



Original Research Article

Hygiene, Health Problems and Socio-Cultural Practices: What School Girls Do During Menstruation?

Manisha Hamal¹, Susma K.C²

¹Program Coordinator, Smile Foundation Nepal, Non Governmental Organization, Fulbari, Kaski, Nepal.

²Department of Public Health, School of Health and Allied Sciences, Pokhara University, Nepal.

Corresponding Author: Manisha Hamal

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ABSTRACT

Introduction: Menstrual hygiene and the socio-cultural taboo for its management was and is an issue that is insufficiently acknowledged and has not received adequate attention in the reproductive health and other related aspects. This study was undertaken with the objective to determine the prevailing knowledge, hygiene and socio cultural practices during menstruation among adolescent school girls.

Materials and Methods: A descriptive cross-sectional study was carried out 166 adolescent school girls aged 11-19 years studying at secondary level from 5 government schools of Kailali district using self-administered semi-structured questionnaire.

Results: The mean age at menarche was 12.94 years. More than one fourth of the respondents had known about menstruation before their menarche, the principle sources being friends and mothers. Nearly 5% of the respondents perceived it as disease and curse or sin. The most common health problem faced during menstruation was dysmenorrhea. Single-use commercial sanitary pad as absorbent material during menstruation was very poor. All of the respondents practiced some form of restriction or exclusion and the commonest one experienced by all was absent from religious activities. During menarche more than 10% of them had slept at cow sheds or huts which show that the "Chaupadi Pratha" still prevails in some of the community.

Conclusion: Though the knowledge seems satisfactory; the practices are not optimal for proper hygiene. The local customs and religious traditions and taboos concerning menstruation have added challenges to young girls to manage their period properly.

Key words: Hygiene, health problems, socio-cultural practices, menstruation

INTRODUCTION

Menstruation is part of the female reproductive cycle that starts when girls become sexually mature at puberty. During a menstrual period, a woman bleeds from her uterus via the vagina which lasts from three to seven days, each period commencing approximately every 28 days if she does not become pregnant during a

given cycle. Menstruation, though a natural process, has often been dealt with secrecy in many parts of Nepal as it is a subject of taboo. Hence, knowledge and information about reproductive health and functioning problems amongst the adolescent girls is poor. ^[1] Several traditional norms and beliefs, socio-economic conditions and physical infrastructure can and do influence

the practices related to menstruation. For example, a Hindu Nepali woman abstains from worship, cooking and stays away from her family as her touch is considered impure during this time. Women and girls in poor countries cannot afford sanitary pads or tampons, which has to be changed normally around two to four times a day during menstruation. However, majority of women and girls in Nepal use rags, usually torn from old saris, wash those rags quickly in latrines or in public bath early in the morning and use several times. [2] There is no private place to change and clean the rags and often no safe water and soap to wash rags properly. The gender unfriendly schools and infrastructure, and lack of adequate menstrual protection alternatives and or clean, safe, and private sanitation facilities for female girls and teachers, undermine the right of privacy, which results in a fundamental infringement of the human rights of female students and teachers. [3]

Very few studies have been conducted in field of adolescent sexual and reproductive health including menstrual health in Nepalese context. Hence, this study was done to find out the knowledge and practice of menstruation, among secondary level adolescent school girls of Nepal.

MATERIALS AND METHODS

The study was descriptive cross sectional type involving quantitative approaches. It was conducted among the school girls studying at secondary levels i.e. 6 to 10th grade from 5 government schools of Kailali district of Nepal in January, 2013. Semi structured self administered questionnaire was used to collect the data. Anonymity and confidentiality were highly emphasized and adopted to make the study more effective. Approval from the schools' administration was taken prior to the survey.

RESULTS

General characteristics of the respondents

The total numbers of respondents were 166 aged from 11 to 19 from class VI, VII, VIII, IX and X. The majority of the respondents were from class IX (32.5%) followed by class VIII i.e. (25.3%). Approximately one-third of the respondents were of age 15 years i.e. (31.3%) and the mean age of the respondents was 15.23 years. Most of the respondents were Hindu (90.4%) followed by Christian (9.6%). [Table 1a & b]

Table 1a: Baseline characteristics of Respondents (N=166)

Baseline Characteristics	Frequency	Percentage (%)
Class		
Six	12	7.2
Seven	36	21.7
Eight	42	25.3
Nine	54	32.5
Ten	22	13.3
Age		
12	6	3.6
13	4	2.4
14	44	26.5
15	52	31.3
16	18	10.8
17	28	16.9
18	12	7.2
19	2	7.2

Table 1b. Menstrual history of the Respondents (N=166)

Menstrual history	Frequency	Percentage (%)
Age at menarche		
11	4	2.4
12	52	31.3
13	72	43.4
14	28	16.9
15	8	4.8
16	2	1.2
Menstruating days		
1-3 days	18	10.8
4-6 days	134	80.7
>6 days	14	8.4

Menstrual history of the respondents

The girls have had their menarche from 11 years of age to 16 years of age. The most frequent occurring age of menarche was 13 (43.4%). The mean age of menarche was 12.94 years. Among 166 girls, 134 girls (80.7%) had their menstrual bleeding for 4-6 days while 8.4% had bleeding for more than 6 days. [Table 2]

Table 2. Information about menstruation.

