



KNOWLEDGE, ATTITUDE AND PRACTICES ABOUT MENSTRUAL TABOO AMONG FEMALE COLLEGE STUDENTS

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ABSTRACT

This cross sectional study was conducted among 18+ years college going female students who are residing in urban and rural parts of India. Total number of respondents was 112. Among them 18 years- 27.67%, 19 years-31.25%, 20 years-21.43%, 21 years-15.18%, 22 years-4.46%. Among them 88.39% were from urban area and 11.61% were from rural area. Age at menarche, 10 years-2.58%, 11 years-3.57%, 12 years-19.64%, 13 years-25.89%, 14 years-28.57%, 15 years-13.39%, 16 years-4.46%, 18 years-1.79%. Among the respondents, they came to know about menstruation from books media-2.68%, female relatives-0.89%, Friends/peers-12.50%, from mother-51.79%, sister-2.68%, teachers-16.96%. The respondents reported during period if branded napkins aren't available, 50.89% of them use homemade napkins, 23.21% use tampons and 25.89 use some other variations. Domestic restrictions faced by 59.82 percent of respondents on entering prayer room and 7.14% on entering the kitchen. 1.78% of them answered yes regarding restrictions faced on stepping outside the house, 13.39% for restrictions faced on exercising/playing outdoor games. Education on these subjects should be envisaged as a long term and continuous process before menarche appears.

KEYWORDS: Menstrual taboo, female students.

INTRODUCTION

Talking about menstruation, it had been a taboo even amongst planners. It received attention of the Ministry of Health in 2011. Close to 70% of Indian women risk getting severe infection, at times causing death, due to poverty, ignorance and shame attached to their menstrual cycle.^[1]

Menarche is an important and inevitable phase in a girl's life. Apart from the biological changes in their bodies, girls experience a lot of social, emotional, and mental challenges too. The preparedness to tackle and deal with menarche is very poor in our society. As they are not taught and explained about it in a scientific manner, girls are left to face the experience of their first period all on their own. This can be a horrible lifelong unpleasant psychological impact. According to UNITED NATIONS CHILDRENS' FUND (UNICEF), adolescents contribute to about 20% of the population. There's a large population that is ignorant, uneducated and needs attention.^[2] In India, menstruation has been a taboo in the past and even to the date; the cultural and social influences appear to be a hurdle for advancement of knowledge on the subject.^[3] Culturally, in many parts of India, menstruation is still considered to be dirty and impure. Menstruation is traumatic, painful and inconvenient. Social and cultural taboos associated with

it negatively impact the physical, mental and social health of women.^[4] The women undergoing the monthly cycle are still subjected to restrictions.^[5] The restrictions like cooking, touching pickles, entering a kitchen, touching men, wearing certain clothes, etc. The stigma is built up due to traditional beliefs in impurity of menstruating women and our willingness to discuss it normally.^[6]

The degree of following the rules and practices followed varies from family to family. It depends on their beliefs and how strongly they can hold traditional practices. Menstruation can predispose women to life threatening reproductive tract infection if hygiene is not maintained throughout menstruation.

The practices, knowledge and attitude which develop at adolescent age are usually followed by them throughout life and also passed on to their next generation.^[7] Use of unhygienic clothes may lead to development of infections of reproductive tract which may seriously hamper the reproductive capacity of female. Impact of TV, radio, newspapers and pamphlets in increasing the awareness about the use of sanitary napkins should be used for mass campaigns.

