

STUDY ON MENSTRUAL HYGIENE MANAGEMENT AMONG GIRLS IN BANGLADESH

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Abstract

Menstrual hygiene management (MHM) at educational institution is constrained by poor access to water and sanitation, lack of privacy and limited education about menstrual hygiene. Menstrual hygiene is an important issue that affects adolescent girls and adult women Health. Menstrual hygiene management (MHM) varies worldwide and depends on the individual's socioeconomic status, personal preferences, local traditions and beliefs, and access to water and sanitation resources. Menstruation can affect all aspects of a girl's life like, education, health, economics, dignity and participation. This Studies were conducted with the objectives to i. identify the dominant package of practicing the menstruation process; ii. find out source of info-guidance regarding the menstruation event; and iii. determine the status of complying the hygienic points of menstruation. A descriptive, cross-sectional community plus Institution based study was conducted among 300 adolescent girls of a secondary school, higher secondary school and graduate level Institution in both the urban and rural area at Dhaka division with the help of a pre-designed and pre-tested questionnaire. Questions included topics on product use, source of information, type of latrines etc. The results showed that about absorbent material used in last menstruation was surveyed at that stage. All girls used absorbent material among them 24% used quality sanitary napkin followed by 22% used ordinary sanitary napkin, new cloth piece 13% and old cloth piece 17%, tissue pack 13% and mixed 11%. But the use of sanitary pad was higher (almost 88%) at urban than the rural and use of old piece of cloths were higher (57%) at rural than urban. Percent Response for respondent's regarding type toilet facilities varies all three group of respondent gave their highest response on rural kucha toilet followed by marginal facilities, full facilities, attached public and common toilet respectively. Question on source of information regarding menstrual events showed that main source of information was mother (15%) followed by sister (14%), mass media, grandmother, medical shop agents, relatives, friends, peers and physician respectively. Though response varies in respect of site, like percent response on mass media was highest in city corporation words/ capital city. Question on type of absorbent use, response were as follows, percent response were quality sanitary napkin 24%, ordinary sanitary napkin 22%, old cloths 17%, new cloths 13%, tissue pack 13% and mixed 11% respectively. It also showed that rate of use, quality sanitary napkin use high in graduate/ university level than secondary and higher secondary level. It is also note that use of quality sanitary napkin was more in city corporation words/ capital institution than other areas. It may be due to different socio-economic condition and level of education.

Key words - Menstrual, hygiene, practices, function, education, age

INTRODUCTION

Menstruation is the shedding of the endometrial tissue- the uterine lining. All female humans, as well as some other female mammals, have regular periods during their reproductive age. Menstruation is a major stage in a girl's puberty. It is one of several physical signs that a girl is becoming a woman. The different names of menstruation are period, menses, menstrual cycle (Ade, and Patil, 2013; and Charan, 2014).

Giving importance on menstrual hygiene management (MHM), an annual awareness day is observed. In May 28, 2014 first time celebrated the Menstrual Hygiene Day. Menstrual Hygiene Day observed by people worldwide Type International Significance. To break taboos surrounding menstruation, raise awareness about the importance of good menstrual hygiene management for women and adolescent girls worldwide. Menstrual Hygiene Day, It

was initiated by the German-based NGO WASH United in 2014. The day compliments other important days of the year in relationship to sanitation and hygiene, such as 15 October for Global Hand washing Day or 19 November for World Toilet Day. May 28th was chosen for its symbolism since May is the 5th month of the year and most women average 5 days every month and their cycle is approximately 28 days.

Cloths or cloth pads may be a sustainable sanitary option, but it must be hygienically washed and dried in the sunlight. Sunlight is a natural sterilizer and drying the cloth pads on sunlight sterilizes them for future use. They also need to be stored in a clean dry place for reuse. Girls who do not know what menstruation is can have little hope of managing it safely or hygienically, as a workshop participant demonstrated when she shared her own experience of growing up: “Me and my sisters all hid our sanitary cloths under the bed to dry, out of shame.” Her experience is common worldwide: many participants shared anecdotes from field studies and interviews of girls and women who attempt to dry their cloths out of sight. In practice, this means hiding them in a damp and unhygienic place (Sharma et al 2008).

