

# Knowledge, Attitude and Practice on Menstrual Hygiene among Adolescent Girls in Kapurthala District of Punjab

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## ABSTRACT

Menstruation and menstrual hygiene practices are still bound to social and cultural restrictions. Adolescent girls have a lack of information, especially in the reproductive health. The study was conducted in higher secondary school, Kapurthala among the 12-18 years of age students. The predesigned questionnaire was employed to adolescent girl students. Results revealed that girls were using sanitary pads 23%, new cloth 63%, and old clothes 14%. . There is a need to greater awareness among them and enable them to healthy and hygienic practices.

## INTRODUCTION

Menstruation is the biological process that occurs during the reproductive cycle and involves the loss of blood through the vagina. Approximately 52 percent of the world's women are of reproductive age, which is the age at which menarche (the first menstrual bleeding) occurs. Puberty (the onset of menarche) is between 8 and 16 years old, with a median of 13 years old. Menopause (the last menstrual bleeding) typically occurs between 49 to 52 years old. Women typically menstruate between 2 to 7 days each month (House, Mahon & Cavill, 2012). This means that women who enter menopause at the age of 50 have had about 2400 menstrual days throughout their lives. To put this into context, over 800 million girls and women aged 15 to 49 are menstruating on a daily basis (Peterson and Sellius, 2018). Adolescent period is the most important period of women's life. In adolescent period most women having a lack of knowledge related to reproductive health especially menstrual hygiene, which may be due to social and cultural barriers in which they grown up. This may create various types of problems for them. They need education, awareness, and comfortable environment during their menstruation phase (Ramachandra et al., 2015). Adolescence is the growth period in which physical, mental and social changes occur. It is a big challenge for them. It is the period of transition from girl to women (Sultan, 2017). According to WHO the adolescent is the age group between 10-19 years. There are 120 millions adolescent girls in India which are accounting 10% of the population (WHO, 2018).

Menstruation is a physical process that starts when the girl enters to her adolescent period. The first menstrual process is panic and traumatic moment because it usually occurs without her knowing about it. It usually starts at 10-12 years of age. They received it as different experience but if they are aware before the menarche, they could accept it as a general physiological change and prepare for the management of menstrual cycle, and hygienic practices during menstrual phase (Gupta & Gupta, 2001).

In the menstrual phase the layer of uterus endometrial degenerates and tiny blood vessels ruptured and these secretions pass through vagina which contain unfertilized ovum also. It is also called termination of process designed to prepare lodging for a fertilized ovum. In this phase the old membranes ruptured and pass away and fresh are starting to build for next month. This usually occurs for 3-5 days (Raman, 2018).

Most studies indicate that girls were not aware during their 1<sup>st</sup> menstruation and some studies indicate (Sultana & Deepshikha, 2017) that they took information from mothers, sisters and friends.

Menstrual hygiene is very important part of the health. Hygienic practices during menstruation by the women are considerably important as it has a health impact of increases risks to reproductive tract infections. Most of the adolescent girls having a lack of information in the beginning but later they learn from mothers, friends and sisters. Adolescent girls who have a good knowledge related to menstrual hygiene practices are less vulnerable to its consequences and reproductive tract infection. Therefore enhance the knowledge regarding menstruation and hygienic practices should be started as soon as possible that may help in reducing the reproductive problems (Khanna, Goyal & Bhawsar, 2005).

This study has three parts:

1. Knowledge and attitude.
2. Avoiding daily activity.
3. Hygiene practices.

## REVIEW OF LITERATURE

Yadav RN, et al. (2018) Conducted a study on menstrual hygiene management among adolescent girls. The study was conducted on 276 students, and data was collected through a self-structured questionnaire. The results revealed that 67.4% had fair knowledge and 26.4% had good knowledge and only 40% were using good practices.

Neelkanth Namita, Singh Daneshwar, Bhatia Panda (2017) Conducted study on the knowledge assessment related to practices of menstrual hygiene and reproductive tract infection. The sample was collected by simple convenient method from higher secondary school and data was collected by semi-structured questionnaire. Results revealed that their menarche of averages is 13.5 years and awareness level is significant according to their age.

Sultan Shabana, Sahu Deepshikha (2017) Conducted study on knowledge, attitude and practices about menstruation. They conducted study on 350 girls of 10-18 years of age in Bhopal. Predesigned questionnaire was used in this study. Results revealed that majority of girls were using cloth pieces more than sanitary pads.

