

Analyzing Menstrual Hygiene Management among Women and Adolescent Girls

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ABSTRACT

The Menstrual Hygiene Management (MHM) is a very essential aspect of hygiene for women as well as adolescent girls between menarche and menopause. Adolescence is a critical period in which physical, emotional, cognitive and social changes occur, including the monthly occurrence of menstruation of adolescent girls. Most of the society people consider menstruation and menstrual blood as taboos and impure. Such consideration prevents/stops many women and adolescent girls from proper health education, knowledge and information's related to menstrual health and hygiene, which forces them to develop their ways of managing the event. The goal/objective of the study is to describe the experiences and perceptions of women and adolescent girls on menstrual hygiene management.

Keywords: Menstruation; Menstrual hygiene management; Menopause; Adolescence

INTRODUCTION

Menstrual Hygiene Management (MHM) is a common problem for every woman and adolescent girls of every family belonging to Low and Middle Income Countries (LMICs), particularly when attending school and working women. Poor Water, Sanitation and Hygiene (WASH) facilities in schools and work place of women, inadequate puberty education and lack of hygienic items (absorbents) cause girls and women to experience/feel menstruation as shameful and uncomfortable. Qualitative studies report girls and women fear and humiliation from leaking of blood and body odor and lead menstruating girls and women to absent themselves from school and office, with the little quantitative data confirming cultural taboos add to girls and women difficulties, which prevent them from seeking help and causes restrictions on their diet and activities while menstruating. Due to insufficient MHM causes health symptoms involving the urinary and genital tracts. Recent concern for MHM, spearheaded through work to improve washrooms in schools and office has focused on the need for dignity and privacy, on raising awareness to break the silence for making safe and effective MHM absorbents available. The latter includes separate toilets for girls and ladies, water, sanitary napkins and cleansing materials and safe disposal of sanitary materials [1].

India is a country of contrasts, with extreme wealth and poverty and gender bias, which results in significant variation in health indicators among girls and women. Of the total population of women and adolescent girls only few students and women go to schools and offices, with poor MHM practices and cultural taboos which considered being impediments to their school and office attendance. The relevance of MHM to the health, well-being, achievements on their work area of women and educational achievements of girls, the Government of India has initiated an array of policies and programmers, which is implemented at state level. Varieties of MHM studies have been independently conducted across India, examining the prevalence of social, educational and health problems faced by girls and women with poor MHM.

From the whole population one third of the school going adolescent girls practiced good menstrual hygiene. The main contributors of this are mother's education, father's education, family size and living status of children. The administrators and policy makers were recommended to provide specific education on menstrual hygiene to both parents. Similarly, local government needs to subsidize hygiene towels for school adolescents and women too [2].

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Objective of the study

- To assess the status of Menstrual Hygiene Management (MHM) among women and adolescent girls.
- To increase access to use of high quality sanitary napkins to adolescent girls and women in rural areas.
- To ensure safe disposal of sanitary napkins in an environment friendly manner.

Justification of the study: Menstruation is a normal physiological process of females at reproductive age. But then also it is surrounded with social taboos and supernatural beliefs. The poor education, knowledge and understanding of menstruation may lead to unsafe hygienic practice that in terms can increase the risk of reproductive and genital urinary tract infections, cervical cancer, school and office drop out, poor academic performance and overall poor quality of life. In spite of its various affects, the knowledge and hygienic practice of women and adolescent girls towards menstruation is not well addressed, particularly among school adolescent girls. Adolescence has been recognized as a special period which requires specific attention as it marks the onset of menarche, an important and good hygienic practices during menstruation are crucial to maintain a healthy and wealthy life.

Strength of the study: This study combines current knowledge on Menstrual Hygiene Management (MHM) among adolescent's girls and women of Raigarh Chhattisgarh.

The review provides a wide perspective, evaluating multiple outcomes, such as awareness of menarche, source of knowledge on MHM, MHM absorbents used, restrictions during menstruation and school and office absenteeism. The quality of studies and lack of information on school sanitation imposed limitations on the type of analyses that could be conducted and on the interpretation of results.

Despite the caveats, our data suggest that such studies can provide data relevant for the development of MHM packages which support girls' and women menstrual needs.

MATERIALS AND METHODS

Melaku Yalew, study shows the prevalence of poor menstrual hygiene practice was high and knowledge regarding menstrual hygiene and management was significantly associated with poor menstrual hygiene practices. Diego Silva, study reveals one third of the school going adolescent girls practiced good menstrual hygiene. The main contributors of this are mother and father education, family size and living status of children. The administrators and policy makers were recommended and advise to provide specific education on menstrual hygiene to both parents.