About 52% of the female population is of reproductive age and most of them are menstruating every month. The majority of them have no access to clean and safe sanitary products, or to a clean and private space in which to change menstrual cloths or pads and to wash. Menstruation is supposed to be invisible and silent, and sometimes, menstruating women and girls are supposed to be invisible and silent, too. Millions of girls and women are subject to restrictions in their daily lives simply because they are menstruating. There is also clear evidence to show that ignoring good menstrual hygiene is damaging not just women and girls directly but also for schools, businesses and economies. Menstruation is a natural process. However, in most parts of the world, it remains a taboo and is rarely talked about (HOUSE et al. 2012). Cultural norms and religious taboos on menstruation are often compounded by traditional associations with evil spirits, shame and embarrassment surrounding sexual reproduction. For example, in Tanzania, some believe that if a menstrual cloth is seen by others, the owner of the cloth may be cursed. Most striking is the restricted control which many women and girls have over their mobility and behavior due to their ‘impurity’ during menstruation, including the myths, misconceptions, superstitions and (cultural and/or religious) taboos concerning menstrual blood and menstrual hygiene.

OBJECTIVES OF THE STUDY

In the context of the above reviewed situation the present piece of research was undertaken with the objectives to i. identify the dominant package of practicing the menstruation process; ii. find out source of info-guidance regarding the menstruation event; and iii. determine the status of complying the hygienic points of menstruation.

METHODS AND MATERIALS

Study Design: This was a basic inventorial type of research.

Study area: Rural and Urban educational Institution and Community.

Variables:

a. Education level

- i) Junior education: Class viii or less
- ii) Secondary education: Class ix to xii
- iii) Tertiary education: xiii- more-College University.

b. Site

- i) Rural- Upazila/Union,
- ii) Urban-Municipality, District town, City Corporation, Wards/Capital
- ii) Respondent: Girls Students, Guardians, Medical sellers

The Methods followed in the studies were of technical investigative type.

The study populations were 300 respondents, 100 from each group.

Sampling Technique: Purposive sampling techniques were adopted.

Study Instrument/Tools: Structured interview schedules were followed. The questionnaires were finalized after pre-testing.

Data Analysis and Interpretation: Data were analyzed with the suitable program.

RESULTS AND DISCUSSION

Results obtained from the research conducted on menstrual hygiene practices in Bangladesh are compiled, analyzed and interpreted in this chapter. The explanation of the findings is made in each table and illustrated figures.

Table 1: Toilet facilities according to sites: Percent response for site level

Facilities	Rural Upazila/ Union	Municipality District town	City Corp Wards/Capital	Mean
Full Facilities	12	41	53	35.3
Marginal sanitary	19	34	47	33.3
Rural Kutcha	45	39	16	33.3
Common toilet	65	21	14	33.3
Mean	14.8	35.0	46.2	32.0

Mean results showed that full facilities toilet facilities were highest at city corporation words/ capital 53.0% and were lowest at rural upazila/ union level 12.0%. Studies also showed that quantity of marginal toilet facilities were highest in city corporation words/ capital level than any other site. In case of rural kucha toilet were highest at rural upazila/union than any other site. Common toilets were more in rural area.

