

Knowledge and Practice on Menstrual Hygiene among Reproductive Age Groups in Birendranagar Municipality, Surkhet, Nepal

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ABSTRACT

Introduction: Reproductive aged group is usually defined as 15-49 years. There are many regions in Nepal where women of childbearing age are uneducated and unaware of how to manage menstrual hygiene. The main aim of this study was to identify the level of knowledge and practice of menstrual hygiene among Reproductive Age Grouped Women of Birendranagar Municipality-8, Karnali Province.

Methods: A descriptive cross-sectional study design was done among 373 reproductive aged women of ward no. 8, Birendranagar Municipality, after taking ethical approval. Participants were recruited through systematic random sampling. Data was collected by using a semi-structured questionnaire via face-to-face interviews. All the extracted data were entered and analysed using SPSS version 20, where descriptive analysis was done and presented using frequency and percentage.

Results: In overall, 88.7% were found properly practising menstrual hygiene with great access to toilet(100%) and water facility(99.5%). Only half (48.3%) of the respondents were found to have adequate knowledge on menstrual hygiene where most of the respondents were taught about menstruation by their mother(42.1%).

Conclusions: Despite the good level of practice of menstrual hygiene, the knowledge of menstrual hygiene was still lacking. This indicates the need of awareness on menstrual hygiene practice.

Keywords: *Knowledge; Menstrual Hygiene; Nepal; Practice.*

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INTRODUCTION

Owing to the fact that it is a natural occurrence, menstruation is being dealt with secrecy in many parts of Nepal. This natural phenomena is nevertheless stigmatized as 'secret' and rarely mentioned. Menstruating women in Nepal are subject to social taboos.¹

One extreme form of menstrual seclusion practice called Chhaupadi is still a common social tradition in the far and mid-western hills and mountain.² Similarly, Relatives and teachers don't respond about the needs of girls and women during their menstruation. There is scarcity of private latrines with clean water for girls and women in both school and communities.³

Very few studies have included the detailed aspects of the menstrual knowledge and practices among reproductive age group in Nepal. In this context, we aimed to identify menstrual hygiene practice among reproductive age groups in Birendranagar, Municipality- 8, Surkhet, Nepal.

METHODS

A descriptive cross-sectional study was done in the ward no. 8 of Birendranagar Municipality of Surkhet district. We obtained ethical clearance approval from the Nepal Health Research Council (NHRC, Reg no. 3362/2019), Signed informed consent was taken from all the respondents and no any respondents were engaged forcefully to give the answers.

Study population were reproductive aged group residing in ward no. 8 of Birendranagar Municipality.

Sample size

Prevalence i.e 33.3% was taken from a study conducted in rural Nepal.⁴

$$n = Z^2 \times p \times q / d^2$$

where,

n=required sample size

d = margin of error (5%)

p=0.33

q=0.67

z= 1.96 at 95% level of confidence.

$$n = (1.96)^2 \times 0.33 \times 0.67 / (0.05)^2 = 339$$

$$\text{Total samples size} = 339 + 34 = 373.$$

Taking 10% non-respondent rate, the total sample size was 373. List of reproductive aged females were obtained from

Birendranagar Municipality. Participants were selected by using systematic random sampling.

Semi-structured questionnaire was used as a tool for this study and data was collected by taking face-face interviews from 373 respondents. The questionnaires were divided into two groups: Part 1: Demographic information, Part 2: Questionnaires related to knowledge and practice regarding Menstrual Hygiene Practice .

For assessing level of awareness, we had categorized awareness on adequately aware and inadequately aware. Altogether there were 5 dimensions to assess the total awareness level i.e., Experience of first menstruation, source of information, knowledge on menstruation before menarche, perception about menstruation, perception of sanitation during menstruation. The average score of knowledge on menstrual hygiene was 2.5. The score above 2.5 in the total score was considered as adequate knowledge while the score below 2.5 was considered as inadequate knowledge.

For assessing practice, we had categorized practice in good practice and bad practice. For calculating the total score, 10 dimensions were taken which include (Use during menstrual period, change of sanitary pads, access of water and toilet facility, frequency of change of sanitary pad, practice of using cloth, disposal of pads and clothes, cleaning of genitals , use for genital cleaning, and frequency of bath). The answers for multiple response questions were again recoded by calculating the mean value of each. The average score of practice of menstrual hygiene was 3. The score above 3 in the total score was considered as good practice of menstrual hygiene and the score below 3 was considered bad practice of menstrual hygiene.

