners to develop programmes related to menstrual health and hygiene (MHH), UNICEF, 2020.

Menstrual hygiene management (MHH) denotes a management of hygiene associated with the menstrual process. In rural areas, menstrual hygiene practices are still unhygienic, and full of restrictions. Women in rural community do not have proper knowledge and access of sanitary products and are unable to afford these products. Therefore, still they are using home-made cloth pads and reusing washed pads again and again. Such type of practices entertain a lot of vaginal disorders and are passing among generations without any question, discussion and decision.

A study among aged 15-44 years in Odisha depicted that reproductive tract infections (RTIs) and sexually transmitted infections were 35.2% in 2002-2004 (Desai and Patel, 2011) [2]. Menstrual hygiene was a significant predictor of gynaecological problems among adolescents in urban and rural parts of West Bengal, India (Mishra *et al.*, 2016) [4].

Therefore, a cross- sectional study was undertaken to examine the existing menstruation practices and their source of knowledge among rural adolescent girls of Saharanpur district.

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Research Methodology

Present study was conducted in Nakur and Sadauli Qadeem blocks of Saharanpur district of Uttar Pradesh state. The two villages Buddha Khera and Ambehta were respectively and randomly selected from each block. 85 adolescent girls of 13-23 years belonging to each village respectively, were selected and interviewed with the help of pre-tested interview schedule including all aspects of menstrual hygiene practices along with their source of gaining knowledge about menstrual cycle. Information was also collected on socio – economic details of the sample, such as their age, educational attainment, family occupation, family income etc.

The purpose of this research was already described to the respondents so that they can openly express their views on their used practices and exhibit their existing knowledge without shyness. After collecting the data, some advisory sessions on menstrual hygiene healthy practices were conducted which were found successful in breaking the taboos observed in Indian society in general.

Results and Discussion

Table no.1 depicts the data regarding socio – economic status of the respondents. Most of the girls 51.7% were 20-23 years age-group. A total of 49.4% of girls were Hindus followed by Muslims (44.7%). Majority of them were Intermediate (58.8%). Majority of them had labor (60%) as their main parental occupation, followed by agriculture (25.9%). Majority of the respondents (40%) had low monthly income ie. below 5000/-, followed by 36.4% of Rs. 5001 to 10,000/-.

Table 1: Socio-Economic Status of the respondents

N=85

S.no.			Number	Percentage
01	Age	13-16 years	09	10.5%
		16-19 years	32	37.6%
		20-23 years	44	51.7%
02	Education	Till class VIII	12	14.1%
		Intermediate	50	58.8%
		Graduation	20	23.5%
		Post Graduation	03	3.5%
03	Religion	Hindu	42	49.4%
		Muslim	38	44.7%
		Sikh and other	05	5.9%
04	Caste	General	08	9.4%
		SC/ST	39	45.8%
		OBC	38	44.7%
05	Family occupation	Agriculture	22	25.9%
		Service	06	7.1%
		Business	06	7.1%
		Labor	51	60%
06	Family Income (Monthly in Rs.)	> 5000/-	34	40%
		5001-10,000/-	31	36.4%
		10,001-20,000/-	16	18.8%
		20,001>	04	4.7%

Their menstrual hygiene practices were assessed and showed in Table no. 02. It was observed that 76.5% of the girls used sanitary pads while only meagre respondents 23.5% used home- made cloth or cotton- based pads. Most of the girls 41.2% changed their sanitary pads three times/ day, followed by two times/ day (32.9%), once a day 16.5% and more than three times 9.4%. Most of the girls disposed of them by throwing in the garbage 50.5% whereas 30.5% disposed of them through burning and by digging it in the soil (16.4%). Majority of the girls cleaned their internal organs three times a day (34.1%) during menstrual cycle, followed by two times

(28.2%) and four times (25.9%). Only 11.7% of girls cleaned their organs once a day. Most of the girls cleaned their internal organs through soap and water (60%), followed by 40% only through water.

