



Menstrual Hygiene and College Absenteeism among Medical Students, Gurugram

Authors

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Abstract

Menstrual hygiene has not received substantial attention thereby exposing the females to a gamut of diseases. Though menstruation is a physiological process, it is linked with various false practices and taboos. Dysmenorrhoea and premenstrual symptoms are known to restrict the activities of young girls and can also be an important cause of absenteeism from work and college. With this backdrop, the present study was conducted among medical students to assess the knowledge among medical students regarding menstrual hygiene and to determine the prevalence of college absenteeism during menstruation and find the prevalence of different pre menstrual symptoms.

Results: *The mean age of menarche was 13.38±1.28 years. Majority of the participants (82.31%) practiced good menstrual hygiene and had adequate menstrual hygiene knowledge.*

The prevalence of college absenteeism was found to be 45.38%. The main reason for college absenteeism was found to be pain & discomfort (36.92%). It was found that most of girls restricted some activities during menstruation the most common being restricted to visit temple (71.54%). Doctors being the main health care provider should have adequate knowledge about menstrual hygiene and should be an integral part in promotion of reproductive health in the community.

Keywords: *Menstrual hygiene, absenteeism, menstruation.*

Introduction

According to WHO, menstrual hygiene management (MHM) is the absorption of menstrual blood onto clean material which can be changed in privacy. It also incorporates the availability of soap and clean water, to wash reusable sanitary materials and the body, as well as a suitable place of disposal for used materials (WHO-UNICEF 2012). Menstrual hygiene is not just about the management of the menstrual period

but also the need to address societal beliefs and taboos surrounding the issue. Menstruation is associated with various misconceptions, myths and poor practices that can result in adverse health outcomes^[1]. Menstrual hygiene deals with the special care and requirements of women during their monthly cycle of menstruation^[2]. MHM is now an integral part of the Swachh Bharat Mission Guidelines (SBM-G)^[3]. The lack of knowledge and awareness lead to poor personal

hygiene practices, during menstruation, leading to RTIs.

Absenteeism is a term defined as “the practice of regularly staying away from work or school without good reason”^[4]. Dysmenorrhoea is seen to be associated with college absenteeism and restricted participation in various activities. According to studies dysmenorrhea is interrupting the educational and social life of girls.^[5] In the United States dysmenorrhea has been estimated to be the greatest cause of time lost from work and school^[6]. Doctors being main health care provider should have adequate knowledge about menstruation in order to promote reproductive health.

Objectives

1. To assess the knowledge, practices regarding menstrual hygiene among female medical students
2. To find prevalence of college absenteeism during menstruation.
3. To find distribution of symptoms of premenstrual syndrome.

Materials and Methods

The present study was a cross-sectional study which was undertaken in a medical college in Gurugram, Haryana, among the female medical undergraduate students. Study period was from Nov 2016 to Feb 2017. All students except examinee batch present on the day of data collection and giving consent were included in the study. Data was collected using a pre-designed, pre-tested, semi-structured, self-administered anonymous questionnaire with the details of age, age of menarche, knowledge about menstruation, practices and restrictions during menstruation, Pre-menstrual syndrome & college absenteeism during menstruation. To measure the subject's knowledge on menstrual hygiene, ten questions were used. Each correct response earned 1 point, whereas any wrong or don't know response was given no mark; the total score of knowledge was calculated (10 points). Respondents who scored

between 0-3 points were adjudged as having poor knowledge; whereas those who scored 4-8 were adjudged as having average knowledge and >8 as good.^[7] Statistical analysis was done using simple proportions,

Results

The mean age of study participants was 19.95 ± 1.41 years. The mean age of menarche was 13.38 ± 1.28 years. Majority of the participants (82.31%) practiced good menstrual hygiene and had adequate menstrual hygiene knowledge. The participants' knowledge of menstruation and its hygiene management was scored using a scoring system adopted from previous study.^[7]

Table 2 shows the level of knowledge among study participants regarding menstruation. Majority 82.31% of the participants had good level of knowledge, followed by 16.15% who had average knowledge and rest 1.54% had poor knowledge.