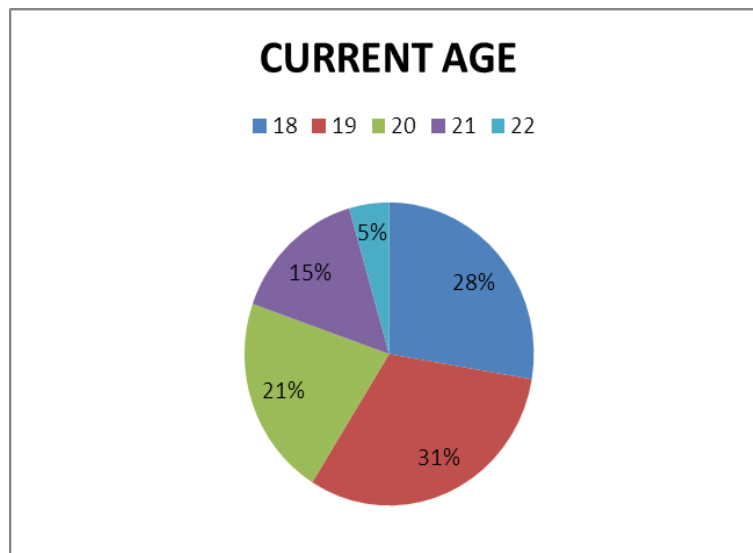
MATERIALS AND METHODS

This cross study was conducted among the female college-going students who have taken admission in different branches in the colleges within India. Total number of participants was 112 from urban and rural

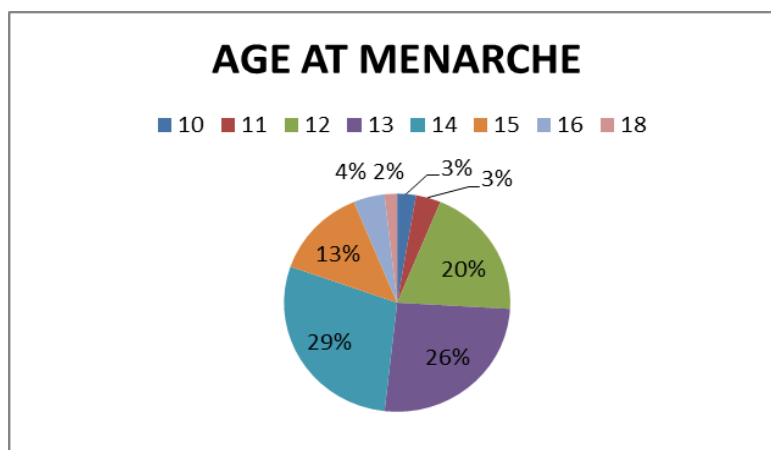
areas of India. Pre validated questionnaire via Google form was uploaded. Those who agreed to take part in study were only considered. The data was entered into the Microsoft Excel and was analysed.

RESULTS AND DISCUSSION

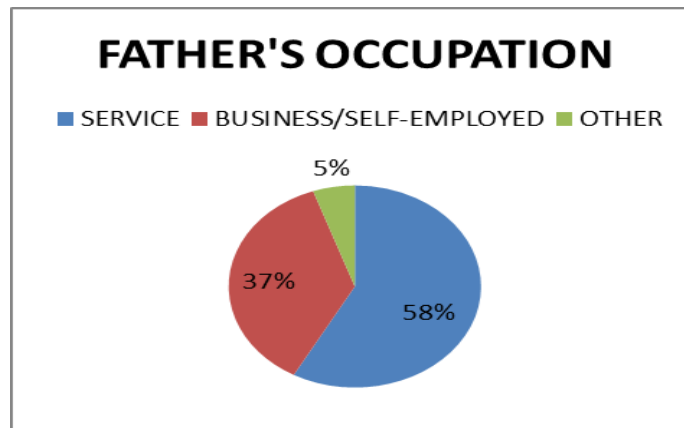
YOUR Current age (in completed years)	No of participants	Percentage
18	31	27.67
19	35	31.25
20	24	21.43
21	17	15.18
22	5	4.46