Balqis Maryam, Arya Insifarisa, Ritonga MN (2016) Suggested that unhygienic practices lead to greater chances of reproductive and gynaecological infection and problems and found that 180 girls from 238 are having a good and fair knowledge regarding menstrual hygiene. Ramachandra kartik et al. (2015) suggested that lack of knowledge regarding menstrual hygiene and reproductive health gives the more reproductive health problems. They conducted study on the 550 girls of 13-16 years of age. Data was collected by pretested questionnaire. Results revealed that only 34% were aware about menstruation before menarche and 69% girls were using sanitary pads and 6% were using old clothes.

## Objective

The objective of the present study is to check the knowledge and attitude towards menstruation and to study the hygienic practices during menstruation.

## METHODOLOGY

This study was a community based cross- sectional study conducted among the 121 adolescent girls 12-18 years of age in Government Senior Secondary School, Kapurthala district of Punjab. A predesigned questionnaire was employed for collection of data from the students. Ethics were followed and written consent taken from the institution after explaining the objectives of the present study.

## STATISTICAL ANALYSIS

Data obtained were collected and analyzed by simple proportions.

## RESULTS AND DISCUSSION

Table 1. Distribution of adolescent girls according to age

Age (years)	Number of girls	Percentage
12-14	38	31.40 %
14-16	64	52.89 %
16-18	19	15.70 %
Total	121	100 %

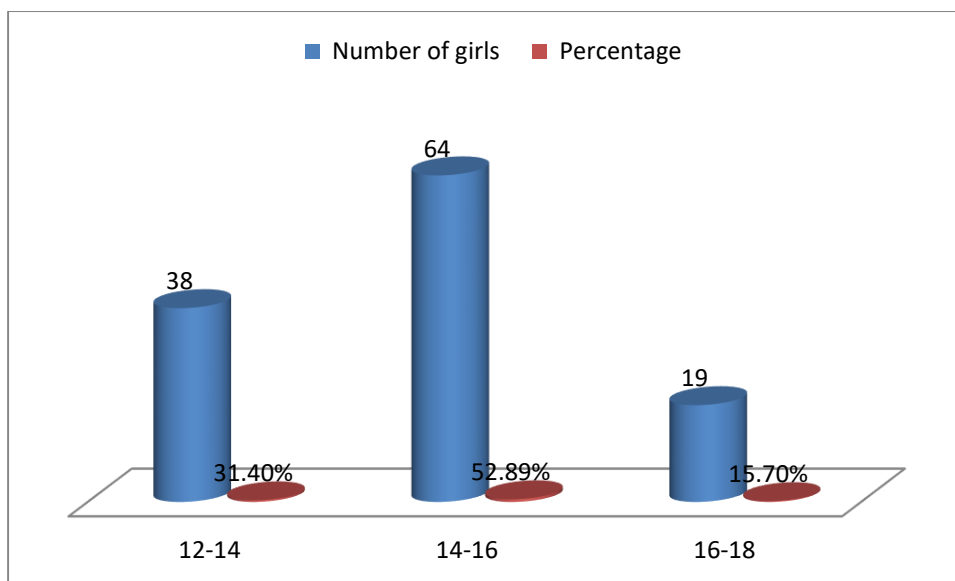
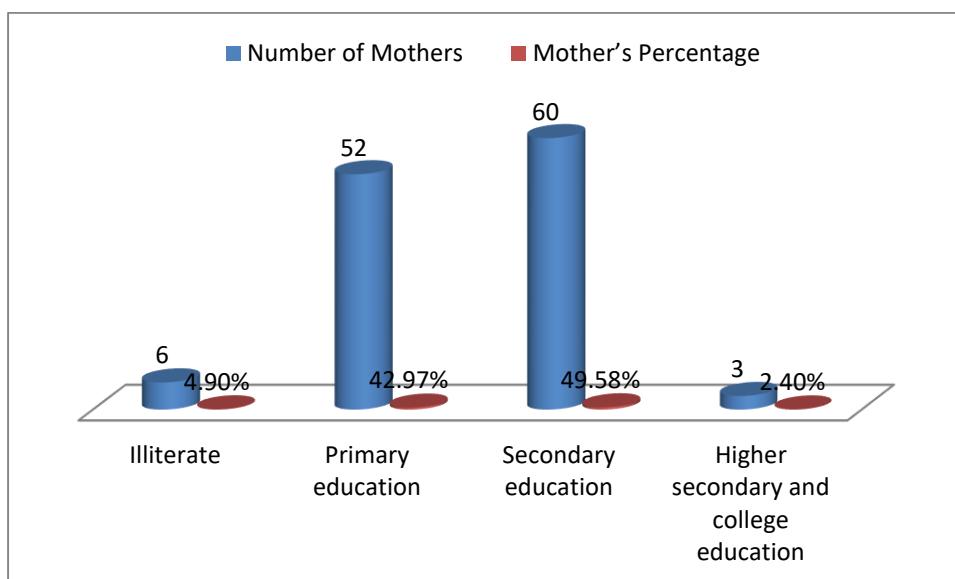


Table 1 show that majority of girls 52.89% were belonging to 14-16 years of age and 16-18 age groups have a 15.70%.