Table 3 shows the different practices during menstruation among study participants. Most of the girls followed good practices during menstruation including appropriate disposal of absorbent, regular changing of sanitary pads, cleaning of private areas etc.

The prevalence of college absenteeism was found to be 45.38%. The main reason for college absenteeism was found to be pain & discomfort (36.92%) followed by unhygienic toilets (21.54%), lack of water supply in toilets (13.85%), fear of staining (6.15%), lack of dustbin (1.54%) and lack of privacy in toilets (0.77%) as shown in figure 1.

Figure 2 shows the restriction of activities among study participants during menstruation. It was found that most of girls restricted some activities during menstruation the most common being restricted to visit temple (71.54%), inability to do sport (66.15%), 43.85% girls were unable to walk, 35.38% preferred to stay at home and 33.85% girls restricted to do daily activities.

Figure 3 shows the distribution of premenstrual symptoms among study participants. Irritability

was found to be the most common premenstrual symptom (80%) followed by mood swings (74.62%), fatigue, abdominal bloating, anxiety etc.

Table 1: Knowledge Regarding Menstruation among study participants

Questions	Percentage
Heard about menstruation before attaining menarche	76.15%
Feel comfortable to talk about menstruation	86.92%
Aware about the ideal age range of menarche	66.92%
Aware about the normal menstruation bleeding duration	80%
Knew normal duration of menstrual cycle	93.85%
Menstruation is a physiological process	99.23%
Role of hormones in menstruation	96.15%
Knew menstruation blood comes from Uterus	97.7%
Knew woman can't conceive during menstruation	92.31%
Aware sanitary pads are used as a menstrual soak up	98.46%

Table 2: Knowledge scoring among study participants regarding menstruation

Knowledge	Frequency	Percent
average	42	16.15%
good	214	82.31%
poor	4	1.54%
Total	260	100.00%

Table 3: Practices during Menstruation Among Study Participants

Practices	Percentage
Wash genitals daily	97.69%
Cleaning of genitals with soap or vaginal wash	83.08%
Cleaning of undergarments during menstrual days	97.69%
Cleaning of pubic hair	92.31%
Use of sanitary pad	98.46%
Dispose of absorbent in dustbin	99.23%
Washing of hands after changing absorbent	98.46%