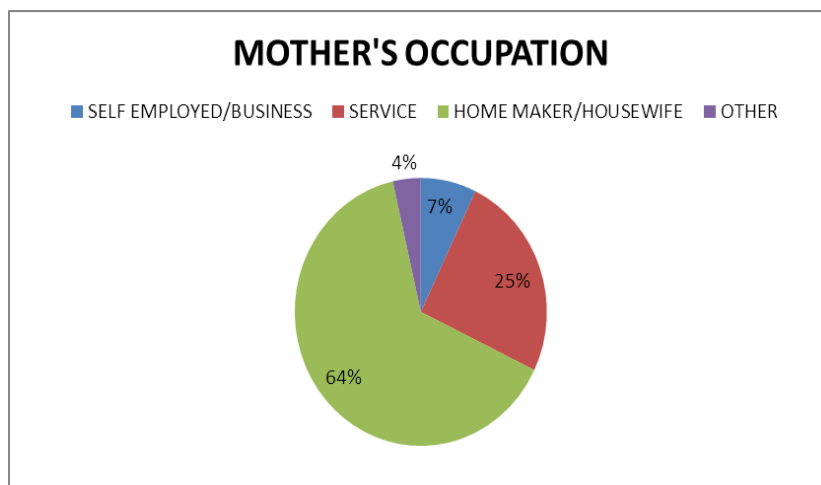
Age at Menarche	No of participants	Percentage
10	3	2.68
11	4	3.57
12	22	19.64
13	29	25.89
14	32	28.57
15	15	13.39
16	5	4.46
18	2	1.79



Father's occupation	No of participants	Percentage
Service	65	58.04
Self employed/business	41	36.60
Other	6	5.36



Mother's occupation	No of participants	Percentage
Self employed/business	8	7.14
Service	28	25.00
Housewife / Home maker	72	64.28
Other	4	3.57



TOTAL PARTICIPANTS-112

YOUR Current age (in completed years)	Percentage
18	27.67
19	31.25
20	21.43
21	15.18
22	4.46

Age at Menarche	Percentage
10	2.68
11	3.57
12	19.64
13	25.89
14	28.57
15	13.39
16	4.46
18	1.79

PRIMARY SCHOOLING AREA	Percentage
RURAL	11.61
URBAN	88.39

Your medium of instruction in school	Percentage
ENGLISH	82.14
HINDI	0.89
MARATHI	4.46
SEMI ENGLISH	12.50

UG COURSE OR YEAR	Percentage
FIRST MBBS	35.71
SECOND MBBS	25.89
THIRD MBBS	1.79
BA	11.61
BA LLB	0.89
BCA	0.89
BCOM	2.68
BMM	0.89
BSC	5.36
BTECH	14.28

Father's primary schooling area	Percentage
RURAL	42.68
URBAN	57.14

Father's Total years of education (starting from 1st Std/Grade)	Percentage
5	0.89
6	1.79
10	9.82
12	9.82
14	5.36
15	27.68
16	11.61
17	14.29
18	11.61
19	0.89
20	2.68
25	3.57

Father's medium of instruction in school	Percentage
English	36.61
Hindi	23.21
Marathi	25.89
Semi English	9.82
Other	4.46

Father's occupation	Percentage
Service	58.04
Self employed/business	36.60
Other	5.36

Mother's primary schooling done in	Percentage
Rural	43.75
Urban	56.25

Mother's Total years of education (starting from 1st Std/Grade)	Percentage
1	0.89
7	1.79
8	0.89
10	12.50
11	1.79
12	19.64
13	2.68
14	5.36
15	23.21
16	5.36
17	8.04
18	6.25
19	2.68
20	3.57
21	2.68
23	0.89
24	0.89
25	0.89

Mother's medium of instruction in school	Percentage
English	36.61
Hindi	21.43
Marathi	25.00
Semi English	9.82
Other	7.14

Mother's occupation	Percentage
Self employed/business	7.14
Service	25.00
Housewife / Home maker	64.28
Other	3.57

Currently living at	Percentage
HOME	59.83
HOSTEL/SIMILAR	40.17

IF HOMES, THEN FAMILY TYPE	Percentage
JOINT FAMILY	8.92
NUCLEAR FAMILY	45.53
NUCLEAR FAMILY WITH GRAND-PARENTS	20.53
NOT APPICABLE	25.00

Are you a single child of your parents?	Percentage
Yes	12.50
No	87.50
IF NO, YOUR BIRTH ORDER?	Percentage
First born	48.48
Second born	39.39
Third born	8.08
Fourth born	4.04
IF NOT A SINGLE CHILD, NO OF FEMALE SIBLINGS?	Percentage
ONE	40.40
TWO	10.10
THREE	3.03
NOT APPLICABLE	46.46
IF NOT A SINGLE CHILD, NO OF MALE SIBLINGS?	Percentage

