

# Menstruation Hygiene Management among Adolescent School Girls in Kathmandu, NEPAL

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**Abstract::** The main objective of the study is to find out the situation of **menstruation hygiene management** (MHM) among adolescents school girls in Kathmandu valley .This study is based on cross-sectional descriptive research design. A total 270 students of basic schools of class 6, 7 and 8 were selected through census method. Majority of students 260 (96.29) had their menstruation started at the age of 10 to 14 years, only 10 respondents (37%) had their menstruation started at the age of 14 to 15 years. The source of information about menstruation were mainly from mother 76 (24.81%),friends 99(36.67%) and likewise 10(3.7%) relatives,25(9.2%) healthworkers, teacher 15(5.5%) respectively. Majority of the students 74% did not have problems during menarche while 25.59 percent have different types of problems.

**Keywords:** Adolescent girls, menstrual hygiene, biological, stigma, privacy

**Objective:** To access the status of knowledge and practices of menstrual hygiene management (MHM) among adolescent girls

## **Research questions**

1. What are the issues of menstrual hygiene management of school girls in terms of their knowledge and management?
2. Are schools in Nepal menstrual hygiene friendly?

## **I. BACKGROUND**

Menstruation is a natural process of every girl,it is a biological phenomenon. It is a sign of being healthy and adolescent girl's way into womanhood and fertility. Each girl and woman menstruates approximately 3,000 days in her reproductive life

and quarter of them menstruates every month starting between the age of 11-16 years and ending between the age of 45 -50 years (Ahmed and Yesmin, 2008). Adolescence is a critical period characterized by significant physical, emotional, cognitive and social changes and monthly occurrence of menstruation and adolescent girls. Menstrual hygiene management has been defined as women and adolescent girls using a clean menstrual management materials 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 for disposal of used menstrual management materials (UNICEF 2015). Due to increasing girls' enrollment in schools preparedness to ensure a menstrual friendly environment is crucial. According to UNICEF 2018, inadequate menstrual hygiene management (MHM) among adolescent girls, mainly in low and middle -income counties with over 0.6 billion adolescent girls (8% of the world's population), the issue of menstrual hygiene by the virtue of its magnitude is an issue of global concern. Menstrual hygiene management (MHM) is a problem for adolescent girls in low and middle income countries (LMICs) particularly when attending school has poor water, sanitation, and hygiene (Wash), inadequate puberty education ,and lack of hygiene facilities in schools (UNICEF, 2014). UNICEF work s to improve girls' and women's menstrual health and hygiene in four areas: Social- support, knowledge and skills, facilities and services and access to absorbent materials and supportive supplies.

*"No More Limits – Empowering Women and Girls Through Good Menstrual Hygiene"*  
(WHO Slogan of World Menstrual Day, 2016)

The average age of menstruation in the context of Nepal is 13.5 years old.

Menstruation is generally considered unclean and shameful. The Nepal demographic health survey 2011 revealed that the top ten sexual and reproductive health issues are concerns and identified by teenage girls: seven were menstruation related. Many of the girls concerns relate to why physical change occurs, what is normal and the consequence of puberty. This lack of knowledge is echoed by the fact that almost a quarter of teenage girls had no idea what menarche was prior to its onset ,and only 36 percent reported that menstruation was a monthly cycle where blood flows from vagina for 4-5 days (MOH ,2012).

Health is the state of complete physical, mental and social well-being and not merely in the absence of diseases or infirmity (WHO,1964). WHO has defined adolescence as the age group from 10 to 19 years. Adolescence is a transition period from childhood to adult life during which pubertal development and sexual maturation takes place , thus making physiological development a challenge adolescent have to face . There is a substantial lacuna in the knowledge towards menstruation among adolescent girls.

According to Deshpande T.N. (2018), adolescence has been recognized as a special period that requires specific attention as it marks that onset of menarche as an important milestone and hence goodhygiene practice during menstruationiscrucial to maintain a healthy life. Menstrual hygiene management (MHM) refers to management of hygiene associated with the menstrual process.

WHO and UNICEF (2012) joint monitoring programme (JMP) for drinking water, sanitation and hygiene has used the following definition of MHM:

“Women and adolescent girls are using a clean menstrual management materials to absorb or collect menstrual blood that can be changed in privacy as often as necessary for the duration of a menstrual

period ; using soap and water for washing the body as required and having access to safe and convenient facilities for disposal of 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.”

