

# Study of menstrual hygiene and awareness of Udita corners among adolescent girls in Indore district

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## Abstract:

**Introduction:** Menstruation is a normal physiological process indicating beginning of reproductive life but sometimes it is considered as unclean phenomenon in the Indian society. The Ministry of Health and Family Welfare has introduced a Scheme for Promotion of Menstrual Hygiene among Adolescent Girls in the age group of 10-19 years in rural areas. In Madhya Pradesh, Directorate ICDS and Water Aid India started the Udita Project on Menstrual Hygiene Day. **Methodology:** This is a Cross-sectional study done for a period of 12 months. Sampling method used is Multi-stage random Sampling. Semi structured open ended questionnaires was used as a study tool to interview adolescent girls. Questionnaire consists of questions related to knowledge attitude and practice regarding the menstruation. **Results:** Out of 150 girls from urban AWCs 54.6% belonged to 11-14 and 45.3% to 14-18. In rural AWCs out of 150 girls 57.3 were from 11-14 years while 42.6% were from 14-18 years. Mean age for 11-18 years was 14.31. There was significant difference between beneficiaries of urban and rural AWCs with regards to knowledge and practice of menstruation and its hygienic practices. Significant difference (P=0.001) was noted between beneficiaries from rural and urban AWCs regarding awareness of Udita corners. **Conclusion:** Although, schemes similar to Udita project are started in some states, if implemented effectively across the country, it would contribute greatly to create increased awareness of menstrual hygiene and ultimately healthy population of women in the future.

**Key Words:** Adolescent girls, Menstruation, Udita Corner

## Introduction:

Menstruation is a normal physiological process indicating beginning of reproductive life but sometimes it is considered as unclean phenomenon in the Indian society<sup>(1)</sup> The issue of menstrual hygiene is inadequately acknowledged and has not received proper attention<sup>(2)</sup> Poor menstrual hygiene causes great impact in increased vulnerability to reproductive tract infections (RTI). Currently millions of women sufferers from RTI and infections are transmitted to the offspring. Thus women having knowledge regarding menstrual hygiene are less vulnerable to RTI and its consequences.<sup>(3,4)</sup> Therefore, increased knowledge about menstruation from adolescent period help in decreased suffering of millions of women.

The Ministry of Health and Family Welfare has introduced a

Scheme for Promotion of Menstrual Hygiene<sup>(5)</sup> among Adolescent Girls in the age group of 10-19 years in rural areas. In Madhya Pradesh, Directorate ICDS and Water Aid India started the Udita Project on Menstrual Hygiene Day. As part of the expansion, Water Aid India will be supporting the Government in the capacity building of the Anganwadi workers to disseminate information on safe and healthy menstrual hygiene management by establishment of Udita Corners at Anganwadi Centres, this makes girls available with low cost sanitary napkins.<sup>(6)</sup>

The aim of this study is to assess the knowledge attitude and practice of adolescent girls regarding menstruation and menstrual hygiene, and awareness of Udita corners.

## Methodology:

This is a Cross-sectional study done for a period of 12 months.

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Prior to this study a pilot study was carried out in two AWCs (one urban and one rural) to assess the feasibility of the study. Sampling method used is Multi-stage random Sampling. All the 72 AWCs Registered/ Functional within the catchment area of MGM Medical College of Indore district were enlisted and 36 AWCs based on the principle of 50% of total AWCs which was rounded off to next higher number=40. Thus, 40 AWCs were randomly selected; 20 AWCs each from Urban and Rural area. 20% of registered beneficiaries from each AWCs around 300 adolescent girls were randomly selected, 150 each from urban and rural area (Based on the findings of a pilot study that 20% of the total beneficiaries attending AWCs are adolescent girls in Indore district). Semi structured open ended questionnaires was used as a study tool to interview adolescent girls consists of questions related to knowledge attitude and practice regarding the menstruation. Appropriate statistical test was applied using SPSS software (IBM version 20). P-Value <0.05 was considered as statistically significant at 95% confidence interval.

#### Results:

Present study included 40 AWCs from which 300 adolescent girls selected randomly. Out of 150 girls from urban AWCs 54.6% belonged to 11-14 and 45.3% to 14-18. In rural AWCs out of 150 girls 57.3 were from 11-14 years while 42.6% were from 14-18 years. Mean age for 11-18 years was 14.31. Out of total sample 68.5% of girls were Hindu, 15.6% Muslim, 11% Sikhs and 4.9% Christians by religion. 62% girls belong to low socio-economic status (For urban population modified

Kuppuswami Scale and for rural population Pareek Scale was used).

There was significant difference (P- Value <0.05) between beneficiaries of urban and rural AWCs with regards to knowledge and practice of menstruation and its hygienic practices.

Significant difference (P value <0.05) was noted between beneficiaries from rural and urban AWCs regarding awareness of Udita corners.

All the selected AWCs has functional Udita corner with low cost sanitary napkins, posters, IEC material pertaining to menstrual hygiene, personal hygiene and information related to sexual and reproductive health. Out of 40 AWCs selected for study 18 AWCs (45%) has vending machine for sanitary pads withdrawal from which girls can withdraw pad costing of rupees 1,5 or 10 according to their need. Anganwadi workers play the key role in functioning of Udita corner as they provide information and clearing the myths related to menstruation, health, nutrition and hygiene.

#### Discussion:

This study includes the adolescent girls of age group 11-18 years. Mean age was 14.31, most of the girls belong to the age of menarche; so health education and motivation at this age will be most helpful. Likewise study done by Kansal et al (2016) <sup>[12]</sup> pointed towards the need for information on menstruation, especially about menarche before its onset and encouragement for the use of sanitary napkins.