Table 2: Type of sanitary pads to be used during menstrual cycle

Readymade sanitary pads	Homemade cloth pads	Re -used pads
65 (76.5%)	20 (23.5%)	Nil

Table 3: Frequency of changing pads

Once in a day	Twice/ day	Three times/ day	More than three times/ day
14 (16.5%)	28 (32.9%)	35 (41.2%)	08 (9.4%)

Table 4: Methods of disposal pads

Throwing in open area	Digging	Burning	Throwing in garbage	Throwing in the toilet & flushing	Washing
Nil	14 (16.4%)	26 (30.5%)	43 (50.5%)	02 (2.4%)	Nil

Table 5: Way of cleaning internal organs

Only through water	Through soap and water
34 (40%)	51 (60%)

Table 6: Source of information about menstrual cycle

Mother	Sister	Friends	Others
55 (64.7%)	16(18.8%)	06 (7.1%)	08 (9.4%)

Table 7: Need of Training about menstrual hygiene practices

Required	Not required
85 (100%)	Nil

The information regarding their source of knowledge on menstrual cycle, was also gathered. Most of the girls 64.7% gained menstrual cycle related information through their mothers, followed by sister 18.8%, other source 9.4% and through friends 7.1%. They were also asked whether they needed training on menstrual hygiene practices. All of the girls 100% were nodded in positive manner that pre-menstrual hygiene practices training should be organized so that they can gain scientific knowledge about menstrual cycle breaking all types of taboos and traditional customs.

Menstrual hygiene practices have also become an essential part of Swachh Bharat Mission as indicated by 'Menstrual Hygiene Management Guidelines' issued by the Ministry of Drinking Water and Sanitation in December 2015. India's 113 million adolescent girls are specifically vulnerable at the onset of menarche. At this time, they need a safe environment that provide protection and guidance to ensure their physical safety, health and well- being. Through MHM framework government is providing a group of services for adolescent girls like – access to knowledge and information on menstrual hygiene practices, access to safe menstrual absorbents, water, sanitation and hygiene infrastructure and access to safe disposal of used menstrual absorbents.

Although Table no. 2 clearly indicates the healthy practices adopted by most of the respondents which is a good indication in direction of Swachh Bharat Mission, still it has a scope for more and more awareness. Lack of knowledge, embarrassment and social taboos affect adolescent girls. Menstrual hygiene practices are influenced by cultural and religious beliefs, parental influence, economic status and socio-economic pressures and these often act as barriers to

good hygiene (Chakravarthy *et al.*, 2019)^[1]. Resulting social stigma and beliefs become barriers in the path of knowledge and practices regarding MHM. Therefore, these unhygienic practices are followed by generation to generation with a slight upgradation.

Although some schools have organized awareness initiatives like- demonstration classes, video- presentations, still there is a prior need of regular awareness measures. Special sessions/ classes on MHM for children in primary level, counselling of parents, extension activities by AWWs and ASHA workers on nutrition, personal hygiene, intimate & menstrual hygiene, use of sanitary napkins should be promoted. There is a great need of reproductive health education programme in schools, specifically in rural area schools where the majority of school girls belong to low socio-economic status. Poor menstrual hygiene practices can affect reproductive health and there are various taboos and customs (Joshy *et al.*, 2019)^[3] which need to be changed through counselling and behavioral change communication.

Conclusion

Unfortunately, menstrual hygiene management practices are still considered a hidden matter less discussed in homes, educational institutions, and at common places. Although various government programmes, media, NGOs are openly creating awareness about sanitary pads, installing sanitary napkin manufacturing plant in schools with low cost and trying to break the silence through awareness, yet disposal of used napkins is still a matter of serious discussion. Many government platforms like Anganwadi Centres, ASHA, Kishori Shakti Yojna etc. are involved in providing reproductive awareness, health education, nutrition education in rural areas but it is necessary to strengthen and expand schemes to ensure their effective implementation so that most of the girls can protect their selves from vaginal infections.

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