A STUDY ON MENSTRUATION HYGIENE MANAGEMENT: SOCIO-PHYSIOLOGICAL HEALTH OF RURAL ADULTS OF **MADHUGIRI TALUK**

SMT. VIJAYALAKSHMI. N.

Assistant Professor of Sociology Govt. First Grade College Madhugiri, – 572132 Tumakuru District, Karnataka state E-mail- vijayalakshmibuvan@rediffmail.com

&

Dr. YOGANARASIMHACHARI. K

Assistant Professor of Sociology Govt. College, (Autonomous) Mandya - 571401 Karnataka state E-mail- yoganarasimha.lec@gmail.com

ABSTRACT

In the transitory development of an adolescent's journey, menarche is a significant milestone. Poor personal hygiene and defective menstrual management practices give rise to repeated Reproductive Tract Infections (RTIs), which are otherwise preventable. In Indian society Menstruation is still regarded as something unclean or dirty. The reaction to menstruation depends upon 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 give adverse health outcomes.

Hygiene-related practices of women during menstruation are of considerable importance, as it has a health impact in terms of increased vulnerability to Reproductive Tract Infections (RTI). The interplay of socio-economic status, menstrual hygiene practices and RTI are noticeable. Today millions of women are sufferers of RTI and its complications and often the infection is transmitted to the offspring of the pregnant mother. More than 300 million women and girls in India do not have access to safe menstrual hygiene products, endangering their health, curtailing their education and putting their livelihoods at risk, say experts at the Genevabased Water Supply & Sanitation Collaborative Council (WSSCC)



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Menstruation, even today, covered with many socio-cultural taboos. These are the major reason for leaving school/colleges for Indian girls, studies say. Except few urban school/colleges, maximum schools/colleges have not provided sufficient facilities to manage menstrual hygiene. So absenteeism, dropping school/college is very high in India. Adolescents comprise 20% of the world's total population. Out of 1.2 billion adolescents worldwide, about 85% live in developing countries. 25% of the population of India was adolescents in 2011. Adolescence in India has been defined to be a period between 10-18 years.

Adolescent is transitional stage of physical and psychological human development from puberty to adulthood. Adolescent period is the formative period when maximum amounts of changes take place and pubertal change is one of them. The main pubertal change that occurs in girls is menstruation. Menstruation is normal vaginal bleeding or discharge of blood mucosal tissue from the uterus and vagina that occurs as part of a woman's monthly cycle. The first menstruation is termed as "menarche". Menarche is a significant milestone in the transistors developmental journey of an adolescent.

Key Words: Menstrual Management, Repeated Reproductive Tract Infections, Natural Process, Socio-Cultural Taboos, Physical and Psychological, WSSCC

INTRODUCTION

Research paper

Menstruation Hygiene is an effective management of menstrual bleeding by women and girls. Menstrual hygiene is an important aspect of reproductive health, which if not handled appropriately can cause infections of the urinary tract, pelvic inflammatory diseases and vaginal thrush, as well as bad odor, soiled garments and ultimately shame, leading to infringement on the girls' dignity (oche, Umar, Gana&Ango, 2012)

Though menstruation is a natural and normal physiological process for all healthy adult women, it has been surrounded by secrecy, negativity and myths in many societies. It is still by socio-cultural restrictions and taboos and associated with various myths and clouded misconceptions. In many parts of India, people still consider menstruation as a period to treat women as "untouchables". Hence they continue to segregate women during menstruation, sometimes in dark and confined places. Mothers perceive menstruation as dirty and pass on the same feeling onto adolescent daughters.

Adolescents' problems constitute a bulk of morbidities which are generally unrecognized and uncared furthering the disease burden. A large variety of morbidities such as nutritional



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deficiency disorders, menstrual disorders etc., prevail among adolescents Reproduction Tract Infections (RTIs)/Sexual Tract Infections/HIV/AIDS have already appeared as serious problems which can further complicate existing problems like teenage pregnancies, unsafe abortions. Poor personal hygiene and defective menstrual management practices give rise to repeated reproductive tract infections (RTI) which are otherwise preventable. Increased knowledge about menstruation right from childhood may escalate safe practices and may help in mitigating the suffering of women. Women having better knowledge regarding menstrual hygiene and safe practices are less vulnerable to RTI and its consequences.

