Original Research Paper



Psychology

ASSESS THE KNOWLEDGE AND PRACTICES REGARDING MENSTRUATION AND MENSTRUAL HYGIENE AMONG THE NAVODAYA SCHOOL GIRLS OF TELANGANA STATE.

Puli Sri Laxmi

Research Scholar, Department of Psychology, Osmania University, Hyderabad

ABSTRACT The present study was undertaken to assess the knowledge and practices regarding menstruation and menstrual hygiene among the navodaya school girls of Telangana. Using a descriptive analytical survey design and multistage sampling, the knowledge and practices on menstrual hygiene among 10 navodaya school girls 100 were identified. Among the respondents, 35% had poor knowledge, 77% had poor practice. About 49% had menstrual pattern disorders. 33% reported symptoms of urinary tract infection. Back pains (43%) were the predominant physical problems and anger (39%) was the major emotional problems. Statistically significant correlation existed between knowledge and practice. Statistically significant difference was observed in the knowledge scores on menstruation with respect to the educational level of the respondents' education of their mother and monthly family income The practice of menstrual hygiene was significantly associated with age of the student and their standard of living index. The study concludes to mandate health education in schools by professional nurses, on menstruation and its hygienic management; community education on the scientific aspects of menstruation; and policy implementation towards the construction of girl friendly toilets in houses, schools and public places so that the nation becomes healthy and productive with empowered women.

KEYWORDS:

INTRODUCTION

Adolescents belong to vital age group not only because they are the entrant population to parenthood but also because they are threshold between childhood and adulthood. As they attempt to cross this threshold, they face various physiological, psychological, and developmental changes. The word "Adolescent" is derived from the Latin word "adolescere" which means to grow to maturity that indicates the defining features of adolescence. Menstruation is the first indication of puberty. During puberty, the physical changes occur which transform the body of child into that of an adult, changes in body size, and changes in body proportions. A menstrual taboo is any social taboo concerned with menstruation. In some societies, it involves menstruation being perceived as unclean or embarrassing, extending even to the mention of menstruation both in public (in the media and advertising) and in private (among the friends, in the household, and with men). Many traditional religions consider menstruation ritually unclean. Most of the girls receive their gynecological information from their mothers, religious books, older sister, or a peer. However, such information was generally given after menarche rather than before. Hence, there is a need to provide healthy family life education to the woman particularly the adolescent girls (AGs).

Menstruation is still regarded as something unclean or dirty in Indian society. The reaction to menstruation depends on awareness and knowledge about the subject. The manner in which a girl learns about menstruation and its associated changes may have an impact on her response to the event of menarche. Although menstruation is a natural process, it is linked with several misconceptions and practices, which sometimes result into adverse health outcomes. Isolation of the menstruating girls and restrictions being imposed on them in the family, have reinforced a negative attitude toward this phenomenon. Menstrual practices are clouded by taboos and social cultural restrictions even today, resulting in AGs remaining ignorant of the scientific facts and hygienic health practices, necessary for maintaining positive reproductive health. Women having better knowledge regarding menstrual hygiene and safe practices are less vulnerable to reproductive tract infections and its consequences. Therefore, increased knowledge about menstruation right from childhood may escalate safe practices and may help in mitigating the suffering of millions of women. The social stigma attached to menstruation causes many girls and women to carryout dangerous hygiene practices. Lacking a platform to share menstrual hygiene problems, girls and women often suffer from discomfort and infection, avoiding urination during menstruation, and using any kind of cloth available old (or) unwashed as an, but still girls are not visiting medical practitioners.

Objectives of the Study

- To assess the knowledge and practices regarding menstruation and menstrual hygiene among navodaya school girls.
- To identify the menstrual disorder and morbidities among navodaya school girls.
- To find out the correlations among knowledge, practices regarding

menstrual hygiene among navodaya school girls,

To know the significant difference between the knowledge scores and Practice regarding menstruation and menstrual hygiene with respect to Age, Mother Education and Family Income.

