

Study to Assess the Knowledge regarding Menstrual Hygiene among Adolescents' Girls

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Abstract: *Poor menstrual hygiene and inadequate self care are major detriments of morbidity and other complications among adolescents' age groups. Poor menstrual hygiene, however, can pose serious health risks, like reproductive and urinary tract infections which can result in future infertility and birth complications. Good menstrual health and hygiene practices can prevent infections, reduce odors and helps to stay comfortable during periods. Learning about menstrual hygiene is a vital part of health education for adolescents' girls so that they can continue to work and maintain hygienic habits throughout their life. Keeping in view the importance of menstrual hygiene the present study was formulated with the objectives to assess the knowledge regarding menstrual hygiene among adolescents' girls in selected area of district Una (Himachal Pradesh), to find association of knowledge regarding menstrual hygiene with selected demographic variables and to prepare and distribute pamphlets to create awareness regarding menstrual hygiene among adolescents girls. Quantitative research approach and non experimental descriptive research design was used to accomplish the stated objectives. Data was collected with the help of self structured questionnaire that was validated by various experts from the field of nursing. Pilot study was conducted on 20 adolescents' girls from block Haroli (Himachal Pradesh) to check the reliability of the tool and feasibility of the study. Tool was found to be reliable. For final study 200 adolescents' girls were included by purposive sampling technique. The data was collected and analyzed by using descriptive and inferential statistics. The tables, pie diagram and bar diagram was used to depict the findings. Findings revealed that maximum participants have poor knowledge (56%) followed by (33%) with average level of knowledge, (10%) have good level and only (1%) were having excellent level of knowledge regarding menstrual hygiene. The variables i. e. education level of mother had significant association with knowledge regarding menstrual hygiene. Based upon the assumption pamphlets were prepared and distributed among adolescents' girls to create awareness regarding menstrual hygiene.*

Keywords: knowledge, menstrual hygiene, adolescents' girls.

1. Introduction

Menstruation is not just a small term but a major stage where a woman undergoes certain reproductive changes from onset of menstruation (menarche) till menopause. Adolescence is the stage of physical, psychological, and reproductive development that generally occurs during the period from puberty to adulthood. The World Health Organization defines adolescence as individuals between 10 and 19 years of age. Adolescence in girls has been recognized as a special period in their life cycle that requires specific and special attention. Menstruation is surrounded by various psychological and religious barriers due to lack of knowledge about the scientific process of menstruation, many girls are unaware of what actually happens during menstrual cycle. Although menstruation is a natural process, it is linked with several perceptions and practices within the community, which sometimes may result in adverse health outcomes.

Around 70 % of the reproductive infections in Indian women are caused by poor menstrual hygiene. There are grave health risks in menstruation if adequate sanitary measures are not taken. In, India there is many myths, misconceptions as well as poor traditional practices, which compel adolescents to adopt certain menstrual practices which are not hygienic. So the present study was undertaken, that would help the adolescent girls to acquire knowledge, healthful practices and positive attitude towards menstruation and menstrual hygiene and may improve the

usual practices by eliminating the obstacles to healthy practices.

2. Material and Method

Setting - The present study was conducted in the village and sub urban areas of Khad, Ghaluwal and Pandoga of block Haroli, district Una, Himachal Pradesh.

Sampling Technique - purposive sampling method was used to conduct the present study.

Sample size - in present study 200 adolescents' girls were included

Method of data collection - Structured interview schedule was used for the present study

3. Result

Table 1: Characteristics' of study subjects, N =200

| Variables | f (%age) | |
|-------------------------------------|----------|------|
| Age (in years) | | |
| • 12 - 14 | 94 | (47) |
| • 14 - 16 | 60 | (30) |
| • 16 - 18 | 46 | (23) |
| Habitat | | |
| • Rural | 102 | (51) |
| • Urban | 98 | (49) |
| Class of study | | |
| • 7 th - 8 th | 72 | (36) |

| | | |
|---------------------------------------|-----|------|
| • 9 th - 10 th | 70 | (35) |
| • 11 th - 12 th | 58 | (29) |
| Education level of mother | | |
| • Illiterate | 12 | (6) |
| • Primary | 42 | (21) |
| • Secondary | 128 | (64) |
| • Graduation | 18 | (9) |
| Education level of father | | |
| • Illiterate | 10 | (5) |
| • Primary | 40 | (20) |
| • Secondary | 124 | (62) |
| • Graduation | 26 | (13) |
| Occupation of mother | | |
| • Working | 38 | (19) |
| • House wife | 162 | (81) |
| Occupation of father | | |
| • Govt. Job | 32 | (16) |
| • Private job | 78 | (39) |
| • Farmer | 50 | (25) |
| • Other work/ business | 40 | (20) |
| Religion | | |
| • Hindu | 168 | (84) |
| • Muslim | 0 | (0) |
| • Sikh | 32 | (16) |
| • Christian | 0 | (0) |
| Type of family | | |
| • Nuclear | 136 | (68) |
| • Joint | 64 | (32) |
| Monthly income/month (Rs) | | |
| • < 5000 | 46 | (23) |
| • 5000 - 10, 000 | 62 | (31) |
| • 10, 000 - 15, 000 | 76 | (38) |
| • >15, 000 | 16 | (8) |
| Source of information | | |
| • Family | 122 | (61) |
| • Friends | 24 | (12) |
| • Health worker | 24 | (12) |
| • Teacher | 30 | (15) |

