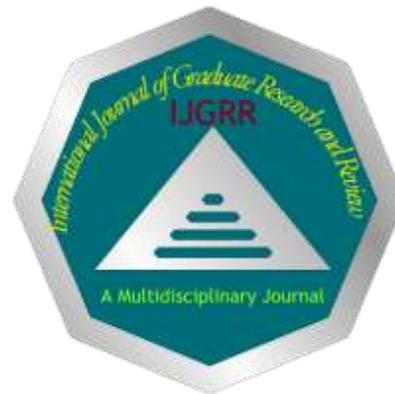


ISSN: 2467-9283



Indexing & Abstracting

Open Academic Journals Index (OAJI), InfoBase Index, Cosmos, ResearchGate, CiteFactor, Scholar Stear, JourInfo, ISRA: Journal-Impact-Factor (JIF), Root Indexing etc.



Impact Factors*

IBI factor: 3

Impact factor (OAJI): 0.101



*Kindly note that this is not the IF of Journal Citation Report (JCR)

Vol-4, Issue-4

November 2018

Menstrual Hygiene among Women of Reproductive Age in Rural Area, Lahore

Hina Samuel¹, Muhammad Afsor¹, Muhammad Afzal^{*}, Syed Amir Gilani¹

Lahore School of Nursing, The University of Lahore, Lahore, Pakistan

Abstract

Introduction: The attitude of community towards menstrual hygiene and the awareness of its health consequences to offspring remain largely ignored. **Methods:** The purpose of the study is to the knowledge of rural community towards health risk due to menstrual hygiene, attitude of rural community towards benefits regarding menstrual hygiene and practice of rural community regarding menstrual hygiene in the rural community. **Results:** The results are shown in 31 tables and 27 figures have been used to show results. The results of the study and discussion show that rural community has illiteracy regarding health risk for offspring due to menstrual hygiene, results shows that they are women need to be educated about MHM and significance of menstruation and use of satisfactory absorbent material so as to enable them to lead a healthy reproductive life. **Conclusions:** In the present investigation, the greater part of the women (80.4 %) procured learning with respect to menstruation from their moms, trailed by neighbors and relatives. Part of instructors was watched irrelevant in conferring training about different parts of menstrual cycle in spite of the way that data on period given by the mother is frequently fragmented and erroneous Women (43.4%) in our investigation were terrified at the season of their first monthly cycle which means that they had no/little information about monthly cycle before its beginning.

Keywords: Electronic Health Records; Security; Confidentiality; Health Care Providers

Introduction

Hygiene is characterized as any application made and any sterile precautionary measure taken to be ensured room conditions that can harm our wellbeing. Hygiene issues incorporate individual cleanliness, which is characterized as self-mind applications that people do with a specific end goal to keep up their wellbeing. Personal hygiene is vital for securing and keeping up wellbeing and tending to medical issues and is likewise crucial to the aversion of numerous sicknesses (Aslan & Kapdan, 2006).

Menstruation is a natural process that is part of a woman's reproductive health. Menstruation, or a menstrual period, is the periodic shedding of the lining of a woman's uterus. It is one of the phases of the menstrual cycle. The uterine lining breaks down into a bloody substance. It then passes down through the cervix and exits through the vagina. The process

usually lasts from three to five days. The amount of menstrual blood can vary from period to period and from woman to woman (Garg et al., 2012).

Menstrual is an especially striking issue since it has more significant impact on nature of instruction than other part of adolescence since it includes a learning segment and also components influenced by the earth and foundation. No female feels totally great when she has her period. A few ladies favor tampon to outer cushions. A fitting of permeable cotton or dressing is embedded inside. In any case, these ought not be left unaltered past six hours. A few brands express that tampons left unaltered for more than 12-18 hours builds the likelihood of poisonous stun. Washing and showering is critical amid monthly cycle. There require be no unthinkable about shower on nowadays. A few people have the issue of smell amid monthly cycle. Neatness and change of cushion/tampon as frequently as is vital

Cite this Article as:

H. Samuel et al. (2018) Int. J. Grad. Res. Rev. Vol 4(4): 156-160.

¹ *Corresponding author

Muhammad Afzal,
Lahore School of Nursing, The University of Lahore, Lahore, Pakistan
Email: mafzalaku@gmail.com

Peer reviewed under authority of IJGRR

© 2018 International Journal of Graduate Research and Review



This is an open access article & it is licensed under a Creative Commons Attribution 4.0 International License (<https://creativecommons.org/licenses/by/4.0/>)

diminishes this issue. It isn't fitting to utilize perfumed cushions or tampons. Truth be told, utilizing powder in the genital territory isn't suggested (Saghir, 2010).