REVIEW OF LITERATURE

Research paper

UNICEF and the WHO define menstrual hygiene management as "Women and adolescent girls using a clean menstrual management material to absorb or collect blood that can be changed in privacy as often as necessary for the duration of the menstruation period, using soap and water for washing the body as required, and having access to facilities to dispose of used menstrual management materials. They understand the basic facts linked to the menstrual cycle and how to manage it with dignity and without discomfort or fear"

Pranjal Sonowal and Kaushik Talukdar (2019) conducted a cross sectional study on Menstrual Hygiene Knowledge and Practices amongst Adolescent Girls in Urban Slums of Dibrugarh Town. Half of the girls were not aware of menstruation before menarche. Many girls were not aware of the cause of menstruation and source of menstrual bleeding. The conclusion was awareness regarding the need for the information about healthy menstrual practices is very important. It is essential to design a mechanism to address and gain the access of hygienic menstrual practices for adolescent girls.

Dr. Deshpande TN et al, (2018) were conducted a study on Menstrual hygiene among adolescent school girls from urban slum. They stated that multiple restrictions were practiced. They reported that menstrual hygiene was unsatisfactory among adolescent girls. Therefore, girls should be educated about the facts of menstruation and proper hygienic practices.

Reena v. Wagh et al, (2018) in their work on menstrual hygiene practices in young girls of Urban India, reported that some girls were still believe menstruation as curse of God. About disposal of the sanitary pad, the researcher found that some girls throw them on roadside. Near about 96% of girls avoid going to temple. Also most of the girls avoid going to kitchen, family



functions and the half of the girls avoid touching things at the home. The researcher concluded that young girls should be educated about the misbelieves and also about the importance of maintaining hygiene during menstruation to prevent the risk of reproductive tract infections.

OBJECTIVES

The study has mainly focused upon Menstrual Hygiene Management and sociophysiological health of college going rural girls. The main objective of the study was to assess the perceptions regarding menstruation and practices during menstrual cycles among college going rural girls.

- ❖ To find out how rural girls manage menstruation hygiene
- To find out the major socio physiological conditions of college going rural adult girls.
- To find out the hygienic options used by them.
- ❖ To find out the taboos related to menstruation in rural areas
- To find out what facilities they are getting to manage menstruation hygiene

METHODOLOGY:

This study was conducted based on primary data using questionnaire method and also using secondary source of data. The respondents have been selected using simple random method.

FINDINGS AND INTERPRETATION DATA

Traditional norms and beliefs, socio-economic conditions and the physical infrastructure influence the practices related to menstruation. All the above discussion need to be tested through this study. First of all, to know the socio-economic condition of the respondents the question have been asked on their socio-economical conditions.

Demographic features of the respondents

Table- 01 Class and Combination of the respondents

| Class Studeins | Combination | | | Total |
|----------------|-------------|-------|-----|-------|
| Class Studying | BA | B.Com | BSc | Total |
| First Year | 22 | 10 | 10 | 42 |
| Second Year | 5 | 1 | 1 | 7 |
| Third Year | 15 | 4 | 1 | 20 |



| No Response | 2 | 2 | 2 | 6 |
|-------------|----|----|----|----|
| Total | 44 | 17 | 14 | 75 |

Field Visit

Table 01 show that The sample has been selected randomly so from BA 1st 2nd and 3rd year 44 female students, from B.Com 17 female students, BSc 14 and from all the three years students have been selected for this purposive study. Totally 75 students were the respondents and all from rural areas.