Table 2. Distribution of adolescent girls according to their mother’s educational status.

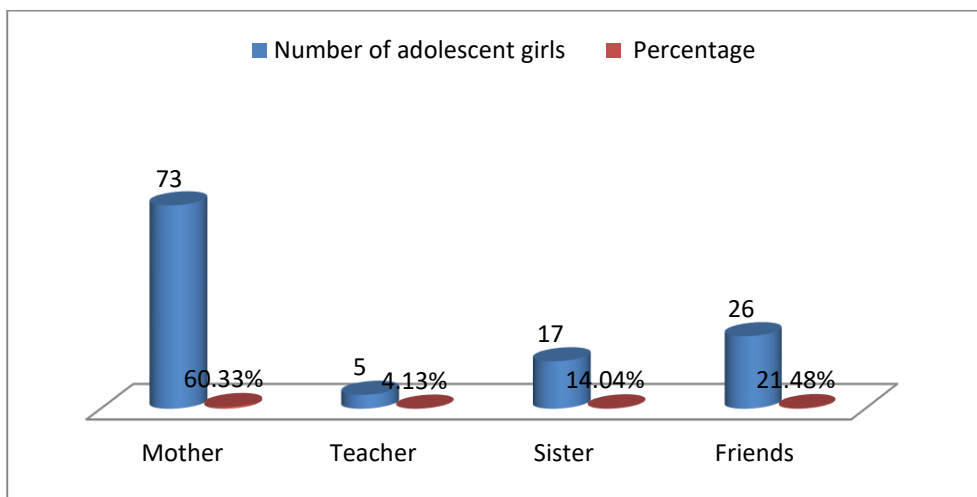
Education status	Number of Mothers	Mother’s Percentage
Illiterate	6	4.9%
Primary education	52	42.97%
Secondary education	60	49.58%
Higher secondary and college education	3	2.4%
	121	100%



Above Table 2 shows that approximately half of the adolescent girl’s mothers having a secondary education, 4.9% were illiterate, 42.97% having a primary education and few having 2.4% higher secondary education.

Table 3. Source of information

Source	Number of adolescent girls	Percentage
Mother	73	60.33%
Teacher	5	4.13%
Sister	17	14.04%
Friends	26	21.48%
	121	100%



Above Table 3 Shows that only 5% had received information from teacher while the most of the adolescent girls (60.33%) received information from the mother and 14.04% and 21.48% had received information from sister and friends respectively and only 4 girls found who have knowledge before menarche.

Table 4. Restricted daily activity

Activity	Number of adolescent girls	Percentage
Not attended religious programme	82	67.76%
Do not do house work	4	3.30%
Not eat properly	28	23.14%
Don't attend the school	12	9.9%
Don't play	71	58.67%