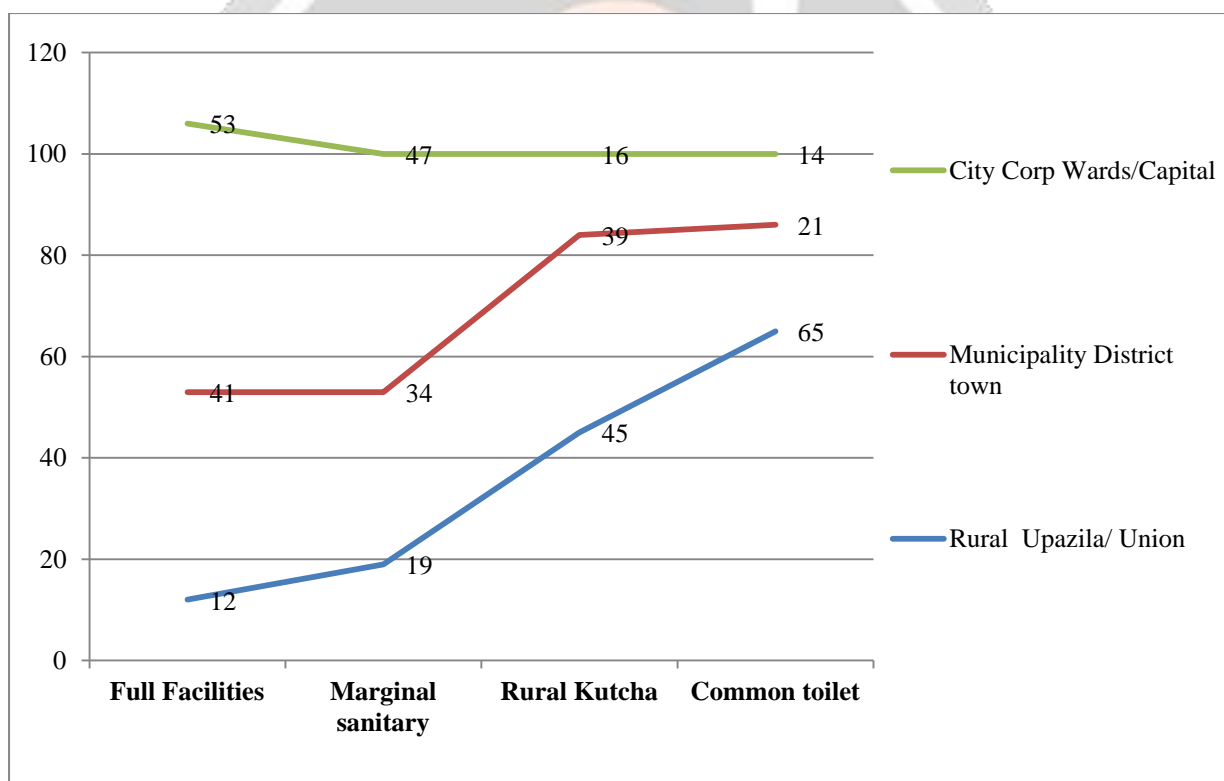


Table 2: Source of information on menstruation event

Source person	Rural Upazila/ Union	Municipality District town	City Corp Wards/Capital	Mean
Mother	72.0	66	51	63.0
Sisters	67.0	52	56	58.3
Grandmother	64.0	45	15	41.3
Teacher	48.0	36	49	44.3
Physicians	31.0	26	26	27.7
Medical shop agents	22.0	25	21	22.7
Relatives	14.0	31	16	20.3
Peers	10.0	22	19	17.0
Mass media	38.0	52	53	47.7
Friends	22.0	25	28	25.0
Neighbor grandmother	54.0	41	26	40.3
Mean	40.2	38.3	32.7	37.1

Question on source of information regarding menstrual events showed that main source of information was mother (72.0%, 66.0% and 51.0%) at rural upazila/union, municipality/district town and city corporation wards/capital respectively and were followed by sister (67%), mass media, grandmother, medical shop agents, relatives, friends, peers and physician respectively. Though response varies in respect of site, like percent response on mass media was highest in city corporation words/ capital city. It may be due to most of the girls are separated from mothers and live with sister and relatives or hostel other than home. Grand mean 37.1% showed that info-guidance status is not satisfactory in all categories of respondents.

