



## A Study of Knowledge and Communication on Menstruation Among Adolescent School Girls in Coimbatore, Tamil Nadu, India

### KEYWORDS

Menstruation, Menarche, Adolescent girls, Menstrual Knowledge

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**ABSTRACT** Adolescence is a period of transition from childhood to adulthood between 10-19 years (World health organization) and adolescent girls often lack knowledge regarding reproduction and menstrual health which is often clouded by taboos, myths, socio-cultural restrictions etc. Therefore the adolescent girls stay ignorant of the natural cycle of body and facts around menstruation which results in adverse health outcomes in attitude and practice. This study explores the level of knowledge among the adolescents on menstrual cycle, hygiene, nutrition, myth and personal care among the adolescent school girls. Often the girls stay unwitting of their own body functions and therefore it becomes necessary for effective communication and to educate the girls on safe menstrual practices. Thus this study also focuses on examining the girls' health communicators and the content of information they received during their menarche.

### Introduction

Communication is an important tool for attaining development and sharing of knowledge for achieving a change in the socio-economic conditions, behavior and life of the people. Dasgupta A and Sarkar M. (2009) observes that in developing countries like India most of the adolescent girls do not have adequate knowledge about menstruation, menstrual hygienic practices and pay low attention to the reproductive health of the adolescent girls.

Communication has not been effective in building a strong structure of health communication to influence individuals and communities in health-related information about adolescence and menstruation. Whereas sexual norms in India were communicated through art forms, taught in class and were far more generous before the 13th Century, giving equal importance to the secular and the spiritual aspects. But gradually talks on topics such as sex, menstruation, changes in body, etc reduced in public, private, social space, and education system. Now this country is unable to speak and communicate about the importance of bodily changes and reproduction during adolescence. Mothers are the main source of information involved in educating the adolescent girls about the menstrual practices. But they are not liberal enough to talk about sexuality and neither reproductive change. According to the Indian Council of Medical Research (ICMR), a study showed that knowledge and awareness about puberty, menstruation, physical changes in the body, reproduction, reproductive tract infections and sexually transmitted infections, was low among boys and girls, especially in younger adolescents (ages 10–14). Therefore it is important to spread the knowledge among the adolescent girls regarding menstrual hygiene and practices through valued education system.

### Objectives

- To explore the level of knowledge among the adolescents regarding menstrual cycle, hygiene, nutrition, myth and personal care.
- To examine the source of information (health communicators) for the adolescents on menstruation.
- To investigate the content of information the adolescents received before the onset of their menarche.

### Need for the study

'Culture of silence' around the topic 'menstruation', states that there is a need to communicate and equip the younger generation with skills regarding safe and healthy hygienic practices and to make appropriate choices so that girls can lead a healthy reproductive life and prevent the risk for reproductive tract infections (Kamath, 2013; Raina & Balodi, 2014). The "Helping Families" survey, conducted by a pharmaceutical company in nine Indian cities, found that infertility problems prevailed even among the young generation. "30 million couples in India suffer from infertility" (The Indian Express 2010). Unhygienic practices followed during the days of menstruation, is considered as a major cause for infertility. These kind of issues can be regulated by proper menstrual knowledge and improving the reproductive health of adolescent girls by educating and promoting health awareness and healthy behavior among them. The study focuses on the awareness level and knowledge on menstruation among the adolescent girls in Coimbatore.

### Research Methodology

A sample of data of 322 adolescent girls (9<sup>th</sup>std and 11<sup>th</sup>std) from four different schools (Government and private) in Coimbatore was collected to understand their knowledge on menstrual cycle, hygiene, nutrition, myth, and medical care.

### Results

Adolescent menstrual hygiene and self care is a critical issue that determines the health status of the adolescent (Uzochukwu et al., 2009). It is been observed from the study that only 58.7% girls had received the information regarding menstruation prior to their menarche. The information which they had received are all about the social practices, beliefs and restrictions to be practiced during menstruation. Menstruation is a special period in the girl's life cycle that requires specific and special attention which is often shocking, horrifying and traumatic to many adolescent girls due to the lack of awareness (El-Gilany and Nadawi, 2005; Poureslami and Osateashtiani, 2002). The study observes that around 38.8% of the girls were shocked during their first menstruation and only 22.7% of the adoles-

cent girls were happy when they experienced their first periods. 60% of the girls who attained puberty between the age of 9-12 years were experiencing fear the first time when they felt bleeding from their genital organ and only 28.9% of the girls knew that menstruation was a sign of normal growth and few of the girls have even thought that it is a curse.

78.6% of the girls have received information from their mothers followed by friends (33.9%) and elder sisters (28.3%). Girls also agreed that they feel comfortable to discuss with their mothers when compared to teachers and relatives. The girls mentioned that the mothers communicated the following aspects during their puberty - cause of menstruation (15%), hygiene (23.6%), restriction (44.4%), personal care (49.9%), away from opposite gender (13%), reproductive process (5%), don't play (23%), matured Girl (38%), and physical touch (27.6%). The findings of this study identified that they were not provided much on knowledge on menstrual cycle, hygiene, nutrition and medical care. Whereas restrictions on entering temple, kitchen, using common utensils and isolating themselves during the menstrual days were given importance. This indicates that the basic awareness was completely ignored and not provided to the girls.