Figure 1: Reasons for College Absenteeism during Menstruation

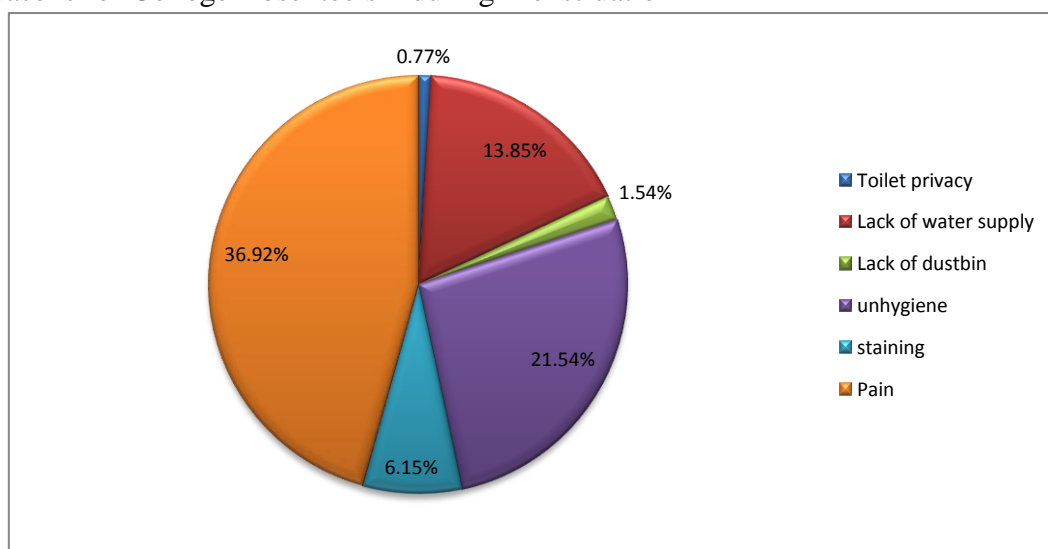


Figure 2: Activities Restricted During Menstruation among Study Participants

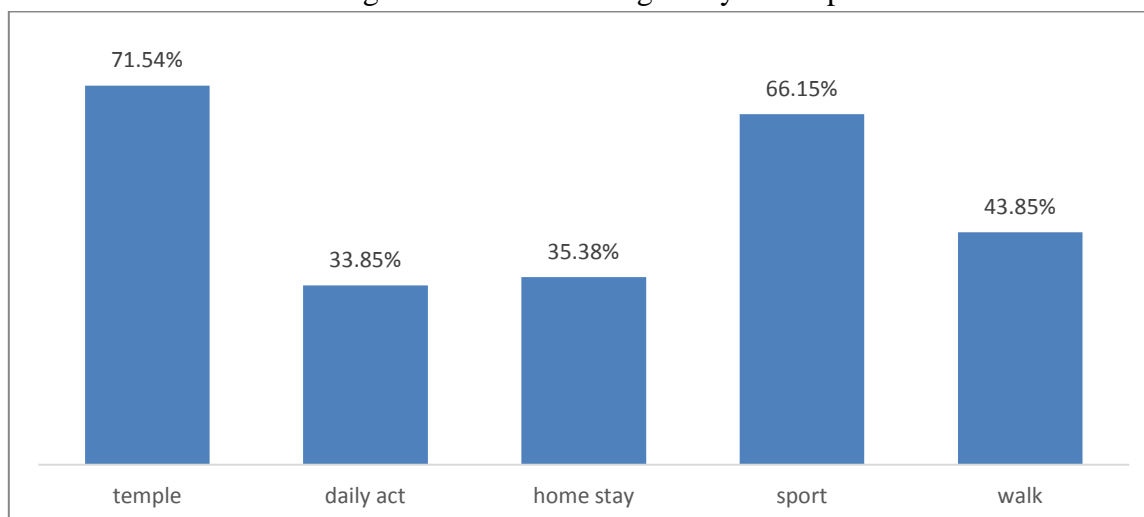
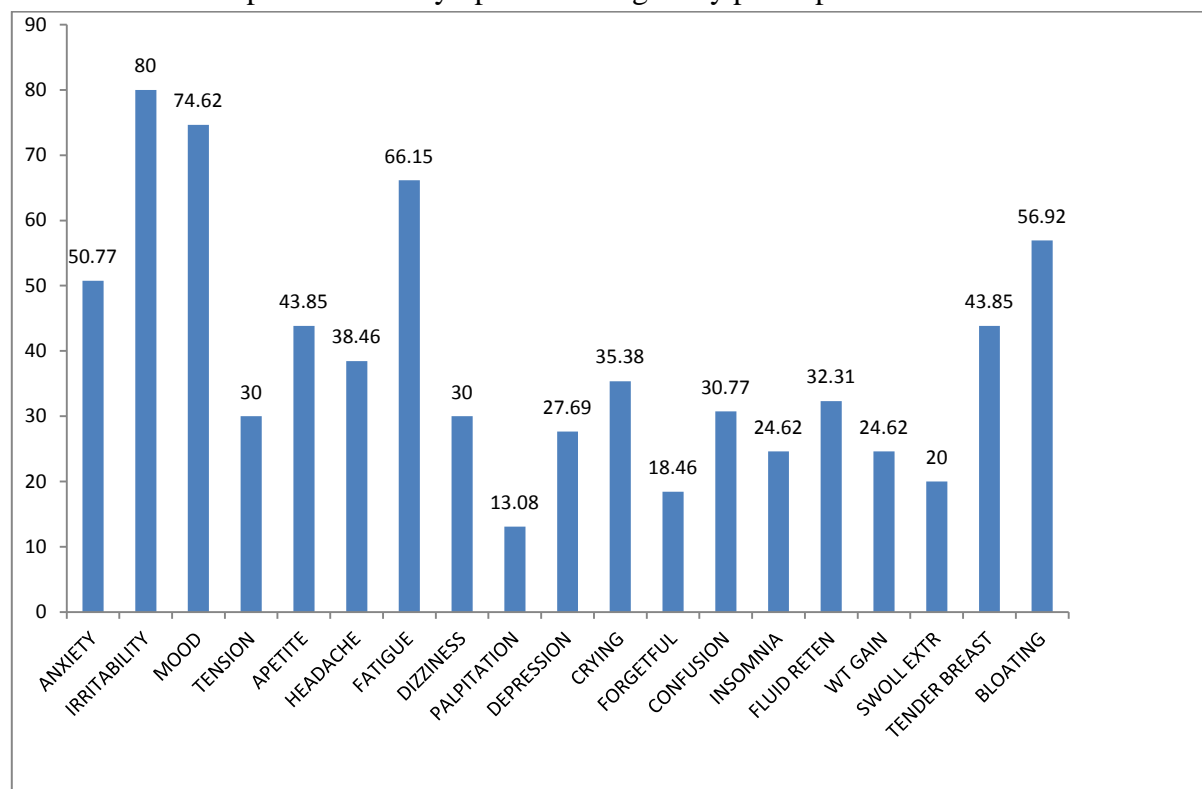