More than half of the sample size i.e 62% girls belong to low socio-economic status, these girls cannot afford sanitary pads

**Table 1: Knowledge and practice of beneficiaries with regards to menstruation and its hygienic practices.**

S.No.	Assessment of Parameters (Questions asked)	Correct Response		P value
		Urban (N=150 )	Rural (N=150)	
1.	Knowledge of Menarche (Age of menarche)	128 (85.3%)	102 (68%)	0.001
2.	Knowledge of cause of menstruation (Physiological changes in female body)	115 (76%)	98(65.3%)	0.041
3.	Use of sanitary pads instead of clothes (Easy to use, Affordable, Hygienic)	123 (82%)	99 (66%)	0.002
4.	Sanitary Pad Disposal (Wrap and throw, Burning, Flushing)	128 (85.3%)	110 (73.3%)	0.015
5.	Sanitary pads Frequency. (Change after 6 hours)	135 (90%)	114 (76%)	0.002
5.	Menstruation hygiene. (Daily bath, Hand washing with soap and water, Washing of external genitalia with soap and water)	127 (84.6%)	107 (71.3%)	0.008

**Table 2: Awareness of Udita corners among beneficiaries in study sample:**

S.No.	Awareness of Udita corners	Urban (N=150)	Rural (N=150)	P- Value
1.	Yes	132 (88%)	98 (65.3%)	0.001
2.	No	18 (12%)	52 (34.6%)	

therefore Udita project is very beneficial for them provided with low cost sanitary pads.

Most of the girls of this study were aware of menstruation before menarche of which 128 (85.3%) were urban and 102 (68%) were rural which is higher than the study conducted by Deo *et al*<sup>(18)</sup> were 40 (42.5%) rural and 41 (55.4%) urban girls were aware about menstruation prior to attainment of menarche. Findings of this study almost similar to study done by Dasgupta *et al*.<sup>(3)</sup> (32.5%) Similar study conducted in Nagpur by Patle *et al*<sup>(19)</sup> found that 63.38% girls in urban area were aware of menstruation before menarche as compared to 47.57% girls in rural area. While study done by Gupta *et al*<sup>(10)</sup> found that 68% of adolescent girls were not aware about menses before menarche.

In present study there is a significant difference (p value <0.005) between urban and rural area regarding various parameters of knowledge, attitude and practices of menstruation and its hygienic practices. Girls from urban area were well aware of menstruation rather than rural area reason could be literacy, mass media communication and health care facilities availability is more in urban area.

76% of girls from urban area and 65.3% from rural area had correct knowledge of cause of menstruation. Significant difference (p=0.002) was noted between use of sanitary napkins in urban and rural area (82% urban girls and 66% of rural girls) which is consistent with the study done by Paria *et al* (2014)<sup>(11)</sup> where only 22.18% in urban and 18.42% in rural had correct knowledge of cause of menstruation. 64% girls in the urban and 45.11% girls in the rural area used sanitary napkins. While study done by Wasnik *et al* (2015)<sup>(12)</sup> reported that only 33.5% girls use of sanitary pads during menstruation. Study done by Narayan *et al*<sup>(13)</sup> found that only 1.7% girls in the rural area and 8.3% girls in the urban areas used commercially available sanitary pads. Also study by Thakre S. *et al* (2011)<sup>(14)</sup> shows that majority of girls had knowledge about the use of sanitary pads. Sanitary pads were used only by 49.35% of the selected girls.

85.3% from urban and 73.3% from rural knew about sanitary pad disposal and 90% from urban and 76% from rural knew about the frequency of sanitary pad usage, which is consistent with the study done by Gothankar *et al* (2015)<sup>(15)</sup> where maximum number of girls (86%) changed the napkins twice or thrice in a day and sanitary pads were disposed sanitarily by 96% of girls.

Present study found that hygienic practices are more

satisfactory in the urban area as compared to rural ones (P = 0.008). It was also found in the study done by Patle *et al*<sup>(18)</sup> that hygienic practices are more satisfactory in the urban area (62.03%) as compared to the rural (43.40%).

Udita corners provide low cost sanitary pads easily available to all girls thus promoting the healthy menstrual practices and information regarding menstruation. Doubts and myths related to menstruation solved and easy one to one communication is going on which remove all the social taboos related to menstruation. It is very helpful initiative by government of Madhya Pradesh delivering through the platform of ICDS by Anganwadi workers playing key role. Likewise other ongoing projects as in Adolescent Reproductive and Sexual Health (ARSH)<sup>(15)</sup> component under RCH II wherein sanitary napkins supplied by the Government of India. Procurement of sanitary napkins, whether through Central supply by the Government of India, or through SHGs, has to be done at a fixed price of Rs. 7.50/- per pack of six sanitary napkins. The sanitary napkins are provided under NHM's brand, 'Freedays'. These napkins are being sold to adolescents girls at the rate of Rs. 6 per pack of six napkins by Accredited Social Health Activists (ASHAs).

In Telangana Government<sup>(16)</sup> will supply free sanitary napkins to adolescent girl students of government high schools and junior colleges so that they do not have to skip classes during their menstrual cycle. In Tamil Nadu<sup>(17)</sup> Department of Public Health launched the menstrual hygiene in Coimbatore, covered one lakh girls. At the schools the teachers concerned give three packs of six pads every two months to every student. This programme also conducts awareness programme through the nodal teachers, village health nurses and by way of the school health awareness programme.

The qualitative findings from the study elicit that there is a gradual and healthy perception among the Adolescent Girls through the Scheme.

#### Conclusion

Although, schemes similar to Udita project are started in some states, if implemented effectively across the country, it would contribute greatly to create increased awareness of menstrual hygiene and ultimately healthy population of women in the future.

**Conflict of interest: None declared**

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