ONE	59.59
TWO	6.06
NOT APPLICABLE	34.34

Who informed you about periods / menstruation BEFORE you started having periods?	Percentage
BOOKS/MEDIA	2.68
FEMALE RELATIVES	0.89
FRIENDS/PEERS	12.50
MOTHER	51.79
SISTER	2.68
TEACHERS	16.96
NONE	12.50

Who informed you about menstrual hygiene and use of absorbent material during periods?	Percentage
Books /media	4.46
Female relatives	0.89
Friends/peers	0.89
Mother	75.89
Sister	6.25
Teachers	11.60

If branded sanitary napkins are not available, your alternative absorbent during periods is?	Percentage
HOMEMADE SANITARY NAPKINS	50.89
TAMPONS	23.21
OTHERS	25.89

Do you feel comfortable buying sanitary napkins from a shop by yourself?	Percentage
YES	83.04
NO	16.96

Do you feel at ease ONLY if sanitary napkin packets are wrapped (in paper [or] black plastic bags) by shop keepers?	Percentage
YES	34.82
NO	65.18

From among the following persons, with whom you feel you can have a free and frank discussion on menstruation?	Percentage
FEMALE DOCTOR	1.79
FEMALE RELATIVE	0.89
FRIENDS/PEERS	23.21
MOTHER	64.28
SISTER	8.93
FEMALE NEIGHBOUR	0.89

In case you experience menstrual problems, with whom you feel comfortable to talk about it?	Percentage
FEMALE DOCTOR	7.14
FRIENDS/PEERS	9.82
MOTHER	71.43
SISTER	9.82
NONE	1.79

At home, has ANYONE ever stopped you from talking about periods / menstruation?	Percentage
Yes	13.3
No	86.7

If no, Do you hesitate [or] feel inhibited while talking about periods / menstruation	Percentage
Yes	21.42
No	78.58

At your institution, would you feel embarrassed [OR] ashamed if a sanitary pad packet accidentally falls out of your bag in the presence of your colleagues?	Percentage
Yes	34.82
No	65.18

AFTER you started having periods, were you ever told NOT to exercise or play games?	Percentage
Yes	28.57
No	71.43

Do you exercise when you are NOT having your periods?	Percentage
Yes	71.42
No	19.58

If Yes, What type of exercise?	Percentage
Brisk Walking	31.25
Cardio	35
Weight Training	1.25
Dance	1.25
Outdoor Sports	15
Yoga	8.75
Other	7.5

Do you exercise when you are HAVING your periods?	Percentage
Yes	43.75
No	56.25

If Yes, What type of exercise?	Percentage
Brisk Walking	44.89
Cardio	26.53
Weight Training	0
Dance	2.04
Outdoor Sports	20.4
Yoga	2.04
Other	4.08

Domestic restrictions faced by You during your periods [Restriction on entering prayer room at home [or] touching holy books [or] visiting places of worship]	Percentage
Yes	59.82
No	40.18

Domestic restrictions faced by You during your periods [Restriction on entering the kitchen or cooking food]	Percentage
Yes	7.14
No	92.86

Domestic restrictions faced by You during your periods [Restriction on stepping outside the home]	Percentage
Yes	1.78
No	98.22

Domestic restrictions faced by You during your periods [Restriction on wearing certain types of clothing]	Percentage
Yes	10.71
No	89.29

Domestic restrictions faced by You during your periods [Restriction on exercising / playing outdoor games]	Percentage
Yes	13.39
No	86.61

Domestic restrictions faced by You during your periods [Restriction on eating chilies / pickles]	Percentage
Yes	17.85
No	82.15

Domestic restrictions faced by You during your periods [Restriction on touching certain food items]	Percentage
Yes	16.96
No	83.04

The various reasons for continuation of menstrual taboos even in 2021 include [Passive acceptance of patriarchy-directed norms by women]	Percentage
Yes	84.82
No	15.18

The various reasons for continuation of menstrual taboos even in 2021 include [Low educational status of women]	Percentage
Yes	75.89
No	24.11

The various reasons for continuation of menstrual taboos even in 2021 include [Boys are Not formally taught about menstruation at school]	Percentage
Yes	76.78
No	23.22