Hypotheses of the Study

The investigator formulated the following hypotheses for investigation.

- There is a significant correlation between knowledge and practices with regard to menstruation among navodaya school girls.
- There is a significant difference in knowledge of menstruation and practice on menstrual hygiene with respect to Age of navodaya school girls.
- There is no significant difference in knowledge of menstruation and practice on menstrual hygiene with respect to Mother Education of navodaya school girls.
- There is no significant difference in knowledge of menstruation and practice on menstrual hygiene with respect to Family income of navodaya school girls.

Operational Definition:

Knowledge of Menstruation: refers to the awareness of navodaya school girls regarding the physiology of menstruation, menstrual hygiene products and the general cleanliness to be observed during the menstruation.

Practices on Menstrual Hygiene: refers to the customary or habitual way of maintaining body hygiene and the disposal or after care of the used menstrual pads by the navodaya school girls.

Variable of the Study Independent Variable;

Age: two categories 10-14 age and 15-19 age

Mother Education: Literate and Illiterate

Family Income: 2 categories poor below annual income 1 lack and rich is above 1 lack annual income

Dependent Variable

Knowledge of Menstruation and Practices on menstrual hygiene of navdaya school girls.

Methodology of the Study

Using a descriptive analytical survey design and multistage sampling, the knowledge and practices on menstrual hygiene among 10 navodaya school girls was selected and for each school 10 girls students were taken I the sample in telangana state total 100 girls student were identified.

Tools Used in the Study

Tool of Knowledge of Menstruation: self designed tool contains a 20 items regarding physiology of menstruation, menstrual absorbent and hygiene during menstruation. And 3 rating scale is framed for yes un decided, no responses score was given 2, 1, 0 respectively.

Tool of Practices on Menstrual Hygiene: self designed tool contains a 10 items regarding customary or habitual way of maintaining body hygiene and the disposal or after care of the used menstrual pads. And 3 rating scale is framed for yes, un decided, no responses score was given 2, 1, 0 respectively.

Data Analysis

Hypothesis 1: There is a significant correlation between knowledge of menstruation and practice on menstrual hygiene among navodaya school girls.

Variable	Correlation value	Significant	df
Knowledge of Menstruation	0.35	0.01	98
VS			
Practices on menstrual hygiene			

The table- indicates that positive correlation between the Knowledge of Menstruation and Practices on menstrual hygiene of navodaya school girls. Knowledge of Menstruation helpful for better Practices on menstrual hygiene of navodaya school girls

Hypothesis 2: There is a significant difference in knowledge of menstruation and practice on menstrual hygiene with respect to Age of navodava school girls.

Dimensions	Variables(Age)	N	MEAN	S.D	"t" value	LOS
Knowledge of	10-14	60	31.61	4.97	2.90**	0.01
Menstruation:	15-19	40	34.56	4.99		
Practices on	10-14	60	15.81	2.59	3.07**	0.01
menstrual	15-19	40	14.11	2.78		
hygiene						

^{**}Significant at 0.01 levels, df=98

The obtained t values for in knowledge of menstruation and practice on menstrual hygiene with respect to Age of navodaya school girls are a significant at 0.01 levels of the table value. The results indicate that both age was impact on the study hence the hypothesis is 'there is a significant difference in knowledge of menstruation and practice on menstrual hygiene with respect to Age of navodaya school girls' accepted.

Hypothesis 3: There is no significant difference in knowledge of menstruation and practice on menstrual hygiene with respect to Mother Education of navodaya school girls.

Dimensions	Variables(Mother	N	MEAN	S.D	"t" value	LOS
	Education)					
Knowledge of	Literate	80	35.44	4.45	4.24**	0.01
Menstruation:	Illiterate	20	30.25	4.99		
Practices on	Literate	80	17.81	2.24	9.66**	0.01
menstrual	Illiterate	20	11.11	2.89		
hygiene						

^{**}Significant at 0.01 levels, df=98

The table- indicates that there is a significant difference between the in knowledge of menstruation and practice on menstrual hygiene with respect to Mother Education of navodaya school girls. Therefore the hypothesis is rejected.