Table 1 - depicts the socio demographic profile of the study subjects. It shows that majority of the participants (47%) were in the age group of 12 - 14 yr and majority (51%) of them were from rural area. Only very few (6%) mothers were illiterate whereas most of the mothers of participants were (81%) not working. Majority (84%) belongs to Hindu religion, where as maximum participants (68%) were from nuclear families and majority of them (61%) got the information related to menstruation from their families.

Table 2: Distribution of study subjects as per level of knowledge

| Level of knowledge | f (%age) | |
|--------------------|----------|------|
| Poor | 112 | (56) |
| Average | 66 | (33) |
| Good | 20 | (10) |
| Excellent | 2 | (1) |

Table 2: depicts that majority of the study subjects (56%) had poor knowledge followed by (33%) those had average knowledge, few participants have (10%) good knowledge and only (1%) had excellent level of knowledge regarding menstruation hygiene.

Table 3: Distribution of study subjects as per association of knowledge with selected variables

| Variables | Chi square | Df | P value |
|---------------------------------------|------------|----|---------|
| Age (in years) | | | |
| • 12 - 14 | 29.38 | 4 | 9.49* |
| • 14 - 16 | | | |
| • 16 - 18 | | | |
| Habitat | | | |
| • Rural | 0.15 | 2 | 5.99 |
| • Urban | | | |
| Class of study | | | |
| • 7 th - 8 th | 19.32 | 4 | 7.02 |
| • 9 th - 10 th | | | |
| • 11 th - 12 th | | | |
| Education level of mother | | | |
| • Illiterate | 13.66 | 6 | 12.6* |
| • Primary | | | |
| • Secondary | | | |
| • Graduation | | | |
| Education level of father | | | |
| • Illiterate | 10.44 | 6 | 9.2 |
| • Primary | | | |
| • Secondary | | | |
| • Graduation | | | |
| Occupation of mother | | | |
| • Working | 0.33 | 2 | 5.99 |
| • House wife | | | |
| Religion | | | |
| • Hindu | 8.92 | 6 | 12.6 |
| • Muslim | | | |
| • Sikh | | | |
| • Christian | | | |
| Type of family | | | |
| • Nuclear | 2.96 | 2 | 5.99 |
| • Joint | | | |
| Monthly income/month (Rs) | | | |
| • < 5000 | 7.82 | 6 | 11.5 |
| • 5000 - 10, 000 | | | |
| • 10, 000 - 15, 000 | | | |
| • >15, 000 | | | |
| Source of information | | | |
| • Family | 8.6 | 6 | 12.8 |
| • Friends | | | |
| • Health worker | | | |
| • Teacher | | | |

*indicates level of significance at 5%

Table 3: depicts that age of the study subject and level of education of mothers were associated with the knowledge regarding menstrual hygiene as evident from p value which was significant at 5% level.

4. Discussion

The present study aimed to assess the level of knowledge regarding menstrual hygiene among adolescent girls in selected areas of District Una Himachal Pradesh. Present study depicts that majority of the study subjects (56%) had poor knowledge followed by (33%) those had average knowledge, few participants have (10%) good knowledge and only (1%) had excellent level of knowledge regarding menstruation hygiene. Similar study was conducted by

Yasmin S revealed that about (55.9%) adolescent girls had poor level of knowledge regarding menstruation and menstrual hygiene. In present study age of participants and level of education of mothers' was significantly associated with the level of knowledge which was similar to another descriptive study conducted by Bachloo T et, al in Harayana to assess the predisposing factors affecting menstrual hygiene that showed that age of adolescents' and level of education of mother was significantly associated with level of knowledge regarding menstrual hygiene.

5. Conclusion

Girls may start their menstrual period as early as 9 years of age and as late as 16 years old. The average age at which a girl begins menstruating is 12. Majority of the times adolescents' girls are not prepared for the menstruation. More over according to Indian system such matters are not discussed openly. Even though girls in these days get information through media it cannot be applied practically unless it is explained to the adolescents'. Various studies in India and abroad have shown that adolescents have lack of knowledge regarding menarche and menstrual hygiene. So this study was undertaken and pamphlets were prepared and distributed among adolescents' girls to create awareness regarding menstrual hygiene.

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