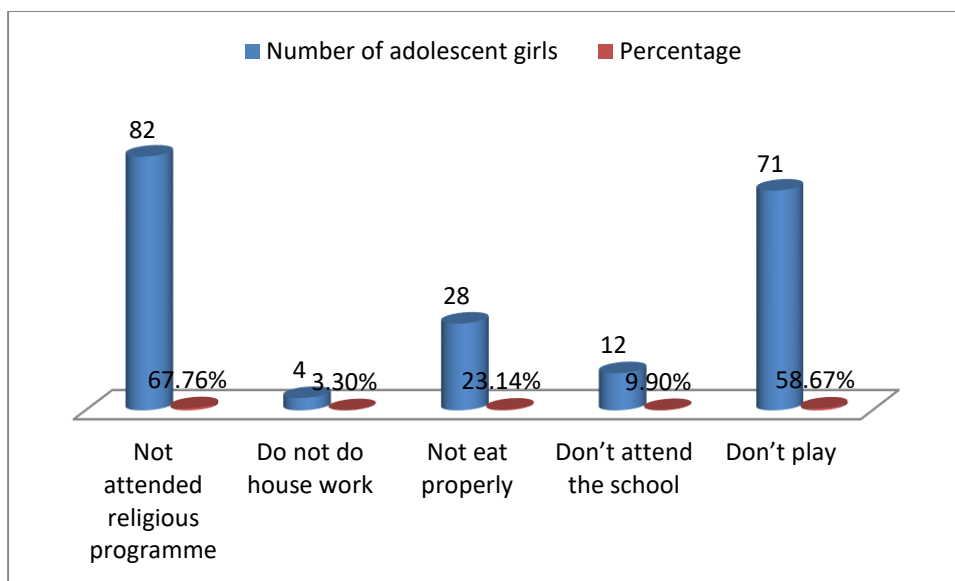
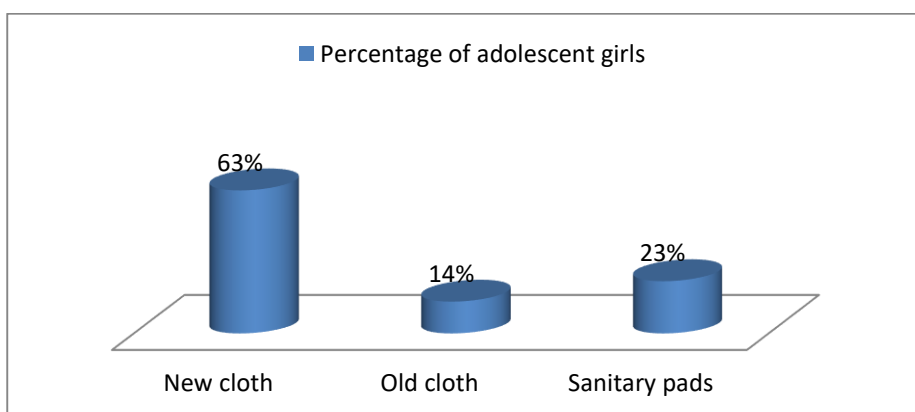


Table 4 shows that 67.76% girls did not attend religious function during they menstruating because of cultural beliefs. 3.30% are not allowed to house work, 23.14% were not eating as regular, 9.9% and 58.67% are not allowed to attend the school and play respectively.

Table 5. Hygiene practices

Regarding menstrual hygiene still some girls are using cloth in this modern time.

Type of material	Percentage of adolescent girls	Number of absorbent per day
New cloth	63%	4-5
Old cloth	14%	4-5
Sanitary pads	23%	3-4



Above Table 5 shows that only 23% adolescent girls were using sanitary pads while the other 63% were using new cloth and 14% girls were using the old cloths as absorbent.

Table 6 Reason for not using sanitary pads by adolescent girls

Parameter	Number of adolescent girls	Percentage
High cost	28	23.14%
Mothers restriction	51	42.14%
Difficult to discard	19	15.70%
Shyness	23	19%

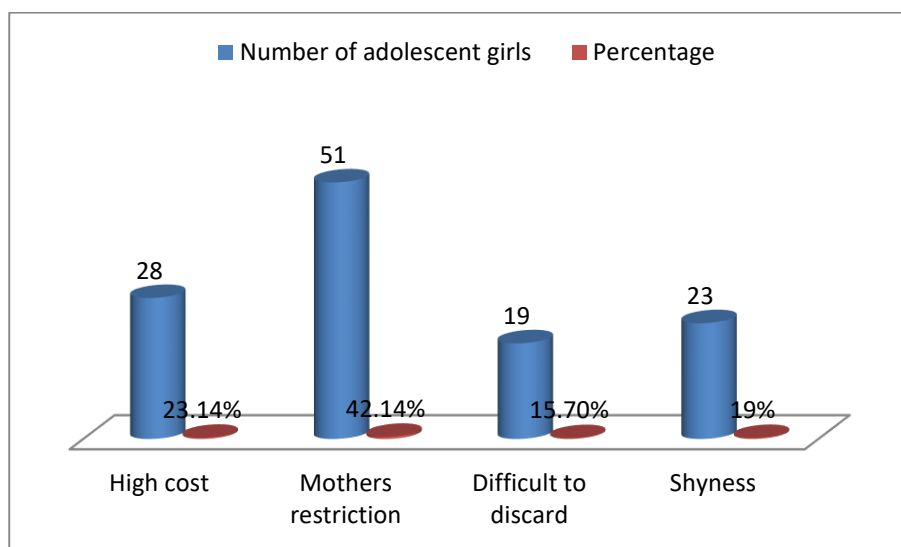


Table 7 Body hygiene during menstruation

Parameters	Number of girls	Percentage
Daily bath	121	100%
Wash genital area with Luke warm water	86	71.07 %
Unsatisfactory cleaning of genital area (only 1 time)	35	28.92%

