



A study of knowledge and practices regarding menstruation among the females of Nowshera block of Rajouri district in Jammu and Kashmir

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Abstract

Menstruation is an important part of the lives of females. All females go through the process of menstruation. In a developing country like India, menstruation is a big issue for the development practitioners as majority of the females are either not aware about the hygiene and sanitation linked to safe menstrual practices or even do not have access to safe sanitary napkins. The present paper is a study aiming at understanding the knowledge and practices regarding menstruation among the females of Kalsian and Chowki villages of Nowshera block of Rajouri district in Jammu and Kashmir. The paper seeks to assess the levels of knowledge, attitude, practices of menstrual health and hygiene among the women and girls besides understanding their menstrual health issues related to education and cultural beliefs.

Keywords: menstrual hygiene, menstruation, menstrual practices, menarche

Introduction

Hygiene and sanitation are development issues that have long been overlooked by respective governments. However, as a result of sustained advocacy efforts, these issues are now at the very top of the global and national agenda today. Menstrual hygiene is complex issue which brings issues of personal hygiene, sanitation, water supply, health, education, environment and gender. Girls and women want to live healthy and productive lives with dignity and menstrual hygiene should be a priority for them but due to certain unfavorable circumstances, they suffer a lot. In many areas, there is a complete neglect of menstrual hygiene due to low awareness levels and lack of access to sanitary products. Menstruation and menstrual practices are still clouded by taboos and socio-cultural restrictions resulting in adolescent girls and women remaining ignorant of the scientific facts and hygienic health practices which sometimes result into adverse health outcomes. Differences by country, culture, ethnic group, social class or family, the oppression of women has its effect on issues concerning reproductive health and other issues related to the menstrual health, reproductive system and its functions and processes. Women and girls have many restrictions over their own mobility and behavior during menstruation due to their 'impurity' during menstruation including the myths, misconceptions about menstrual cycle, superstitions etc.

Menstrual health: global context

Menstruation is a major part of the lives of millions of young girls and women worldwide. On an average, menstruation will be part of a woman for 3,000 days during her lifetime. Over 500 million females globally lack adequate facilities for catamenial (the monthly discharge of blood from uterus of non-pregnant women from puberty to menopause) hygiene management. Lack of water, sanitation and hygiene facilities particularly in public places such as in schools, work places or health centers can pose a major obstacle to women and girls' health. Inadequate separate toilets or the unavailability of means to dispose of used

sanitary pads and water to wash hands means that women and girls face challenges in maintaining their menstrual hygiene in a private, safe and dignified manner. These social, economic, political and cultural ideas still play a role in several cultures as a result of which many women and girls get various restrictions imposed on them during their menstrual periods.

Menstrual health: Indian context

It is an estimated that 355 million Indian women and girls don't find any ways to cope up with monthly menstrual hygiene. Most of these women are those who don't either have access to toilets or have to face the traditional taboos and myths related to menstruation and social discrimination due to menstrual cycle. A total of 71% of women and girls in India are either unaware about menstrual hygiene before their first period or even after their periods. Moreover, these women and girls don't have proper access to toilets and others means during periods and have to usually wait until night time before using public toilets or fields, which can expose them to various forms of physical violence. The challenge faced by many young women and girls as they struggle to manage their menstrual hygiene are largely ignored especially in developing countries like India where still millions of people search for food for two times a day. In India's social and cultural fabric, even mere mention of the topic periods, menstrual health or menstruation has been a taboo even in the past and even till date, the cultural and social influences appear more resistant to scientific approach to deal with the issues. Many girls and women are subject to several restrictions in their daily lives merely because they are menstruating and hence, they become impure for five days. Menstruating girls and women are also restricted from prayers and touching and reading holy books. The basis for this myth is also the cultural beliefs of impurity as the general belief is that menstruating women are unhygienic and thus if they prepare a meal or enter the kitchen or handle anything, it can get contaminated.