Joyce Chinyama, study shows when menstruating, schoolgirls in rural Zambia would rather stay home than they used to be

Table 1: Background characteristics of respondents.

Age	16-26	27-36	37-46	47-56
Respondents	34	5	8	3
Percentage (%)	0.68	0.1	0.16	0.06

uncomfortable, inactive and embarrassed due to inadequate MHM facilities at school. A friendly as well as supportive MHM environment should provide education, absorbent sanitary materials and adequate WASH facilities is essential to providing equal opportunity for all girls. BMC women health study reveals during earthquake, women and girls are completely depended on the use of locally available resources as adsorbents during menstruation. Immediate relief activities by humanitarian agencies, lacked MHM activities. Re use of sanitary cloth is a way to address the menstrual hygiene needs in the post-disaster situations in Nepal [3].

Anna Maria, et al., study shows the MHM programmes in India are needed. Education on awareness, access to hygienic absorbents and disposal of MHM items need to be addressed to the families.

The research procedures followed have been distinctly described under the following sub heads.

- **Selection of locale:** Dulpur, Raigarh will be taken purposively for the present study as the researcher is from the district and feasibility of conducting the research.
- **Selection of sample:** The age 13-70 year who were at the age of puberty or have already knowledge of mensuration by adopting systematic random sampling.
- **Sample size:** 50
- **Sampling method:** Random sampling will be used to conduct the survey. A sample selected from a population in such a way that every member of the population has an equal chance of being selected and selection of any individual does not influence the selection of any other.
- **Tools of the study:** Questionnaire is used to collect the data. Only after pre-testing and final correction, the questionnaire will be supplied online pdf form or the documents form and applied for data collection.
- **Tabulation of data:** Every information from all respondents would collect by the help of questionnaire, will be arranged into simple tabular form makes comparison easy.
- **Method of analysis:** It is related to the study which include percentage is used for the analysis of the data.

Percentage=No. of respondents/total number of respondents × 100

RESULTS

In Table 1 the age of respondents is shown and the total no. of respondents is 50. The age varies of the respondents and the data were collected through questionnaire. The age group is of adolescent girls and women are given below [4].

The above table shows no. of adolescent girl respondents are more than the adult women.

68% respondents are adolescent girls and 32% respondents are adult women (Table 2).

Table 2: Distribution of adolescent girls and women by knowledge, perception and experiences of menstruations.

Perception of sanitary pads uses		
Indicator	No. of respondents	Percentage
Positive	39	78%
Negative	11	22%
How long is your average period length		
3 days	0	0%
5 days	43	86%
7 days	7	14%
Is it normal to have periods twice in a month		
Yes	0	0%
No	50	100%
Who buy your sanitary pads		
Respondent herself	34	68%
Mother	0	0%
Sister	6	12%
Father	10	20%
Brother	0	0%
Friends	0	0%
Your typical periods last for		
A week	45	90%
3 days	0	0%
3-5 days	5	10%
Menstruations painful		
Yes	22	44%
No	15	30%
Sometime	13	26%
Do you feel shy during buying sanitary material from shop		

Yes	30	60%
No	20	40%
Is your blood flows is always heavy		
True	47	94%
False	3	6%
Your blood losses during period		
3-5 ml	13	26%
5-80 ml	37	74%
90-150 ml	0	0%
Get sanitary pads from		
Medical shop	25	50%
Shop	25	50%

Here the hygiene management practice of adolescent girls and women were shown. In which 78% respondents use sanitary pads as absorbents material and 22% use something other than sanitary pad like old clothes and they reuse the cloth also. 86% of the respondents period last for 5 days and 14% respondents period last for 7 days. The respondents also know that having periods twice a month is not normal. 68% respondents' buy the sanitary pads by themselves and 12% respondents ask their sister to get sanitary pads and 20% respondents say their father to brought sanitary pads for themselves. The respondents sometimes suffer from typical periods which lie for a week [5].

44% respondents suffer from painful menstruation and 26% do not suffer from pain while 12% respondents feel pain sometimes and sometimes they don't feel pain. 60% respondents feel shy during buying the sanitary napkins and 40% do not feel shy. 94% respondents suffer from heavy flow while 6% respondents flow is normal. Half of respondent get their napkins from medical shop while half of respondents buy from general grocery store as per their convenience (Table 3).

Table 3: Menstrual hygiene management practice of adolescent girls and women.