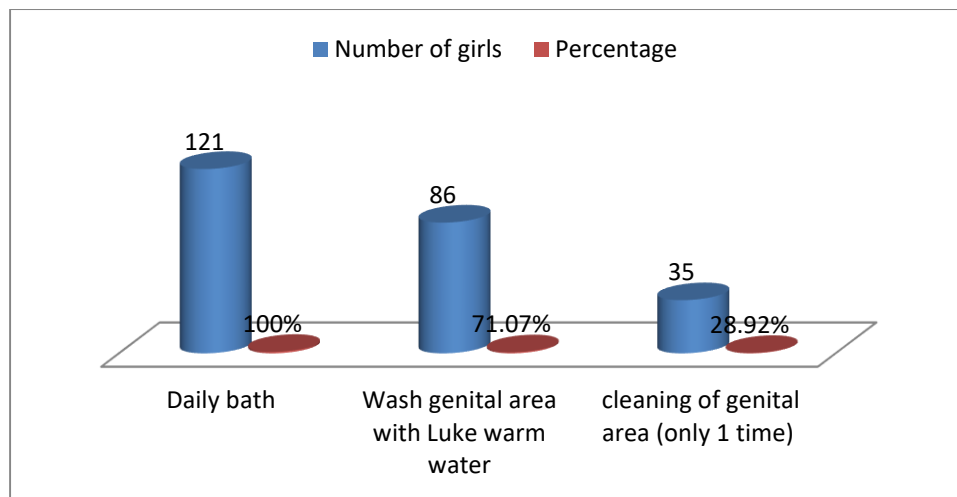


Table 7. Shows that during menstruation all girls took bath , 71.04% washed their genital area with luke warm water and 28.92% having a unsatisfactory response to clean their genital area during menstruating.

**Discussion**

The study shows that the most of menstruating girls lies in the 14-16 years age group that is 52.89%. similar study conducted by Neelkanth Namita, Singh Daneshwar and Bhatia Padma in Bhopal, India(2017) reported that age of adolescent menstruating girls was 10-19 years.

In the present study, the 4% girls were aware before their menarche but the every girl child should be aware according to their age, that is the part of health. Mother should be the primary and best source of information, in this study mother informant percentage is 60.33%.similar study was conducted in Dilla,Ethiopia and findings reveals 38.3% mothers are main source of information (Belayneh and Mekuriaw,2019).The gap of good and fair knowledge due to cultural, social values and mother’s literacy level which act as a barrier to hygienic practices and good reproductive health. These findings very similar to study conducted in Bhopal in which adolescent girls took information from mother, friends and sisters as 70%, 10%, 16% respectively.

The present study shows that majority of girls (63%) preferred new cloth and 23% girls preferred to sanitary pads and 14% preferred old cloth. They all cannot afford to sanitary pads, some felt shy and some viewed that it is difficult to discard sanitary pads. Similarly study conducted in Jatingor revealed that most of the girls 92% used sanitary pads (4) and study revealed that only 70.04% washed their genital area with Luke warm water and 28.92 having a unsatisfactory response to clean their genital area. Lack of knowledge results in unhygienic practices and following the ritual and cultural practices still.

They did not attend the religious programme during menstruation 67.6%, don’t attend school 9.9% , don’t eat some kind of foods 23.14%, didn’t participated in play activity 58.67%.

**CONCLUSION**



The present study focuses on the need of adequate and accurate information about menstruation and its management and hygienic practices among adolescent girls. There's greatest need to aware the mothers, teachers firstly so that they can distribute the knowledge in a good manner. Teacher plays an important role in teaching the reproductive health. It should be a part of syllabus and need for open discussion with adolescent girls as well as their mothers. This paper highlights the importance, urgency, and neglect of providing correct knowledge to the entire community, including adolescent and young girls. Correct knowledge will enable them to practice safe and hygienic menstrual practices and overcome traditional beliefs, misconceptions, and restrictions related to menstruation. To achieve this, proper policies should be formulated and implemented, which can be part of overall health and community development policy. The health sector, particularly the public health system, should play a proactive role. To remove unnecessary restrictions in relation to menstruation, a number of changes are needed in women's social and reproductive health situation, community planning in relation to sanitation and disposal, and product development and marketing at affordable prices.

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