Acknowledge disposition and practice about personal hygiene and infection mindfulness altogether portray about the significance of individual hygiene. It illuminates the idea of hygiene from basically washing or cleaning the body parts. This examination is about the zone where the author clarifies the need, legitimate information of menstrual hygiene and it's the most ideal approach to keep away from the conceptive tract sickness in ladies of each age (Suha & Haque, 2013).

Low learning on monthly cycle expands the danger of contracting regenerative tract contaminations and in addition pelvic inflammatory diseases and urinary tract maladies among a huge number of women over the world, since they can't deal with their menstrual periods all around well. Good menstrual hygiene administration includes women or juvenile females utilizing clean blood-retaining materials which can be changed regularly in a protected place in protection after which cleanser and water are accessible to wash hand and body and additionally approaching secured utilized sterile material transfer office (Ameade, 2016).

The issue of menstrual hygiene is deficiently recognized and has not gotten legitimate consideration. Utilization of clean cushions and washing the genital region are fundamental practices to keep the menstrual hygiene. Unhygienic menstrual practices can influence the strength of the young women and there is an expanded defenselessness to regenerative tract contaminations and pelvic incendiary infections and different intricacies (Garg, et al., 2012).

Many cultural have convictions, myths and taboos identifying with monthly cycle. There are social standards or unwritten guidelines and practices about overseeing menstruation and communicating with bleeding women. In a few societies, women and young ladies told that amid their menstrual cycle they ought not wash up, don't looking a mirror or don't touch the prickle (Shah, 2012).

Aims of the Study

To assess the knowledge, attitude and practice regarding menstrual hygiene among women in the rural area, of Lahore.

Significance of the Study

This study is concerned it is about to assess the knowledge, attitude and practice of rural women during menstruation period. The study will provide important information about the taboos and misperceptions regarding the menstrual hygiene. It will also contribute to eliminate the false practices and the abolish factors associated with these misconceptions.

Moreover, this study has a great significance, being a nurse that it is related to the women where the educational level and awareness is less or insufficient. Menstrual hygiene is considered as a secret thing and assess the level of their awareness is the most difficult task. So it will be help to remove the fear of these women regarding menstrual hygiene and practices, then they talked to them confidentially and trusty.

Conceptual Framework

Bennett's (1976) knowledge, attitude, skills, and aspirations (KASA) change hierarchy model has been used in evaluating the basic principles for change and will be used in this research. Before developing an educational program to improve practice, the researcher must identify what knowledge is needed and assess the participants' attitudes, skills, and desire to change (Bennett, 1976).

Methods

Setting

This study was conducted in rural area of Husaina bad, Lahore.

Research Design

The study design for this research was quantitative Cross-Sectional, Community-based study.

Population

A Reproductive Age of women in rural area of Husaina bad will be considered as population of study.

Sampling

Sampling technique will be Convenient sampling for this study.

Research Instrument

The research instrument is consisted of two sections. Section-A is comprised of socio-demographic data. While section-B is comprised of multiple choice questions regarding the Knowledge and Attitude and Practice was well –constructed Likert Scale questionnaire that will be disturbed among reproductive age of women of Hussaina bad Lahore. Pilot study was taken to check the validity and reliability of questionnaire.

Data Gathering Procedure

A formal written letter of permission to conduct the research including questionnaire.

Methods Used to Analyze Data

Data analysis was done by Statistical Package for the Social Sciences (SPSS) version 21.0. Data will be analyzed by SPSS version 21.0. The study sample was characterized by using measure of central tendency (mean, median, and mode). The data was summarized by descriptive statistics using the frequency, percentage and tables for categorical variables. The association between the three variables scores and socio-demographic variables was tested by using

chi-square test. The significance level for all statistical analysis was set at 0.05.

Study Timeline

This study approximately was taken in 2-4 months (September, 2017 to December, 2017).

Ethical Consideration

Ethical clearance to conduct the study will be obtained from Institution Review Board of University of Lahore. Permission from stakeholder was taken to collect health and demographic data in the community. For this research purpose to collect data from participant enough information of research was provided to participants with the help of full consent form and this was achieved via a letter attach to the questionnaire. Confidentiality was considered by informing participants.

Results

Data collected from the rural residents of the Hussain Abad community, Lahore to assess the knowledge, attitude and practice of rural community towards menstrual hygiene, and they show 100% response to the current study. The data analysis consists of two parts. Demographic is the first part of data analysis which gives details about demographic variables. Second part is descriptive analysis which provides us recurrence and rate of respondent regarding 25 item of questionnaire.

Profile of The Respondents

Only female among 15-45 years and women those are present and willing to participate will be included.

Exclusion criteria were women below than 15 years or above 45 years, and especially those women who are unwilling to participate or unable to comply with protocol requirements.