Hypothesis 4: There is no significant difference in knowledge of menstruation and practice on menstrual hygiene with respect to Family income of navodaya school girls.

Dimensions	Variables(Family	N	MEAN	S.D	"t" value	LOS
	Income)					
Knowledge of	Poor	50	30.12	4.45	5.69**	0.01
Menstruation:	Rich	50	35.60	5.15		
Practices on	Poor	50	13.95	3.12	2.60*	0.05
menstrual	Rich	50	15.41	2.45		
hygiene						

^{*}Significant at 0.05 level & **Significant at 0.01 levels, df=98

It could be observed from table - that the mean scores and t value reveal that the significant difference between knowledge of menstruation and practice on menstrual hygiene with respect family income. Hence the hypothesis is rejected.

Major Findings of the Study

35% had poor knowledge, 77% had poor practice. About 49% had menstrual pattern disorders. 33% reported symptoms of urinary tract infection. Back pains (43%) were the predominant physical

- problems and anger (39%) was the major emotional problems.
- Statistically significant correlation existed between knowledge and practice. Statistically significant difference was observed in the knowledge scores on menstruation with respect to the educational level of the respondents' education of their mother and monthly family income.
- There is a significant difference in knowledge of menstruation and practice on menstrual hygiene with respect to Age of navodaya school girls. 15-19 age group girls have better knowledge of menstruation and good practice on menstrual hygiene compare to low age group.
- There is no significant difference in knowledge of menstruation and practice on menstrual hygiene with respect to Mother Education of navodaya school girls. Mother Education background helpful for betterment of knowledge of menstruation and practice on menstrual hygiene
- There is no significant difference in knowledge of menstruation and practice on menstrual hygiene with respect to Family income of navodaya school girls. Income Crucial role in practice on menstrual hygiene

CONCLUSION

Menstrual hygiene is not commonly spoken, either between same genders or between opposite gender. The subject is taboo in many cultures and shrouded in myths and traditions. This study was conducted to ascertain menstrual hygiene among adolescent girls and to improve the knowledge and practices among them. The study revealed that menstrual hygiene was far from satisfactory among a large proportion of the adolescents. Girls should be well versed with the physiology of menstruation, its importance, and hygiene management well before menarche. Lack of appropriate and sufficient information about menstrual hygiene can be attributed to cultural and religious beliefs and taboos. Thus, the above findings reinforce the need to encourage safe and hygienic practices among the adolescent girls. The use of sanitary napkins has to be enhanced by social marketing and innovative programs from the side of government. Incorrect restrictions, myths, and beliefs associated with menstruation can be removed by the help of parents and teachers. Health professionals always have a responsibility in preventing illness and promoting health. This is true with menstrual hygiene also. The students undergoing advanced studies in medicine and nursing can be resourceful and may be utilized for imparting health education to school girls. Apart from this, student friendly health services may be initiated at school level and a school health nurse may be appointed at each school, so that consistency in educating students on health related matters, giving particular attention to puberty related education is obtained.

Recommendation

- Awareness programmes need to be accelerated on general and menstrual hygiene. Mother's involvement in creating better perception and practice of desired health, hygiene and nutritional practices of girl child need be ascertained.
- Food for teenage girls must be adequate both in calorie and protein content and access to nutritious food is the precondition for having both reproductive and general physiological health status.
- General hygiene and menstrual hygiene should not be dealt with in isolation. These are cognate, co-genital and concurrent by nature. This should include food, nutrition, cleanliness, safe disposal and science of a student health practice.