Table- 02 Age wise distribution of respondents

| Age (in Years) | Frequency | Percent |
|----------------|-----------|---------|
| 18 | 27 | 36 |
| 19 | 23 | 30.7 |
| 20 | 15 | 20.0 |
| 21 | 7 | 9.3 |
| No Response | 3 | 4.0 |
| Total | 75 | 100 |

Field Survey

Table 02 shows the age distribution of the students. Age of age group of 18 and 19 are around 33.4 %, age of 20 are 20% and 21 are 9.3%

To find out the major socio physiological conditions of college going girls

Table- 03 Age of the respondents at the time of menarche

| Age when Menarche (in Years) | Frequency | Percent |
|------------------------------|-----------|---------|
| 12 | 7 | 9.3 |
| 13 | 21 | 28.0 |
| 14 | 28 | 37.3 |
| 15 | 11 | 14.7 |
| 16 | 6 | 8.0 |
| 17 | 1 | 1.3 |
| No Response | 1 | 1.3 |
| Total | 75 | 100 |



Table 03 shows the age of menarche of the respondents. In the age of 14 maximum entered into menarche and they are in 37.3% the frequency is 28. At the age of 13, 28% and at 15, 14.7%, at the age of 12, 16 and 17, 9.3% 8% and 1.3% respectively.

Table 04 Respondent's status of Mind at the time of Menarche

| Status of Mind | Frequency | Percent |
|-------------------------------|-----------|---------|
| Fear | 13 | 17.3 |
| Embarrassment | 18 | 24.0 |
| Bad Feeling | 11 | 14.7 |
| Confusion | 7 | 9.3 |
| Nothing | 8 | 10.7 |
| Fear and Confusion | 2 | 2.7 |
| Fear, Embracing and Confusion | 3 | 4.0 |
| Embracing and Bad Feeling | 3 | 4.0 |
| All the above | 1 | 1.3 |
| Fear and Embracing | 1 | 1.3 |
| No Response | 8 | 10.7 |
| Total | 75 | 100 |

Field Visit

Table 04 seen that result the statistics show that 24% of respondents felt embarrassment and 17.3% of them were feared on the day of menarche. Around 15% of them were suffered from uncomfortable and bad feeling, and 10% got confused that what's happening for them and why it's happening. Remained experienced mixed feeling of fear, embarrassment, confusion and also fear.

Table 05 Respondent's perception regarding knowledge about menarche

| Particulars | Frequency | Percent | |
|--|-----------|---------|--|
| Necessity to know about Menarche before menarche | | | |
| Yes | 58 | 77.3 | |
| No | 15 | 20.0 | |
| No Response | 2 | 2.7 | |
| Total | 75 | 100.0 | |



| Table 5a: why the pre-knowledge is necessary | | | |
|---|----|------|--|
| Precautionary Measures could be taken | 24 | 32.0 | |
| How to face the situation | 20 | 26.7 | |
| Confidently express opinion about the situation | 5 | 6.7 | |
| No Response | 26 | 34.7 | |
| Total | 75 | 100 | |

The study tried to know the respondents' mind set about knowing the menarche before and 77.3% opined that its necessary to have the knowledge before those day comes. 20% say that pre-knowledge is not necessary.

Table 5a shows the opinion of respondents regarding the pre-knowledge of menarche. 32% of respondents agreed that pre-knowledge is necessary because precautionary measures can be taken. 26.7% say that pre-knowledge helps us to plan to face the situation. Around 35% not responded to the question.

To study how rural girls, manage menstruation hygiene Table 06 Respondent's perception regarding menstruation occurrence

| Particulars | Frequency | Percent | | |
|---|-----------|---------|--|--|
| Discussed about Monthly Bleeding with anybody | | | | |
| Yes | 60 | 80.0 | | |
| No | 12 | 16.0 | | |
| No Response | 3 | 4.0 | | |
| Total | 75 | 100.0 | | |
| Table 6a: Discussed with | | | | |
| Mother | 40 | 66.67 | | |
| Sister | 7 | 11.67 | | |
| Elders in house | 1 | 1.67 | | |
| Teacher | 26 | 43.33 | | |
| Friends | 34 | 56.67 | | |
| Doctor | 2 | 3.33 | | |

| Table 6b: Reason for not discussing about Menarche | | | |
|--|----|-------|--|
| Inferior Complex | 3 | 25.00 | |
| Feeling Shy | 1 | 8.33 | |
| Not Necessary | 2 | 16.67 | |
| No information about it | 2 | 16.67 | |
| No Response 4 33.33 | | | |
| Total | 12 | 100 | |

Field Visit

Table 06 and 6a shows that whether rural girls discussed about the menstruation, If yes with whom. 80% of the girls discuss and 12% say they don't. around 67% discuss with mother and around 12% with sister. Those who don't discuss with anybody said reasons for not discussing in Table 6b. 25% say they feel inferior to discuss, 16% feel not necessary of discussing, around 9% feel shy to discuss.