Knew about menstruation before menarche (N=166)	Frequency	Percentage (%)
Yes	46	27.7
No	120	72.3
Source of information (n=46)	Frequency	Percentage (%)
Mother	10	21.7
Friend	18	39
School	8	17.6
Sisters or elder female	10	21.7

Sources of information about menstruation

About 27.7% (46 girls) had known about menstruation before their menarche. The principle source among multiple responses on knowledge about it was from their friends (39%) followed by mother (21.7%) and elder female members of the family (21.7%) i.e. elder sisters, aunt and sister in laws. Teachers and course books also played their role i.e. (17.6%). Fathers and brothers as a source of information were found to be zero. [Table 3]

Table 3. What they said about menstruation (N=166).

Menstruation is	Frequency	Percentage (%)
Normal physiological process	160	96.4
Disease	4	2.4
Curse/ sin	2	1.2

Knowledge on menstruation

In the survey, most of them recognized menstruation as normal physiological process i.e. (96.4%) whereas (2.4%) of them perceived it as disease and (1.2%) as a curse/sin. [Table 4]

Table 4. Health problems seen during menstruation (N=166).

Health problems	Frequency	Percentage (%)
Lower abdominal pain	92	55.4
Backache	10	6
Dizziness	2	1.2
Weakness	10	6
Excessive bleeding	4	2.4
Swelling	4	2.4
Lower abdominal pain and backache	14	8.4
Lower abdominal pain and dizziness	4	2.4
Lower abdominal pain and weakness	12	7.2
Lower abdominal pain and excessive bleeding	14	8.4

Health problems during menstruation

All respondents reported one or many health problems during menstruation. The most common problem during menstruation was dysmenorrhea with 92 girls (55.4%), followed by other health problems. [Table 5]

Hygiene practices to manage menstruation

In regards to the type of absorbent materials used, only (4.8%) used single use disposable sanitary pads, while remaining (95.2%) used reusable cloths. Those who used reusable pads, more than (90%) of them dried outside house with direct sunlight after washing whereas some of them used to dry those reusable pads inside their house with no sunlight. The disposal of sanitary pads and reusable cloths (no longer used) was done in multiple ways. (44.6%) of them buried, some threw it with other wastes (19.3%), some threw in toilet pans (10.8%), while burning and throwing in streams or rivers were also ways of disposing them. During menstruation, (63.9%) of the respondents mentioned taking bath daily whereas (34.9%) bathed on alternate days. [Table 6]

Table 6: Hygiene practices during menstruation.

Hygiene Practices	Frequency	Percentage (%)
Absorbent materials used (N=166)		
Sanitary pads	8	4.8
Reusable clothes	158	95.2
Drying reusable pads (n=158)		
Outside house in sunlight	146	92.8
Outside house without sunlight	6	3.6
Inside house in sunlight	6	3.6
Dispose of pads (N=166)		
Throw with other wastes	32	19.3
Buried	74	44.6
Burnt	24	14.5
Throw in streams and rivers	18	10.8
Throw inside toilet pan	18	10.8
Bathing practices (N=166)		
Daily	106	63.9
Alternative days	58	34.9
Religious purpose	2	1.2

Socio-cultural traditions and practices during menstruation

During menarche 75.9% slept in their own room, while 13.3% slept in other rooms' of their own house. 10.8% of them slept at cow sheds/ huts. All of them had some kind of restrictions enforced in them. The most restricted practice during menstruation was related to attending religious function or ceremony. They were not allowed to attend religious functions or go to sacred places. And others were related to kitchen works, not allowed to eat together or even entering the kitchen. Some of them were even not allowed to enter their house. Only (20.5%) had missed one or more school days during her periods and the reason was lower abdominal pain. [Table 7]

Table 7: Socio-cultural traditions and practices during menstruation (N=166).