Menstrual health: Jammu & Kashmir context

Jammu and Kashmir is a socially, culturally and economically backwardness region whose geographical location isolates it further from the rest of India. The levels of literacy coupled with limited economic avenues make it very difficult for the people of the rural areas to meet their basic requirements of life. Women of the state are faced with restrictions related to dietary intake where they are prohibited for taking some specific foods during their monthly menstrual cycle. All of them also face prohibitions related to religious activities such as praying, reading religious books, fasting, going to shrines or temples.

Area of study

Jammu and Kashmir is regarded as the crown of India and situated in the Himalayas in the north of India. It has 20

districts out of which, Rajouri is a border district in Jammu province situated very close to the Line of Control with Pakistan. It comprises of 13 tehsils and 9 blocks most of which are rural in character. One of Rajouri district's tehsil is Nowshera located on the Manawar Tawi river just four kms inwards from Jammu-Poonch. It is Nowshera is situated 124 kms from Jammu and 45 kms from Rajouri. Nowshera is not only tehsil headquarter but is also name of its Tehsil which is a growth centre. Nowshera tehsil having a population of 82,000 (Census 2011), comprises of 58 villages. It has an average literacy rate of 79% which is higher than the national average of 68%. Male literacy is 82% while female literacy is 76. Chowki and Kalsian are one of the two villages out of 58 villages in Nowshera which are at a distance of 15 km from the main Nowshera and merely 2.5 km from the Line of Control.



Fig 1

Chowki and Kalsian villages

Chowki is a border village of Block Nowshera having an area of 1,612.70 hectares. The number of households in the village is 951 out of which 30 % are below poverty line. The total population of village is 4,129 out of which male population is 2,151 and female population is 1,978. The literacy rate of village is 33% out of which male literacy rate is 66 % and female literacy rate is 37%. Kalsian village is

also west of Nowshera having total area of 1,169.60 hectares. The number of households in villages is 509 out of which 25% are below poverty line. The total population of village is 1,880 out of which male population is 922 and female population is 958. The literacy rate of the village is 31% out of which the male literacy 61% while female literacy is 39%.

Objectives of the present study

1. To assess the levels of knowledge, attitude, practices of menstrual health and hygiene among the women and girls of Kalsian and Chowki villages of Nowshera block of Rajouri district.
2. To explore menstrual health issues related to education and cultural beliefs.
3. To study the challenges faced by women in managing menstrual hygiene.
4. To suggest different measures for managing good menstrual health

Rationale of the study

Women comprise almost half of the total population of India. Health of the women is the health of the nation also this. This years' Global Gender Gap Index ranks India at third lowest in the world on health and survival. Health of woman also includes her menstrual health. As per National Family Health Survey 2018, a whopping 62% of young women in country use cloth for menstrual protection. In our country, most of the girls are not ready and prepared for their first menstruation. Though the girls experience physical and emotional changes after entering their teenage or even before, they are not told by their parents about any such changes and its consequences include unhealthy development of girl child. There is a culture of silence in most of our families regarding menstruation. The young girls have lack of information about these practices. Even in schools or colleges, such practices are not discussed and the infrastructure available is not at all helpful to these young girls. Even for the grown-up women, there is lack of adequate menstrual protection alternatives or clean, safe and private sanitation facilities in their homes. This information is quite critical to the health of women and young girls.

Since the misconceptions about menstrual practices persists in our society among girls and women in all age groups irrespective of their cultural and social norms, therefore it is important to study their menstrual practices and explore if the girls and women of border area of Chowki and Kalsian villages in Nowshera are adapting good menstrual hygiene practices or not and what are the challenges being faced by them.

Methodology

The research is based on both primary and secondary sources. The researcher travelled to village Kalsian and Chowki of district Rajouri and took interviews of many women and adolescent girls for the study. A detail questionnaire was prepared for primary sources who were contacted in the field for the present research paper. Besides, secondary sources including various government documents, reports, books, research papers in journals, magazines and periodicals were consulted thoroughly for the study. A total of 50 respondents were taken for study. Data was collected through a questionnaire in which 50 respondents (both women and girls) were covered. The tools used included a self-constructed questionnaire and focused group discussions

Results and discussions

As mentioned above, the study was conducted on 50 respondents, both women and girls, in border district of Rajouri of which 30% of the population was young and their menstruation process had started just few years ago. Another 32% of the population was from the age group of