Reliability of the tools was assured by pretesting with 10% of the respondents of the total sample size and necessary modification were made accordingly. Collected data were entered and analysed in SPSS version 20. Descriptive analysis was done and presented using frequency and percentage.

RESULTS

Out of 373 respondents, 88.7% were found to have good practice on menstrual hygiene where only 48.3% were found to have adequate knowledge on menstrual hygiene.

Table 1. Knowledge and Practice on menstrual hygiene (n=373)

Characteristics	n (%)
Knowledge	
Adequate	180 (48.3)
Inadequate	193 (51.7)
Practice	
Good	331 (88.7)
Bad	42 (11.3)

Out of the total respondents(n=373) participated in the survey, one fourth of the women were of the age group 20-24 years where most of them were married (61.1%). About three fourth of the women belonged to the nuclear family. Almost all were literate except 8% of the respondents. Similarly, the educational status of mother and father's of the respondents was not much good.

Table 2. Socio-demographic variables (n=373)

Characteristics	n(%)
Age	
15-19	74(19.8)
20-24	101(27.1)
25-29	52(13.9)
30-34	55(14.7)
35-39	32(8.6)
40-45	59(15.8)
Marital status of women	
Unmarried	128(34.3)
Married	228(61.1)
Widow	17(4.6)
Type of family	
Nuclear	269(72.1)
Joint	85(22.8)
Extended	19(5.1)
Status of education	
Illiterate	30(8.0)
Literate	45(12.1)
Primary level	133(35.7)
Secondary level	62(16.6)
Diploma	67(18)
Graduation	36(9.7)
Mothers education status	
Uneducated	193(51.7)
Primary level	124(33.2)

Secondary level	35(9.4)
Diploma	7(1.9)
Graduated	14(3.8)
Fathers education status	
Uneducated	110(29.5)
Primary level	136(36.5)
Secondary level	58(15.5)
Diploma	28(7.5)
Graduation	41(11.0)

Almost half of the women were of 13-15 years age when they experienced menstruation for the first time. About 3/4 of the girls knew that menstruation was a physiological process where most of them got to know about the menstruation through their mothers(42.1%). Almost all knew that the sanitation was an important aspect (99.7%) to protect from infection(39.5%).

Table 3. Knowledge of menstruation (n=373)

Characteristics	n (%)
Experience of first menstruation	
10-12 years	65(17.4)
13-15 years	172(46.1)
16 years	79(21.2)
Above 16 years	57(15.3)
Source of information about menstruation	
Mother	157(42.1)
Teacher	85(22.8)
Relatives	105(28.2)
None	26(7.0)
Perception about menstruation	
Simple process	106(28.4)
Disease	5(1.3)
Physiological process	262(70.2)
Perception about sanitation during menstruation	
Sanitation is important	372(99.7)
Sanitation isn't important	1(0.3)
Perception about reason of sanitation during menstruation	
To protect from infection	149(39.9)
To protect from women specific diseases	168(45.0)
To prevent rashes	43(11.5)
To protect from infertility	13(3.5)

Maximum of them used sanitary pads (42.1%) with least use of cloth (16.5%). Access to toilets (100%) and water facilities (99.5%) during menstruation was found very high. Maximum of them changed 2-3 pads per day. About half of the women used cloth by washing and reusing along with proper disposal of pads and clothes in the dustbin (41.6%). Almost all of them cleaned their genitals on a daily basis (92.2%) with water (48.3%).

Table 4. Practice of menstrual hygiene (n=373)

Characteristics	n(%)
Bath during menstruation	
Yes	373(100)
Frequency of bath	
Twice daily	49(13.1)
Once daily	193(51.7)
Alternate days	131(35.1)
Use during menstruation	
Cloth	99(26.5)
Sanitary Pad	157(42.1)
Both cloth and sanitary pad	117(31.4)
Access of toilet facility for menstruation	
Have access	373(100)
Access of water facility for menstruation	
Have access	371(99.5)
Don't have access	2(0.5)
Frequency of change of sanitary pad per day	
2-3 per day	175(46.9)
Less than 2 per day	57(15.3)
4-5 per day	141(37.8)
Use of cloth	
Washing and reusing	52(52.8)
Using new cloth	47(47.2)
Disposal of pads	
Latrine	62(16.6)
Open Field	13(3.5)
Dustbin	155(41.6)
Pits	143(38.3)
Cleaning of genitals	
Always	359(96.2)