School text books and educational system provide minimum importance on the physical and mental changes which the adolescents experience. Even the teacher skips the syllabus on reproductive health education and it is been observed from the study that media, health camps programmes and doctors did not play any role in educating the girls on reproductive and menstrual health. Though there are plenty of sanitary advertisements telecasted in the television, the girls opined that it should be more girls-friendly and informative instead of making them to feel shy to watch in front of other family members.

**Table 1:** Age of the respondents and their knowledge on menstruation.

S.No	Knowledge on menstruation	Age of the respondents	No	No Idea	Yes
1	Menstruation is an essential reproductive process.	Mid Adolescence (N=190)	23.1%	4.2%	72.6%
		Late Adolescence (N=132)	20.4%	0.8%	78.7%
2	Menstruation is a lifelong process.	Mid Adolescence	81%	0.0%	18.9%
		Late Adolescence	78.7%	0.0%	21.2%
3	The body requirements for Vitamin C increases during the years of menstruation.	Mid Adolescence	37.8%	0.5%	55.2%
		Late Adolescence	43.9%	7.5%	48.4%
4	A girl should stay away from men during periods.	Mid Adolescence	28.4%	6.8%	64.7%
		Late Adolescence	35.6%	5.3%	59%

5	It is harmful to share food with a menstruating girl.	Mid Adolescence	43.6%	16.8%	39.4%
		Late Adolescence	48.4%	7.5%	43.9%
6	A menstruating girl can use common vessels and utensils used by others.	Mid Adolescence	41.5%	12.1%	46.3%
		Late Adolescence	51.5%	10.6%	37.8%
7	It is hygienic when a menstruating girl prepares or serves food.	Mid Adolescence	48.9%	1.1%	50.0%
		Late Adolescence	51.5%	4.5%	43.9%
8	It is harmful to sit near a menstruating girl in school or any common places.	Mid Adolescence	41.0%	20.0%	38.9%
		Late Adolescence	53.7%	15.1%	31.0%
9	A girl should avoid eating sweets or drinking cold things during periods.	Mid Adolescence	32.1%	4.2%	63.6%
		Late Adolescence	34.8%	3.03%	62.1%
10	A girl should take bath regularly when she is menstruating.	Mid Adolescence	21.5%	0.0%	78.4%
		Late Adolescence	18.1%	0.0%	81.8%
11	It is a sin when a menstruating girl enters holy places (churches, temples, mosques)	Mid Adolescence	40.0%	0.0%	60.0%
		Late Adolescence	29.5%	3.0%	67.4%
12	A menstruating girl should use a separate bed for sleeping.	Mid Adolescence	33.1%	6.3%	60.5%
		Late Adolescence	21.9%	9.1%	68.9%
13	Used clothes should be dried under sunlight	Mid Adolescence	47.3%	8.9%	43.6%
		Late Adolescence	51.5%	14.3%	34.0%
14	Stress, weight loss/gain also results in irregular periods.	Mid Adolescence	46.3%	15.7%	37.8%
		Late Adolescence	38.6%	19.6%	41.6%
15	Exercising, walking and basic yoga positions help to minimize menstrual pain.	Mid Adolescence	32.1%	12.1%	55.7%
		Late Adolescence	15.1%	15.9%	68.9%

16	In between one cycle of periods (approximately 28 days), it is normal for a girl to have vaginal bleeding.	Mid Adolescence	23.1%	10.0%	66.8%
		Late Adolescence	19.6%	7.5%	72.7%
17	It is unhealthy to use drugs and tablets to postpone monthly period.	Mid Adolescence	47.3%	8.9%	43.6%
		Late Adolescence	55.3%	9.1%	35.6%
18	Poor menstrual hygiene can cause various reproductive infection	Mid Adolescence	9.5%	25.2%	65.2%
		Late Adolescence	12.1%	29.5%	58.3%

Table 1 indicates that the girls have the basic knowledge about menstruation, but were not aware of the scientific facts behind the physical and mental growth of their body. The restrictions which they follow make them feel isolated. This also gives them negative feeling and make them feel as a weaker gender. Their female elders of the family teach them the restrictions, and the girls start following the prohibitions without questioning.

### Discussion

The study clearly reveals that the girls lack the basic knowledge of menstruation and personal care. Mothers, who are the major source of information, did not have adequate awareness in teaching their daughters on menstrual health. Therefore Government, Non-Government organizations and volunteers should take the role of educating the mothers on menstruation and insist on communicating positive ideas to their daughters.

Health policies should be refined and made much stronger to effectively communicate with the adolescents. Apart from mothers, it is the role of teachers to teach the girls on safe menstrual practices. Schools should conduct health programmes on adolescent health on regular basis. Frequent visit of medical experts should be made compulsory. Health education classes should be conducted for both genders to encourage open discussions on health aspects. Diseases directly related to the lack of exercise, such as obesity and diabetes, have been reported to be more prevalent among ethnic minority teens (Ross,2000). Therefore health problems occurring in adolescents need to be dealt with friendly, personal and confidential advice. So adolescent friendly medical services should be provided for the adolescents where they can discuss their so called "private" health concerns without embarrassment.

### Conclusion

Poor knowledge of the adolescent girls' on nutrition, menstruation, reproductive health, etc implies rethinking of relevant strategies for school health education to include innovative strategies involving adolescents to ensure programme sustainability on adolescence health education. Adolescent's health education on menstruation can make a positive difference in the girls' lives and their future.

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