Figure 3: Distribution of premenstrual symptoms among study participants

Discussion

This study was conducted among female medical students therefore majority of them had good knowledge on menstruation which is found to be 82.31%. This is in contrast to study done by Mohapatra et al^[8] where students had good menstrual hygiene knowledge. 76.15% girls knew about menstruation before attainment of menarche and this result is in accordance with other studies done in population other than medical students.^[1,9,10] But in a study done in rural adolescent girls of Nepal, the knowledge and practice were 40.6% and 12.9% respectively, according to Adhikari P et al 2007.^[11] It is evident from a study done by Kalpana Katiyar et al 2013 that awareness is only 38.5% among adolescent females in an urban area of Meerut.^[12] The reason for unawareness among rural girls could be lack of educational background. In our study mean age of attaining menarche was 13years which are almost similar to other studies done in different population population (urban, rural, and tribal) in various places all over the India.^[1,10,13] In this study 98.46% of the girls were using sanitary pads as menstrual absorbent material, other studies^[14]

shows similar results. But in older studies, a higher use of cloth as absorbent was found.^[1,13] In our study the prevalence of college absenteeism was 45% which is similar to the study done by mohapatra et al where it was 49%.^[8] In our study students followed a lot of restrictions like 71.54% girls restricted to go to temple, 66.15% were unable to do sport, 43.85% were unable to walk etc. Such practice of taboos were also found in other studies like Dasgupta et al, Thakre SB et al Sharma N et al as well,^[1,13,15] but in our study the number was found to be higher. Irritability is the most common premenstrual symptom in our study followed by mood swings. A large number of studies have been done on practices of menstrual hygiene, but there is a paucity of studies among health care professionals, hence we took this study.

Conclusion

Menstrual hygiene, is a vital aspect of health education. Good menstrual hygiene is crucial for the health, education, and dignity of girls and women. It is a social issue that cannot be addressed by working in schools and colleges

alone. Education about the significance of menstruation and development of secondary sexual characteristics, selection of a sanitary menstrual absorbent and its proper disposal should be inculcated from early school days. This can also be achieved through educational television programmes, and knowledgeable parents. In order to ensure that adolescent girls and women have the necessary support and facilities, it is important that the wider society, communities and families must challenge the status quo and break the silence around menstruation.

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