Table 07 Materials used to manage menstruation bleeding by the respondents

| Materials Used | Frequency | Percent |
|----------------|-----------|---------|
| Cloth | 16 | 21.3 |
| Pads | 58 | 77.3 |
| Cloth and Pads | 1 | 1.3 |
| Total | 75 | 100 |

Field Visit

Table 07 show that major purpose of the study is to find out how rural girls manage menstruation hygiene. So the question has been asked is what material you use to manage for menstruation bleeding. Of course 77.3% told that they use pads but the noticeable thing is that 21.3% still use cloth to manage menstruation bleeding. Only 1.3% said they use both, sometimes cloth and sometimes pad.

Table 08 Respondent's having idea in using pads before menarche

| Particulars | Frequency | Percent |
|-------------|-----------|---------|
| Yes | 35 | 46.7 |
| No | 39 | 52.0 |
| No Response | 1 | 1.3 |
| Total | 75 | 100.0 |



The respondents who said they use pads on their periods answered here and table 08 says only 46.7% were knowing how to use pads before menarche but more than 50%, i.e. 52% telling they didn't know about pads for periods.

Table 09 Respondents consulting Doctor for having bleeding

| Particulars | Frequency | Percent |
|-------------|-----------|---------|
| Yes | 41 | 54.7 |
| No | 16 | 21.3 |
| No Response | 18 | 24.0 |
| Total | 75 | 100 |

Field Visit

Table 09 show that the respondents have been asked whether they have consulted doctor for their menstruation problem. Table 09 says that 54.7% have gone to doctor but 21.3% have not consulted any doctor. 24% have not responded for this question.

Table 10 Respondent's perception for not consulting Doctor for bleeding

| Particulars | Frequency | Percent |
|---|-----------|---------|
| Considering it not as a serious problem | 2 | 2.7 |
| Tendency that it is common | 3 | 4.0 |
| No proper information | 3 | 4.0 |
| No Response/shy | 67 | 89.3 |
| Total | 75 | 100.0 |

Field Visit

Table 10 ays that around 3% of the respondents say it's not a serious problem, and 4% say that it is a common problem. 4% say that they don't even proper information that whom to go. But here 89.3% respondents maintained silence and that shows still girls suffer from shyness to go to doctor regarding the menstruation problem.

Table 11 Respondent's perception regarding facilities at the college

| Particulars | Frequency | Percent | |
|---------------------------|-----------|---------|--|
| Providing Toilet Facility | | | |
| Yes | 44 | 58.7 | |
| No | 7 | 9.3 | |
| No Response | 24 | 32.0 | |
| Total | 75 | 100 | |



The study has the goal of finding what facilities are given by the college to manage menstruation hygiene for the students. For that asked a question regarding the proper toilet facility. Around 58.7 % have said they have a proper toilet facility. We cannot neglect them who is not satisfied with the provided washroom facility and they are 9.3%. 32% of the respondents not commented and they maintained silence.

Table 12 : Effective Water Facility

| Effective Water Facility | Frequency | Percent |
|---------------------------------|-----------|---------|
| Yes | 20 | 26.7 |
| No | 15 | 20.0 |
| No Response | 40 | 53.3 |
| Total | 75 | 100 |

Field Visit

To manage menstruation hygiene water facility must be sufficient. So the question asked the college provided sufficient water facility or not. 26.7% answered yes college provided proper water facility. But 20% respondents are not at all satisfied with water facility. 53.3% kept quiet.

Table 13 Dustbins or facility to dispose pads

| Dustbins or facility to dispose pads | Frequency | Percent |
|--------------------------------------|-----------|---------|
| Yes | 10 | 13.3 |
| No | 16 | 21.3 |
| No Response | 49 | 65.3 |
| Total | 75 | 100 |

Field Visit

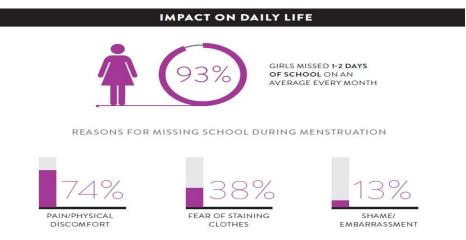
All institutions that too which are having girls must provide basic things to manage their menstruation in a dignified way. So that they must provide dustbins also along with proper facility of washrooms and water supply. Here only 13.3% said they got dustbin facility. But 21% are not happy. More than 60% didn't express anything.