25 to 35 and while another 32 % fall in the age group of 35 to 45. Only 6% of the population was above 45 years of age. Thus, the respondents were chosen in the way that all the population of the menstrual girls and women got covered and thus a wide range of menstrual practices starting from young girls to older women can be found out in different age groups. The women who are above 45 are the ones who haven't attained menopause yet. Besides, 58% of the respondents were literate while 42% of them were illiterate. As it is well known that education can be a biggest tool for transformation and behavior change by changing the thinking process of the individuals, hence by having both literate as well as illiterate respondents, the researcher could know if there are any differences in the menstrual practices among literate people and illiterate. Education the only tool through which one can know how to maintain good and healthy menstrual practices. Besides, 46% of the respondents were home makers and same percentage of the respondents was students while only 8% of the women were employed in various government or private run institutions. Taking individuals from different occupations helped in understanding the differences in maintaining menstrual hygiene practices between the people of the same area but with different occupations. As it is a common believe that people who are employed and those who are learning, have more knowledge regarding these things as they are literate and are aware about the scientific reasons behind the menstruation and maintaining good menstrual hygienic practices.

Table 1: Knowledge of menstruation before menarche

Response	No. of respondents	Percentage
Yes	30	60
No	20	40

The above-mentioned table depicts that 60% of respondents had knowledge of menstruation before menarche. The respondents who had knowledge were between the ages 18-30 years and were literate while 40% of respondents didn't have any such knowledge and 90 % of these respondents were of age over 35 years of age. It shows that education is prime factor in having knowledge of menstruation before Menarche. Educated respondents informed that they had knowledge of menstrual cycle even before menarche and thus this made them well prepared for their first periods. Respondents who didn't have any knowledge about menstrual cycle at menarche also did not have knowledge of even menstrual good hygiene practices and management. The dark side of survey is that some families still don't want to talk about menstruation with their girls before menarche and this has definitely impacted their mindsets and their menstrual practices too. For those girls who know about periods, this knowledge comes from their mothers or sisters, books and all other students. This also throws light on the fact that in our education system, there is no dissemination of knowledge about periods in the schools. The role of school teachers in giving information about menstruation is also very important and spreading awareness among the girls about maintaining good menstrual practices as teachers can prepare them better to know about the scientific reasons behind it and thus to maintain good practices during their periods.

Table 2: Knowledge and awareness of scientific reasons behind menstruation

Response	No. of respondents	Percentage
Yes	27	54
No	23	46

The above-mentioned Table depicts that 54 % of the respondents have scientific knowledge about menstruation out of which 92 % are literate. It shows that education is primary source of knowledge for respondents to understand scientific reason of menstruation. About 46 % of respondents who don't know about scientific reason of menstruation are illiterate. Respondents who understand that the scientific reason behind menstruation is attainment of puberty, depicts that they are aware of menstrual periods. These respondents are literate and have scientific knowledge of menstrual cycle. About 46% of respondents who say that they don't know about the scientific reason behind menstruation are illiterate and have no knowledge about menstrual health and hence don't know about the harmful effects of unhygienic menstrual practices. Those respondents who have normal menstrual periods don't have any difficulties during periods but those who have irregular periods face a lot of problems. Even in some cases they are hospitalized. Most of respondents who have abnormal periods say that it may be due to the weakness and blood loss but most of them do not even feel the need to go for checkup regarding it. Thus, this shows that almost one fourth of the women have irregular periods and this impacts them in their future and may be during child birth too as it is known that maternal death rate in India is very high. The respondents also understand menstruation hygiene management and consider it as important for good health and for quality life. Those who don't know about menstrual hygiene management are illiterate and are not aware of advantages of menstrual hygiene management.