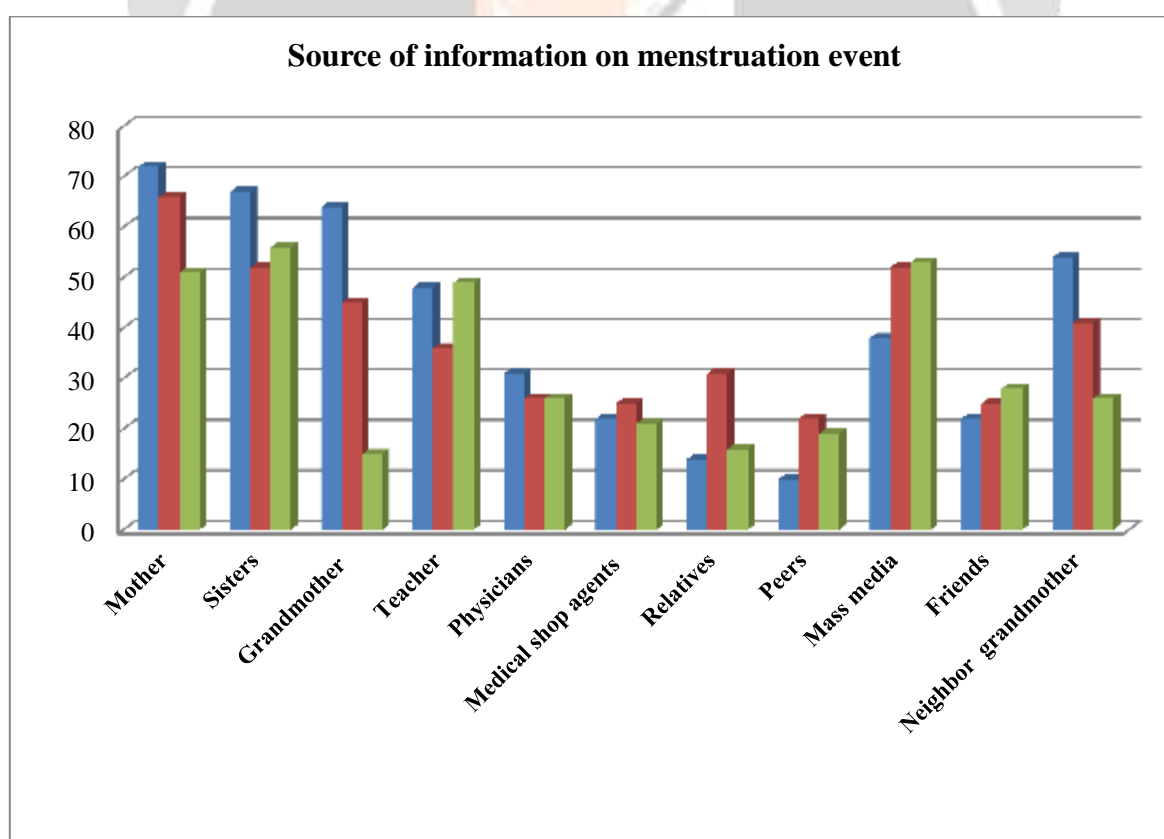


Table 3: Type Absorbents used during menstruation

Materials	Rural Upazila/ Union	Municipality District town	City Corp Ward/ Capital	Mean
Quality Sanitary napkins	32	68	81	60.3
Ordinary Sanitary napkins	43	51	36	43.3
Old cloth	87	32	16	45.0
New cloth	34	47	25	35.3
Tissue Package	35	25	19	26.3
Mixed	45	16	11	24.0
Mean	46.0	39.8	31.3	39.1

Question on type of absorbent use, response for quality sanitary napkin were highest in city corporation wards/capital 81.0% and were lowest in rural upazila/union 32.0%. But in case of ordinary napkin highest response comes from municipality /district town 51.0% and lowest from city corporation wards/ capital 36.0%. Whereas use of old cloth as absorbent were highest at rural upazila/union 87.0% and were lowest at city corporation wards/ capital 16.0%. It also show that rate of use, quality sanitary napkin use were highest in graduate/university level than secondary and higher secondary level. It is also note that use of quality sanitary napkin was more in city corporation words/ capital institution than other areas. It may be due to different socio-economic condition and level of education. Grand mean 39.1% showed that type of absorbent use is very much neglected.

CONCLUSION AND RECOMMENDATION

Depending on findings and grand mean, the study concluded that toilet facilities at various institution and sites, information dissemination and dominant packages for menstrual hygiene management are neglected. It is recommended efforts required to develop the capacity of teachers to teach menstrual hygiene management among institutional girls. Authority should take initiative to established menstruation-friendly toilets for girls at their institution. Measures should be taken to Enabling girls to manage menstruation at educational institution by providing knowledge on menstrual hygiene management methods prior to menarche, conducive environment around menstrual issues thereby improving Reproductive Health.

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