Effects of myths about menstruation on girls and their education:

Many myths and taboos still hover around menstruation and lead to negative attitudes toward this biological phenomenon and women experiencing it. After menarche girls have to face many challenges related to management of menstruation in public places. UNICEF



estimates that 1 in 10 school going girls do not attend school during menstruation. World Bank statistics highlight absences of approximately 4 days every 4 weeks. Partly due to the difficulties in measuring absenteeism and its causes, especially when linked to menstruation, there are differing opinions on the impact of lack of menstrual hygiene materials. Menstruation increases the perception of menstruation as something shameful that needs to be hidden, and may reinforce misunderstandings and negative attitudes toward it.



Source: Breaking the taboo; Research Highlights- Jharkhand (Knowledge, practice, attitude and norms on menstrual hygiene) UNICEF, November 2013

| Table 14 Effects | | | |
|--|--------------|----|------|
| Leave for college during periods | Often | 2 | 2.7 |
| | Occasionally | 41 | 54.7 |
| | No | 32 | 42.7 |
| Other leaving college due to menstruation problems | Yes | 47 | 62.7 |
| | No | 27 | 36.0 |
| | No Response | 1 | 1.3 |

Field Visit

There was a question for respondents that weather they take leave on their periods. 2.7% said they take leave often and 55% said occasionally. Around 43% said they won't take leave and they attend college regularly. Respondents have been asked a question that weather they know any girls who left school/college due to their periods' problem and around 63% said yes they know such girls who left the college for their menstruation problem.



Table 15 Respondent's perception regarding help expected from College for menstruation management

| Proper Toilet Facility | 31 | 41.3 |
|------------------------------------|----|------|
| Proper Water Facility | 20 | 26.7 |
| No Restriction to be imposed | 1 | 1.3 |
| Provide good quality napkins | 28 | 37.3 |
| Proper facility to dispose napkins | 12 | 16.0 |
| Help from friend | 2 | 2.7 |
| Help from teacher | 6 | 8.0 |
| Send to hospital or home | 1 | 1.3 |
| Assistance from the doctor | 4 | 5.3 |
| Provide waiting room | 2 | 2.7 |
| Provide leave during those days | 1 | 1.3 |
| No need of any assistance | 5 | 6.7 |

Field Visit

Respondents, as representatives of all the female students, expect few necessary things from the college. Maximum i.e.,41.3% of them expecting proper toilet facility in their institution. 26.7 requesting for proper water facility. 37.3% expect the institution must provide a good quality sanitary napkins. 16% want a proper arrangement to dispose used napkins. 8% expecting a moral support or help from teachers and 2.7% need friends' help in managing menstruation in the college. 5.3% are a little bit particular of health assistance and asking that a doctor should be there in the hospital to help them in the emergency when they go to hospital having this problem. 2.7% are not satisfied with the facility of waiting room which already provided by the institution. 1.3% expect that the leave when they take on this purpose should not be considered as an absent. 1.3% say that there should be freedom for them to go home whenever they want to go and if they don't wear uniform also college should permit. But 6.7% of the respondents say there is no need of any assistance and they can manage themselves.



Type of programs to be conducted in the colleges about menstruation related issues

Table 16 Respondent's perception regarding type of programs to be arranged in colleges

about menstruation related issues

| Particulars | Frequency | Percent |
|--|-----------|---------|
| Pad Distribution | 10 | 13.3 |
| Tips to have good health during Menstruation | 3 | 4.0 |
| Any Program that helps facing Menstruation | 4 | 5.3 |
| Organise awareness programs | 45 | 60.0 |
| Arrange Doctor's Program | 4 | 5.3 |
| Provide Pads at Low Price | 2 | 2.7 |
| Provide Toilet Facility | 3 | 4.0 |
| Provide Water Facility | 1 | 1.3 |
| Nothing Required | 4 | 5.3 |
| Total | 75 | 100 |