Table 3: Practices during menstruation cycles

Response	No. of respondents	Percentage
Clothes	13	26
Sanitary pads	36	72
Menstrual cups	00	00
Others	01	00

The above-mentioned table shows that 72% of respondents use sanitary pads during their periods out of which 94% are above the age of 35 and are housewives. Most of respondents who use clothes during periods are below poverty line and due to high cost of sanitary pads; they are not able to afford it. The respondents inform that sanitary pads are often available, except in remote locations and different sizes and types are available in some locations. A total of 72% of respondents who use sanitary pads during periods are economically sound and well aware of benefits of menstrual hygiene. Respondents say that cost of sanitary pads prohibits many potential users. None of the respondents use menstrual cups which show that the advance practices regarding menstrual practices have not reached their areas. Another 26% of respondents use clothes during periods as they feel that clothes are easily available in the local market and are reusable and most importantly, are cheaper than sanitary pads. However, respondents also feel that certain disadvantage of using clothes is also there as it has high risk of contamination and is difficult and uncomfortable to use.

Table 4: Usage of sanitary pads and frequency of changing cloth / napkins

Response	No. of respondents	Percentage
Yes	47	94
No	03	06

Table depicts that 94% of respondents who use sanitary pads during periods find them useful as they are more hygienic and absorbent. A total of 6% of respondents say that pads are not useful as these are not cost effective and not easily available and are not re-useable. Affording a sanitary pad is major hindrance for women to use it. Respondents say that due to absorbent ability of pads, they can feel confident as leaking of menstrual blood from cloth is considered a matter of shame for them. They change clothes/ napkins once or twice a day during periods. The respondents say that if they are using tampons, these must be changed once in two hours. But these hours cannot be generalized as it also depends on the quality of the sanitary napkin and individual needs. Some respondents say that they have a lighter flow and thus they change it only once a day. Changing napkins as per their requirement and quantity of flow is a practice but even in normal flow one needs to change napkin at least thrice a day which is not being practiced in most of the cases which depicts that good hygienic management is still not being practiced by the respondents.

Table 5: Disposal of sanitary napkins

Response	No. of respondents	Percentage
Wrap in a paper and burnt	30	60
Put in toilet and flush	08	16
Just throw away	12	24

Disposal of sanitary pads is a very grave issue and the respondents were not very open about it. They feel that improper disposal of used pads can lead to the contamination of the surroundings as badly-wrapped pads can provide a breeding ground for mosquitoes, flies, and many other objects which are carriers of diseases. They also believe that it can impact the people handling the waste as they can come in contact with menstrual blood if pads are not disposed hygienically and not wrapped properly. Besides, the dumping of non-biodegradable and non-recyclable waste is also an issue as most sanitary pads are made of plastics and do not decompose for years. Although all respondents say that they dispose it off using utmost caution but still all of them feel that proper disposal of pads is very important. A total of 60% of respondents says they dispose sanitary pads by wrapping it in some paper and burn it. They say that they feel shy by just throwing away pads as menstruation is their secret thing, they believe that by burning it, all infectious elements in are destroyed and thus do not impact the atmosphere. A total of 16% of them throw it in the toilet and flush it and 24% of respondents just throw it away as they feel it is easy for them. The respondents feel that they flush it in the toilet as it is easy to hide from rest of the family members. However, these pads clog the toilets and thus can create sanitation problem for the whole family.

Table 6: Discrimination and restrictions from social, cultural and other activities during menstruation

Response	No. of respondents	Percentage
Yes	26	52
No	24	48

Table No. 6 shows that 48% of respondents don't face any discrimination during menstrual cycle by their family members while 52% of respondents face discrimination during periods and are forbidden from participating in educational, cultural, social and economic activities during menstruation which shows that majority of them are facing restrictions. This discrimination is in the form of not allowing them to go to kitchen, temple, not allow them to touch pickle, stay at home, walk slowly, remain away from the family members, not to play with children as there is a myth that if a woman who is having her periods touch a baby, the baby may cry etc. The respondents who face restrictions in either going to kitchen or going to temple say that they also themselves do not feel good to go to temple as they relate it with impurity. They are not allowed to enter kitchens etc. as they are told that they are impure for five days. Sometimes the respondents also experience lot of issues including pain in the stomach, backache, weakness, heavy blood flow etc. which restrict them from participating in such activities and sometime its family and society which become hindrance in their entry to kitchen, temple etc.