The various reasons for continuation of menstrual taboos even in 2021 include [Girls are NOT formally taught about menstruation at school]	Percentage
Yes	54.46
No	45.54

The various reasons for continuation of menstrual taboos even in 2021 include [No financial autonomy for women even if they are earning]	Percentage
Yes	59.82
No	40.18

The various reasons for continuation of menstrual taboos even in 2021 include [Low social status of women]	Percentage
Yes	66.96
No	33.04

The age group of the respondents of the present study was 18 years to 22 years. 18 years- 27.67%, 19 years-31.25%, 20 years-21.43%, 21 years-15.18%, 22 years-4.46%. Their age at menarche, 10 years-2.58%, 11 years-3.57%, 12 years-19.64%, 13 years-25.89%, 14 years-28.57%, 15 years-13.39%, 16 years-4.46%, 18 years-1.79%. Their medium of instruction in school, English - 82.14%, Hindi-0.89%, Marathi-4.46%, Semi English-12.30%. Their course of study - First MBBS-35.71%, Second MBBS-25.89%, Third MBBS-1.79%, BA-11.61%, LLB-0.89%, BCA-0.89%, BCOM-2.68%, BMM-0.89%, BSC-5.36%, BTECH-14.28%. Father's primary schooling- Rural-42.68%, urban-57.14%. Mother's primary schooling, rural-43.75%, urban-56.25%.

About the information regarding menstruation, the respondents reported that from books/media- 2.68%, female relatives-0.89%, Friends/peers-12.50%, from mother-51.79%, sister-2.68%, teachers-16.96%. About menstrual hygiene and use of absorbent material during menstruation, the participants reported that they got information from books/media-4.46%, female relatives-0.89%, friends- 0.89%, mother- 75.89%, sister- 6.25%, teachers-11.60%.

If branded sanitary napkins are not available, alternative absorbent during periods -50.89% of them use homemade napkins, 23.21%- tampons and 25.89 -other variations. As per S MAJI^[8], the knowledge on menstruation is poor and the menstruation practices are often not hygienic. As per Sukran Kara^[9] insufficient adhesion of sanitary napkins on the underwear can cause shifting, where the excessive adhesion can result in determination of sanitary napkin layers during removal. Vasanthi R & others^[10] revealed that the practice regarding menstrual hygiene was moderate among the adolescent girls. Puneet Mishra & Others^[11] reported that only one-third of women were using sanitary napkins. Those who used an old cloth, the main reason was non availability of sanitary napkins in the village. As per Adika VO & others a good health and reproductive education and counseling in the area of sanitary pads is necessary. As per the participants' responses, 28.57% agreed that after they started having periods they were told not to exercise and 71.43% answered NO. As per the report of L. Bernstein^[13] moderate physical activity should be promoted by educators and health

professionals as a routine part of the health related activities of adolescent girls. Another report by N. Mathur^[14], that exercise is effective in reduction of symptoms of menstruation. The work of S Mohammed & others suggested that menstrual education through the Standard School Curriculum, starting from primary school, could prepare girls for menarche, improve their knowledge and menstruation and this could eliminate the sociocultural misconception surrounding menstruation. The respondents of the present study reported that 59.82% of them faced domestic restrictions. The various reasons for continuation of menstrual taboos even in 2021, 75.89% respondents agreed that is due to low educational status of women. The study of M Kundal et al^[16] revealed that the best way to change the mind of future women is to educate girls. Health education should be made compulsory at school level with special emphasis on the menstruation and related taboos.

CONCLUSION

Menstruation, menstrual morbidities and menstrual hygiene management are issues which are required to be adequately addressed. Inadequate facilities at school tend to cause school absenteeism. Openness to the topic and ground level recognition of the deficiencies at schools should reduce the school absenteeism. Cultural beliefs practiced also reduce the schooling days of the girl. This further leads to reduced academic performance. Adolescent girls need emotional support and assurance that menstruation is normal and healthy. Mothers are critically important in this regard. The young people should be addressed regarding their physiological and social needs during adolescence. The knowledge this imparted would lead to an improvement in women's status from an early age and an increase in self-esteem and will contribute to the reduction of gender disparity.

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