REFERENCES

- Ade A, Patil R. Menstrual hygiene and practices of rural adolescent girls of Raichur. Int J Biol Med Res 2013;4:3014-7. Back to cited text no. 7 Barathalakshmi J, Govindarajan PK, Ethirajan N, Felix AW. Knowledge and practice of
- menstrual hygiene among school going adolescent girls. Natl J Res Comm 2014;3:138-42.
- Balamurugan SS, Shilpa S, Shaji S. A community based study on menstrual hygiene among reproductive age group women in a rural area, Tamil Nadu. J Basic Clin Reprod Sci 2014;3:83-7.

- Sci 2014;3:83-7.

 Kamath R, Ghosh D, Lena A, Chandrasekaran V. A study on knowledge and practices regarding menstrual hygiene among rural and urban adolescent girls in Udupi Taluk, Manipal, India. Glob J Med Public Health 2013;2:1-9. Back to cited text no. 4

 Khanna A, Goyal RS, Bhawsar R. Menstrual practicesand reproductive problems: A study of adolescent girls in Rajasthan. J Health Manage 2005;7:91-107.

 Kannan C, Athmaraman TN, Nayeem A, Sangeetha S, Sudha R, Ponsuganthi K, et al. Prevalence of reproductive tract infections among recently married women in Veerapandi Panchayat union of Salem district, Tamil Nadu. Indian J Community Med 2007;32:144.
- Lawan UM, Yusuf NW, Musa AB. Menstruation and menstrual hygiene ame adolescent school girls in Kano, Northwestern Nigeria. Afr J Reprod Health 2010;14:201-7. Backto cited text no. 9
- Lan PT, Lundborg CS, Phuc HD, Sihavong A, Unemo M, Chuc NT, et al. Reproductive

- tract infections including sexually transmitted infections: A population-based study of women of reproductive age in a rural district of Vietnam. Sex Transm Infect 2008;84:126-32
- Menstrual Hygiene Scheme. Available from: http://www.nrhm.gov.in/nrhm-9.
- Menstrual Hygiene Scheme. Available from: http://www.hrnm.gov.in/hrnm.components/rmnch-a/dolescent-health-rks//menstrual-hygiene-scheme-mhs/back ground.html. [Last accessed on 2016 Oct 11]. Back to cited text no. 11
 Neelkanth N, Singh D, Bhatia P. A study to assess the knowledge regarding practices of menstrual hygiene and RTI among high and higher secondary school girls: An educational interventional study. Int J Community Med Public Health 2017;4:4520-6.
- Shamima Y, Nirmalya M, Sarmila M, Ashfaque A, Baisakhi P.Menstrual hygiene among adolescent school students: An in-depth cross-sectional study in an urban community of
- West Bengal, India. IOSR 2013;5:22-6.
 Santina T, Wehbe N, Ziade F. Exploring dysmenorrhea and menstrual experiences among Lebanese female adolescents. Eastern Mediterr Health J 2012;8:857-63. Back to cited text no. 5 Sapkota D, Sharma D, Budhathoki SS, Khanal VK, Pokharel HP. Knowledge and
- practices regarding menstruation among school going adolescents of rural Nepal. J Kathmandu Med Coll 2013;2:122-8. Back to cited text no. 6
- Kathmandu Med Coll 2013;2:122-8. Back to cited textno. 6 Thakre SB, Thakre SS, Reddy M, Rathi N, Pathak K, Ughade S. Menstrual hygiene: knowledge and practice among adolescent school girls of Saoner, Nagpur district. J Clin Diagn Res 2012;5:1027-33. Back to cited text no. 8 Tegegne TK, Sisay MM. Menstrual hygiene management and school absenteeism among female adolescent students in Northeast Ethiopia. BMC Public Health
- 15. 2014;14:1118
- Yasmin S, Manna N, Mallik S, Ashfaque A, Paria B. Menstrual hygiene among adolescent school students: An in-depth cross-sectional study in an urban community of West Bengal, India. IOSR J Dent Med Sci 2013;5:22-6. Back to cited text no. 3