Table 7: Menstrual hygiene practice should be taught in school/colleges

Total respondents (50)	Response	Percentage
Yes	40	80
No	10	20

Table 7 shows that 80% of respondents think menstrual hygiene practices should be taught in school/colleges as it is one of the best ways to curb all diseases related to menstrual unhygienic practice. Respondents say that scientific knowledge of menstrual cycle is must for women and girls even though they themselves do not practice good menstrual practices but want the same for their girls and feel these should be taught to them. It shows the changing mindset of the females with time. A total of 20% of respondents say that periods should be kept secret and hence there is no need to teach in schools or colleges.

Table 8: Shyness or fear to discuss about periods & hygienic practices related to it with family members

Response	Total respondents (50)	Percentage
Yes	49	98
No	01	02

Majority of the respondents (98%) inform that they feel shy and are scared to discuss about periods and related hygienic practices with male members of their family. They feel that they cannot talk on such matters with their male family members because they think that it is not in their culture to discuss these things with the males and these things should be kept secret from them and not discuss with male members and even if sometime there is a need of talking, one should talk with her husband only. Only one respondent informed that she doesn't feel shy or fearful in discussing about periods and hygienic practices with male members of her family. Besides, 100% of respondents say that they don't feel shy or fear to discuss about periods and related hygienic practices with the female members of their family. Respondents feel that they can talk on such matters with the females of their family members without any hesitation as they also have undergone with same process and they can understand them in better way.

Conclusion and recommendations

The present study threw light on the fact that perception on menstruation among women and girls is poor and practices often adopted are not correct in Nowshera. The socio-economic variables like the economic status of family or occupation of parents and education level of respondents or their mothers have a significant relationship with premenstrual problems and menstrual unhygienic practices besides their health implications also which significantly affect the behavior and practices of adolescent girls and young women. A certain section of women of age above the age of 35 are unaware of advantages of sanitary pads over clothes and hence uses clothes during period, which proves fatal for health.

Menstruation is still a taboo, a forbidden, a hidden, a shameful subject for a section of women, as some don't know scientific reason behind it; some of them still follow traditional means during periods. Adolescent girls and women almost always, silently suffer the pain and discomfort associated with it due to lack of knowledge about reproductive health due to social stigmas and It is probable this that also affects their performance in development activities. The findings of the present research study thus clearly indicates the enormity of the problem and the absolute need for appropriate intervention through a change in Social, cultural and Political thoughts. Menstrual hygiene practices should be taught in schools and colleges as most of respondents feel this as one of primary source for menstrual hygiene management. In schools and colleges adequate facilities of toilets can reduce the percentage of absent girls during periods as most of respondents who absents during consider lack of toilets as primary factors. Girls feel that they should be provided free sanitary pads as this can encourage girls to come in schools even during periods.

To ensure good menstrual hygiene, the government needs to take effective measures for welfare of health of females. There should be aware platforms for females related to menstrual health. The development of affordable sanitary napkins for menstrual hygiene of good quality should be there. There should be provision to provide menstrual hygiene protection material for free or at least at an affordable price particularly for the young girls who are starting to menstruate or have already begun their menstruation. This can be done at the school level too. They also need to educate on how to select or how to maintain personal hygiene while menstruating and how to safely dispose of supplies through proper education via books, seminars etc. Girls and women need to be instructed on how to track their periods so that they can prepare for their periods in good way. There is a need to focus on the building the capacities of our frontline workers including ASHA, Aanganwadi and Matrisamiti members by the government and also various NGOs working in the area so that they can teach illiterate women in a better way about maintaining good menstrual practices. For their behavior change, building awareness about the issue and its dangerous consequences is very important. The families especially the parents (both mothers and fathers) need to be told not to feel uncomfortable or ashamed about the issue and educate their daughters and sons about it as it can impact the whole life of female in future.

Cultivation of safe sustainable and good quality sanitation facilities at schools to full fill the special need of adolescent

girls and women. National and the policies and budgets must prioritize School Sanitation Hygiene Education so that good menstrual practices should be taught to them from the very beginning.

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