Nepal being a signatory to the Delhi Declaration 2008: Sanitation for Dignity and Health in the Third South Asian Conference on Sanitation (SACOSAN),needs to make major efforts to ensure the special needs of women (e.g.menstrual hygiene management ) are integrated in planning, implementation, monitoring and management of (sanitation) programme outcomes (The Delhi Declaration ,SACOSAV-III 2008).

## II. METHODS

This study was based on three government schools of Kathmandu -16. A cross –sectional and descriptive design was employed with 270 girl students which were studying on grade 6,7,8, classes of selected schools. In this study the schools were selected purposively and students were selected using census method and information was collected through self-administered questionnaires.

*Age at menarche.* Menstruation starts in puberty age but in some cases this process starts in adolescents because of heredity, diet and other factors. The situation is shown below.

**Table 1: Number of the respondents according to age groups**

Age of menarche	No of respondents	Percentage
10-12 years	135	50
13-14years	125	46.29
14-15	10	3.7

Table 1 shows that more than fifty percent started their menstruation at the age of 10-12,whereas 46.29 % started in 13-14 years and 3.7% started at the age of 14-15 years.

According to participant response they feel psychologically stressed, shy and nervous with onset of menarche. So in order to well manage about menarche they should know about menstruation. The source of knowledge about menstruation before their first menarche is shown in following table:

**Table 2: Knowledge or source of information on menstruation hygiene menarche.**

Source of information	No of respondents	Percentages
Mother	76	24.81
Friends	99	36.67
Relatives	10	3.7
Health workers	25	9.2
Teachers	15	5.5
Total	270	100

The table above shows the number and percentage of informants who provided knowledge to the students about menstruation. The biggest source of information about menstruation are their friends (36.67%) while they get the information from their mothers, relatives, health workers and teachers as well.

At the time of menstruation, some adolescent girls become absent from their school. The cases of being absent were as follows:

**Table 3: Number of students absent in school during menstruation**

Absent	Number	Percent
Yes	25	9.2
No	245	90.7
Total	270	100
Feeling discomfort	10	40
Excessive bleeding	5	20
Afraid of staining	7	28
Socio cultural factors	3	12

The table above shows that 25(9.2%) girls became absent in school during menstruation, whereas (90.7%)

245 students were not absent in school during their period.

During menstruation girls face different kinds of problems those problems are shown in the table below:

**Table 4: Types of health problems during menstruation**

Problems	Yes	70	Percentage	35.9
	No	200		74.1
Total		270		100
Abdominal pain	20			10
Excessive bleeding	25			12.5
Headache	15			7.5
Backache	5			2.5
Psychological fear	5			2.5

The table shows that the (74.1) % 200 girl students say that we have no problems during menarche. The few (35.9) % 70 girls students faces different problems like 25 students have excessive bleeding, 20 have abdominal pain, 15 have headache, 5 have backache, 5 have psychological fear accordingly.

There are different types of restrictions during period due to socio-cultural factors, religion, value, and beliefs which are shown in the following table

Among 270 respondents, 235(87.03%) of adolescent girls had to go through family restrictions whereas 35(12.96%) of them were not having any restrictions.

**Table 5: Restrictions on family practices during menstruation**

Restriction	Number	Percentage
Yes	235	87.03
No	35	12.96
Total	270	100

The table above shows that 87.03 percentage of students have restriction during the menstruation time while 12.96 percentage have not.

**Table 6: Restriction in society**

Social restrictions	Number	Percentage
Do not attend religious function	135	57.44
Do not go to cook	70	29.78
Do not touch males	15	6.38
Sleep separately	15	6.38
	235	100

The table above shows the number and percentage of social restriction. It shows that the biggest restriction is in religious events.

### III. DISCUSSION

The study shows that the students trust and share with their friends than their mothers (36Vs24 percentage). In this there is a study required why they don't share with their mothers well.

Similarly, the absenteeism during menstruation looks high ( 9.2 percentage) and the cause should be discussed in the future studied.

Moreover, cause of family restrictions in the social events should be discussed more in the future studies.

### IV. CONCLUSION

Changing in existing socio-cultural norms about menstruation and proper education, information and services are essential to achieving health related MDG- goals. Menstruation is a natural process which is regarded as symptom of puberty. Menstrual hygiene management remains taboos in many communities in Nepal. Most of respondents were familiar about

menstrual hygiene but some girls didn't know how to manage during menstruation. This study has tried to highlight the needs of the adolescent girls to have accurate and adequate information about menstruation and its appropriate management.

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