Sometimes	14(3.8)
Use for genital cleaning	
Soap and water	160(42.9)
Only water	180(48.3)
Antiseptic cream	33(8.8)
Disposal of sanitary materials by wrapping	
Yes	291(78.0)
No	82(22.0)

DISCUSSION

The primary purpose of this study was to assess the knowledge and practice on menstrual hygiene among reproductive aged group.

A study conducted in Chitwan among adolescent girls of age 13-15 years showed lack of maintenance during menstruation. Only 6.0% of girls knew that menstruation was a physiologic process. Ninety-four percent of them used the pads during the period. Overall knowledge and practice were 40.6% and 12.9% respectively.⁴ While in our study conducted among 15-45 age groups girls and women, 70.2 % of women and girls knew that menstruation was a physiologic process. 42.1 % used pads during menstruation and. Overall adequate knowledge and practice in our study were 48.3% and 88.7% respectively. The menstrual hygiene practice of our study was very good. This might be due to difference in study population.

In the article, "Menstrual Hygiene Matters" published in 2012, showed that to manage menstruation, the girls and women should have access to water and sanitation. Lack of proper access to products, facilities, education and social support were the barriers for menstrual hygiene management. Many cultures have beliefs on menstruation due to which girls and women live difficult lives. For example: In some cultures, women and girls are told that during their menstrual cycle they shouldn't bathe (or else they will become infertile).⁵ In our study, the girls and women had good access to water and sanitation. 100% of them had access to toilets and 99.5% of them had access to water for menstruation. Access of products, facilities and social support were high in our study due to which there was a proper practice of menstrual hygiene. 100% of women and girls bath during menstruation. A study conducted in Addis Ababa carried out among 770 adolescent school girls showed that 70.1% and 51.3% respondents had good

knowledge and practice of menstrual hygiene respectively.⁶ Similarly, a study conducted in Saudi adolescent girls regarding menstruation and hygienic care found that level of menstrual knowledge scored 47.36% and self-hygienic care practices scored 94.9%. It reported that well prepared, planned and implementation of a menstrual health education program will support in hygienic care practices and quality of life.⁷ In our study conducted among 15-45 age women and girls, the level of menstrual knowledge scored 48.3% while level of menstrual practice scored 88.7%. Therefore, there is a need of menstrual health education program in our study area so as to increase the knowledge of menstrual hygiene. In the article, "Perceptions and practices about menstrual hygiene among women of reproductive age groups attending out-patient department of CIMS, Bilaspur Chhattisgarh India", published in 2018 reported 36% of the study population of age 21-30 years. About 75% were married. Majority of women had primary education (43.3%). Majority of women 51.8% used cloth during menstruation; about 45.7% used the same cloth by washing and reusing every month. Most women were found to follow unhygienic practices. Hence, efforts such as improving female literacy and health education regarding the various risk factors should be made by the policy makers to increase menstrual hygiene among rural population.⁸ While in our study conducted in 15-45 age groups women and girls, 61.1% were married. Majority of girls and women had Primary education (35.7%). Majority of women used sanitary pads (42.1%) during menstruation. 52.8% of respondents used pads by washing and reusing each month. Most of them followed hygienic practices.

In the article, "Menstrual hygiene among women of reproductive age in Rural area Lahore, Pakistan" published in 2018, the attitude of the community towards menstrual hygiene and the awareness of its health consequences was highly ignored. It was found that rural communities have illiteracy regarding health risk for offspring due to menstrual hygiene. It showed the need for women to be educated about MHM and significance of menstruation and use of satisfactory absorbent material to lead a healthy life. 80.4% procured learning with respect to menstruation from their moms.⁹

CONCLUSIONS

The majority of reproductive age group females had inadequate knowledge about menstruation. This highlights the need for appropriate awareness-

raising and advocacy initiatives to reproductive age group females' understanding and encourage safe sanitary practices during menstruation.

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Not Applicable

CONFLICT OF INTEREST

None

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