Place they slept during menarche	Frequency	Percentage (%)
Others room in own house	22	13.3
Own room	126	75.9
Cow shed/ huts	18	10.8
Absenteeism in school	Frequency	Percentage (%)
Yes	34	20.5
No	132	79.5

DISCUSSION

Menstruation is a very complex process involving many different hormones, the sexual organs and the nervous system. Doing regular exercise, keeping our body fit and healthy can help to regulate the menstrual cycle. Menstruation is an awkward subject to talk about, especially with pre-teen girls, who seem to get shy more easily than anyone else. [1] The prevailing situation around menstruation in secondary level adolescent girls revealed that menstruation is routine, always occurring but unspoken. Moreover, it is associated with psychological, physical, social and educational problems but not well addressed or given due attention. [4]

The mean age at menarche in this study was 12.94 years which vary a little bit

from other studies conducted in different parts of Nepal. [2, 4, 5]

About 27.7% had already known about menstruation even before their menarche identified friends (39%) as the source of information on menstruation, whereas in other studies the main source of information is their mother. [6-9] In this study 21.7% got knowledge on menstrual hygiene from their mother which is the second source of information. The knowledge provided on menstruation given by mother is often incomplete and incorrect, as it is based on cultural myths in most of the family, and therefore probably continues negative and twisted perceptions and practices of menstruation. Fathers and brothers as source of information on menstruation was found to be zero in this research and in other studies of Nepal too. [1,2] as menstruation is still a taboo to be discussed openly in our society and the girls themselves hesitate to share their problems especially related to menstruation with any male person either he's their father or brother.

All respondents reported one or many health problems before and during menstruation with dysmenorrhea in more than half of them. The result is similar to other relevant surveys done worldwide which reported that between 50-75% of young girls experience dysmenorrhea each year. [4,8] The abnormal physical condition during menstruation not only affects their daily lives and routines to a varying degree, but it also makes the girls try different remedial measures from self-medication to visiting different types of health providers.

4.5 girls out of 5 use re-usable clothes as menstrual absorbents. This figure is comparable with other studies in Nepal [1] and India [6,7,10] where large majority of the participants use re-usable clothes. The study clearly pointed out that the lack of information about disposable sanitary pad,

its high cost are the main reasons for school girls not using them.

It is evident in this study that those who knew about the sanitary pads are likely to use them instead of cloth if they could know its usefulness, got access and could afford it. The disposable pads usually have better absorption, are meant for single use and hence are considered hygienic. However, with the cloths there is a tendency towards reuse and have the potential of harboring infection agents that can cause pelvic infections. ^[1] Proper washing and drying of re-used cloth does minimize the chance of infection, and the drying practices were good as more than 90% dried their reusable cloths on direct sunlight in the study as compared to the other study in Nepal. ^[2] where the drying practices were not optimal as they had to hide the cloth from others view.

The problem of properly disposing the menstrual absorbent, mainly due to the lack of proper or no garbage collection system, at times causing problems like clogging of toilet and polluting the local environment like streams in villages as in this study among multiple responses, the girls disposed along with other garbage (19.3%), bury (44.6%), in stream or river (10.8%) and inside toilet pans (10.8%).

Abnormal physical conditions (pain, discomfort and heavy bleeding) were the main reason behind the school absenteeism in this study.

There are serious discriminatory practices against women wherein women must remain in a small shed, often where animals are kept in other times, during menstruation and post-partum periods in Nepal. ^[11] This custom still exists in some Asian, African and South American cultures. ^[3] which is known as "Chaupadi Pratha" in Nepal and in this study 10.8% of the respondents had practiced sleeping in huts and cowsheds during their menarche

period which tells us that this type of custom is still prevailing in these society.

Ten out of 10 girls in the study observed at least one or more restrictions during menstruation, which is consistent with a study in Nepal. ^[2] In this study four out of five, who had restrictions in practice, had restrictions to attend religious functions and one third of them were not allowed to touch male members of the family. Such restrictions, though varied, are practiced across the groups of different religion and culture including Hindu, Muslims, Christians and Jews and in most cases are related to the "impurity" of the females during menstruation. ^[3] Restrictions, as produced by myths, misconceptions, superstitions and taboos, is believed to have the potential to spoil food, plant, biological and social processes and even the health of their brothers if they are touched during the phase of menstruation shown in a study in Nepal. ^[2]

CONCLUSION

In conclusion, it can be said that among the adolescent school girls knowledge on menstruation seems satisfactory; however the practices are not optimal for proper hygiene. Often ignored issues of privacy affect the hygienic practices and daily lives, particularly school attendance of the adolescent girls. The know-how and affordability of sanitary napkins or pads to manage menstruation are far from satisfactory. Schools, home, society and organizations of reproductive health, women's right, child's right as well as water, sanitation and hygiene sectors need to make an effort towards making menstrual hygiene and management better for adolescent population. The local customs and cultural or religious traditions and taboos like "Chaupadi Pratha" have added challenges to some of the young girls to manage their period properly.

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