Field Visit

The questionnaire included a question to get the suggestions to conduct programs on menstruation hygiene management. Maximum number of respondents expecting more awareness programs regarding the management of menstruation hygiene and other related problems and they were in 60%. 13.3% asking to the college to distribute sanitary pads. 5.3% are not particular in the type of program but they insist to conduct any program which help to deal with menstruation. Again the same number i.e., 5.3% requesting to bring a doctor to give awareness on this 4% want to have some tips to maintain the health during menstruation. 4% are stick on to get a proper washroom facility and 1.3% on water facility. 2.7% are expecting the institution must provide sanitary pads in lower price. 5.3% are no expectation.

Table 17 Respondent's perception regarding time to create awareness about menarche

| Particulars | Frequency | Percent |
|--|-----------|---------|
| Menarche Stage | 51 | 68.0 |
| When capable of understanding age is acquired | 4 | 5.3 |
| Arrange awareness programme by inviting Doctor | 1 | 1.3 |
| No Response | 19 | 25.3 |
| Total | 75 | 100.0 |



Next question is to know the view of the respondents on the appropriate time to get the awareness or information regarding menarche and menstruation hygiene. 68% say the awareness should be given for them when the menarche stage starts. 5.3% the awareness should be given at the age of understanding such issues. 1.3 say if arranging awareness program with the help of doctors, finally 25.3% maintained their silence.

Table 18 Respondent's perception regarding proper person who can create awareness about menarche

| Particular | Frequency | Percent |
|--|-----------|---------|
| Awareness from Mother | 27 | 36.0 |
| Awareness from Teacher | 9 | 12.0 |
| Awareness from Mother and Teacher | 5 | 6.7 |
| Awareness from Mother, Sister, Teacher and Friends | 5 | 6.7 |
| Doctor | 5 | 6.7 |
| Mother or Doctor | 1 | 1.3 |
| Elder | 2 | 2.7 |
| No Response | 21 | 28.0 |
| Total | 75 | 100 |

Field Survey

The questionnaire contained a question that who is the appropriate ambassador to give awareness on menarche as well as menstruation process and to tell how to deal with the related issues. 36% respondents were clear that mother is the best source to give the awareness to her daughter. 12% expecting their teachers should take the responsibility of giving the awareness. 6.7% expecting awareness from mother, sister, teacher and also friends. Added even doctors also must have this responsibility. 2.7% say elder should take the responsibility of creating awareness.

FINDINGS

1. Table 01 show that The sample has been selected randomly so from BA 1st 2nd and 3rd year 44 female students, from B.Com 17 female students, BSc 14 and from all the three years students have been selected for this purposive study. Totally 75 students were the respondents and all from rural areas.



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- 2. Table 02 shows the age distribution of the students. Age of age group of 18 and 19 are around 33.4 %,
- 3. Table 03 shows the age of menarche of the respondents. In the age of 14 maximum entered into menarche and they are in 37.3% the frequency is 28.
- 4. Table 04 seen that result the statistics show that 24% of respondents felt embarrassment.
- 5. The study tried to know the respondents' mind set about knowing the menarche before and 77.3% opined that its necessary to have the knowledge before those day comes. Table 5a shows the opinion of respondents regarding the pre-knowledge of menarche. 32% of respondents agreed that pre-knowledge is necessary because precautionary measures can be taken.
- 6. Table 06 and 6a shows that whether rural girls discussed about the menstruation, If yes with whom. 80% of the girls discuss and 12% say they don't, around 67% discuss with mother and around 12% with sister. Those who don't discuss with anybody said reasons for not discussing in Table 6b. 25% say they feel inferior to discuss, 16% feel not necessary of discussing, around 9% feel shy to discuss.
- 7. Table 07 show that major purpose of the study is to find out how rural girls manage menstruation hygiene. So the question has been asked is what material you use to manage for menstruation bleeding. Of course 77.3% told that they use pads.
- 8. The respondents who said they use pads on their periods answered here and table 08 says only 46.7% were knowing how to use pads before menarche but more than 50%, i.e. 52% telling they didn't know about pads for periods.
- 9. Table 09 show that the respondents have been asked whether they have consulted doctor for their menstruation problem. Table 09 says that 54.7% have gone to doctor.
- 10. Table 10 ays that around 3% of the respondents say it's not a serious problem, But here 89.3% respondents maintained silence and that shows still girls suffer from shyness to go to doctor regarding the menstruation problem.
- 11. The study has the goal of finding what facilities are given by the college to manage menstruation hygiene for the students. For that asked a question regarding the proper toilet facility. 58.7 % have said they have a proper toilet facility.
- 12. To manage menstruation hygiene water facility must be sufficient. So the question asked the college provided sufficient water facility 53.3% kept quiet.