Absorbents used		
Indicators of MHM practice	No. of respondents	Percentage
Sanitary pads	44	88%
Sometime pads/clothes	3	6%
Old clothes	3	6%
Reuse of cloth		
No	47	94%
Yes	3	6%
Washing materials		
Water and soap	50	100%
Water and antiseptic	0	0%
Water, soap and antiseptic	0	0%

Water only	0	0%
washing clothes before reuse		
No	0	0%
Yes	3	6%
Frequency of changing absorbents		
Three or more time	34	68%
Less than three time	16	32%
Place of drying washed cloths before reuse		
By keeping in bed or other clothes	0	0%
In shaded and close place	2	4%
In open and sunny place	1	2%
In shaded but open place	0	0%
Genitalia washing during menstruations		
Yes	50	100%
No	0	0%
Frequency of washing genitalia during menstruations		
Four or more time	30	60%
Less than four times	20	40%
Sanitary products available		
Tampons	3	6%
Commercial sanitary pads	47	94%
Menstrual cup	0	0%
Bamboo fibre pad	0	0%
Banana fibre pad	0	0%
All	0	0%
Ways of disposing sanitary materials		
Flushed low in the toilet	0	0%
Wrap in paper and put in dustbin	50	100%
Both the above	0	0%
None	0	0%
You wash your hand after changing		

Yes	45	90%
No	0	0%
Sometime	5	10%
What if sanitary pads not available		
Toilet paper	0	0%
Dipper	0	0%
Sanitary towel	50	100%
All	0	0%
Genitalia washing materials		
Water and soap	34	68%
Water and antiseptic	0	0%
Water, soap and antiseptic	0	0%
Water only	16	32%

The above table shows that 88% of the respondents use sanitary pads and 6% respondents use clothes or pad as per availability and their convenience or occasionally while 6% respondents use only clothes during menstruation. All the respondents use shop and water only for washing cloths hand and genital area. Only 6% respondents use old cloths and they reuse the cloths and also they use to wash the cloths properly. 68% of respondents use to change the sanitary napkins for three and more times and 32% respondents use to change for less than 3 times. 60% of the total respondents use to wash genital area for four or more times and 40% wash genital area for less than 4 times. 94% of respondents know only about the sanitary pads and 6% of respondents know about tampons while they are not aware of menstrual cup, bamboo fiber and banana fiber. They have proper knowledge about how to dispose the sanitary napkins they all use to wrap it in the paper and put it on the dustbin. 90% of population use to wash their hand after changing the pad or cloth while 10% of respondents sometimes wash their hand and sometimes they don't wash their hands. If there will be no available of sanitary pads then they will use the sanitary towels. 68% use to wash genitalia with water and soap while 32% use to wash only with water [6].

DISCUSSION

This mixed methods of the study highlights the experiences of women and young girls related to menstrual hygiene management. Although menstrual hygiene management needs are only specific to all the group of the population, which appear as an immediate pressing requisite for the women and adolescent girls affected and as such, they should be seen [7-12].

The quantitate findings of the study reveal that MHM as a priority that was not immediately addressed, however women

and girls also list MHM material as less pressing compared to other general needs because they feel ashamed to say in front of others. The data of the study presents evidence that for most of the menstruating women, it indeed was a challenge in timely accessing the material as well as availability of private space for the MHM activities. Our study reiterates the importance of MHM activities for women and adolescent girls and highlights the necessity to design culturally appropriate, should have proper knowledge and sustainable interventions embedded within well-planned interventions to support women and young girls [13-17].

Ensuring essential amount of water available for personal use, provision of ready-made hygienic kits which contains all the essential medicines, first aid and sanitary pads, and ensuring women safety and dignity in using the toilets and wash areas are fundamental rights of every woman as well as adolescent girls [18-20]. The participatory research methods could encourage the evidence base, particularly around personal preferences and socio cultural aspects of menstrual hygiene management, from the quantitative data and facilitated its understanding [21].

CONCLUSION

The study shows many women and girls are still unaware of many absorbents used during the menstruation. Many women still use old clothes. They don't use to dry the clothes on roof or in open areas, instead of that they use to hide and dry in shaded place. The respondents don't use any shops or any genital wash during and after the menstruation. Many women face pain during the menstruation. 60% of the respondents feel shy while buying the sanitary pads. And respondents also face heavy flow and many of them don't use to wash the genital area during menstruation.

The study gives evidence that MHM activities are very rarely prioritized in immediate relief works. We know that menstruation comes along with cultural and religious taboo, the MHM needs is present as a silent need, which is addressed by the use of local materials and resources in immediate post disaster situations in Nepal. The choice of materials for adsorbents is based on the availability of materials and the privacy for MHM activities while disposable pads are considered more convenient and hygienic, the use of culturally appropriate, local materials and gender sensitive methods of reusable sanitary towels could be considered by relief workers as sustainable and environmental friendly method.

LIMITATION OF THE STUDY

The study is restricted to Raigarh district only. The study is limited on women and adolescent girls.

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