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- 13. All institutions that too which are having girls must provide basic things to manage their menstruation in a dignified way. So that they must provide dustbins also along with proper facility of washrooms and water supply. More than 60% didn't express anything.
- 14. There was a question for respondents that weather they take leave on their periods. Respondents have been asked a question that weather they know any girls who left school/college due to their periods' problem and around 63% said yes they know such girls who left the college for their menstruation problem.
- 15. Respondents, as representatives of all the female students, expect few necessary things from the college. Maximum i.e.,41.3% of them expecting proper toilet facility in their institution.
- 16. The questionnaire included a question to get the suggestions to conduct programs on menstruation hygiene management. Maximum number of respondents expecting more awareness programs regarding the management of menstruation hygiene and other related problems and they were in 60%.
- 17. view of the respondents on the appropriate time to get the awareness or information regarding menarche and menstruation hygiene. 68% say the awareness should be given for them when the menarche stage starts.
- 18. the appropriate ambassador to give awareness on menarche as well as menstruation process and to tell how to deal with the related issues. 36% respondents were clear that mother is the best source to give the awareness to her daughter.

SUMMARY AND CONCLUSION

Many studies show that religion, socio economic status, educational and family background play a major role in menstrual practices of adults. Above all economic status of a family play a significant role in menstrual practices. Educated girls are more conscious about menstrual hygiene. The education of mother matters a lot.

Initiated by WASH United, the first global Menstrual Hygiene Day will be celebrated on May 28th around the world with exhibitions, film screenings, workshops and gatherings, all aimed at breaking the silence around menstruation. Menstrual Hygiene Day was created to recognize publicly the right of women to hygienically manage their menstruation wherever they are. By acknowledging that menstruation is a normal human process and a sign of good health.



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Menstrual Hygiene Day confronts the stigmas attached to menstruation with collective advocacy, education and action.

Today, millions of women and girls around the world are stigmatized, excluded and discriminated against simply because they menstruate. It's not acceptable that because of a natural bodily function women and girls continue to be prevented from getting an education, earning an income and fully and equally participating in everyday life.

While Menstrual Hygiene Day is on 28 May, our team and our partners work all year round to:

- Break the taboos and end the stigma surrounding menstruation
- Raise awareness about the challenges regarding access to menstrual products, education about menstruation and period-friendly sanitation facilities
- Mobilize the funding required for action at scale

All of this contributes to our overarching goal: to build a world where no one is held back because they menstruate by 2030.

Menstrual hygiene should be promoted by implementing a course on menstruation and menstrual hygiene management. Teachers should be educated and trained to impart knowledge about menstruation and menstrual hygiene management among students. Social and electronic media also play an important role to make the girls and women aware about the latest menstrual products, different manufacturers, government policies, and so forth. Subsidies should be given on menstrual products so that every girl/women can afford them easily. Non-government organizations should come forward to educate rural people about menstruation, menstrual hygiene management, importance of toilets at homes, hand washing, diseases related to reproductive tract due to poor hygiene, and so forth. Emphases should be given on the use of reusable sanitary or cloth pads to overcome the problem of disposal. Girls and women should be aware of the consequences of disposing used menstrual products in open or flushing them in toilets. Dustbins with proper lids should be placed in the toilets. If possible, incinerators should be installed at homes, schools, and community levels. This study reveals that lack of privacy is a major concern both in household and in schools. Also, ignorance, misconceptions, unsafe practices, and illiteracy of the mother and child regarding menstruation are the root causes of many problems. So, there is a big need to encourage adolescents at school levels to practice safe and hygienic behaviors.



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