Research Question 1 –

What is the status of Knowledge of women related to menstrual hygiene?

Research Question 2 –

What are the routine Practices of the rural women practiced during menstruation period?

Research Question 3 –

What types of Attitude are present that deteriorate the healthy hygiene of women during menstruation period?

Research Question 4 –

Which type of the significant association is present in demographic factor of reproductive age of women towards menstrual hygiene of rural community?

Part 1- Descriptive Analysis

The Table 1 depicts that participants of the study were n=190, female. Mostly participants’ education was 41(26.5%) Primary, 45(23.6%), 10(5.2%) Illiterate, , only 135(70.7%) Graduated were having religious and technical certified. Demographic variable is Religion 188(98.4%) participants were Muslims and 02(1.0%) were Christians. Fourth demographic variable is Marital Status 129(83.2%) married and 26(16.8%) unmarried.

Table 1: Demographic data

Demographic variable	Group	Frequency	Percent
Material status	Married	100	52.6
	Unmarried	90	47.4
	Total	190	100
Education	Illiterate	10	5.2
	Primary	45	23.6
	Higher/ Secondary	23	71.1
	Total	190	100.0
Religion	Muslim	188	98.4
	Christian	02	1.0
	Total	190	100.0
Types of family	Nuclear	99	51.8
	Joint	91	47.6
	Total	190	100.0
Occupation	House Wife	82	42.9
	Student	83	43.5
	Working Women	25	13.1
	Total	190	100.0
Age	15-24	72	37.7
	25-35	91	47.6
	36-45	27	14.2
	Total	190	100.0
Socio-economic Status	Upper Middle	98	51.3
	Lower Middle	74	38.7
	Lower	18	9.4
	Total	190	100.0

Table 2: Attitude and Practice towards menstrual hygiene

Questions	Agree	Strongly Agree	Neutral	Disagree	Strongly Disagree
Women can enter temple/pray during menstruation	190 57.1%	0 0%	0 0%	18 9.4%	63 33.0%
Women can enter kitchen/cook food during menstruation	19 9.9%	0 0%	46 24.1%	116 60.7%	9 4.7%
Women can take bath during menstruation	37 19.4%	0 0%	35 18.3%	100 52.4%	18 9.4%
Women can wash hair during menstruation	36 (8.85)	28 14.7%	99 51.8%	27 14.1%	0 0%
Women can sleep on same beds as others during menstruation	31 20.0%	65 41.9%	17 11.0%	38 24.5%	4 2.6%
Women can touch pickle during menstruation	20 12.9%	51 32.9%	26 16.8%	42 27.1%	16 10.3%
Women need not avoid any foods during menstruation	24 15.5%	55 35.5%	9 5.8%	62 40.0%	5 3.2%
Women can have sexual intercourse during menstruation	9 4.7%	28 14.7%	35 18.3%	109 57.1%	9 4.7%
Questions	Agree	Strongly Agree	Neutral	Disagree	Strongly Disagree
I dry underwear with iron or sunlight	24 15.5%	36 23.2%	35 22.6%	40 25.8%	20 12.9%
I use cotton pads during menstruation	24 15.5%	37 23.9%	46 29.7%	41 26.5%	7 4.5%
I wash my hands with soap before and after changing my pad.	27 17.4%	57 36.8%	27 17.4%	29 18.7%	15 (9.7%)
I am confident that my disposed off pads are not a source of infection to others.	19 9.9%	18 9.4%	36 18.8%	27 14.2%	90 47.1%
I take a bath daily or every other day during menstruation	40 25.8%	47 30.3%	30 19.4%	23 14.8%	15 9.7%
I drink 6-8 glasses of water during menstruation	09 4.7%	45 23.6%	09 4.7%	117 61.3%	10 5.2%
I do not take cold water or cold drinks during menstruation	90 47.1%	36 18.8%	36 18.8%	1 0.5%	27 14.1%

Do you believe that?

Table 2 reveals the result of 1-10 questions about knowledge of the participants regarding menstruation, outcome indicates that members of the current study show participants have good knowledge regarding the risks of consanguinity. Because in reaction to question 1-10 the frequencies and percentage of “Yes” is high whereas frequencies are percentage of “No” is low.

In reaction of (1-7) items of Attitude of participants towards the believes about menstrual hygiene majority of the respondents expressed positive attitude “Disagree and Strongly Disagree”, some part of the study members were neutral and some were agree. But in reaction to 4 questions majority was neutral 63(40.6%). Complete details present in above table.

Discussion

Our study included all women in the age group 15-45 years’, whereas majority of the studies done previously on menstrual problems have been confined to adolescents. In the present study, mean period of women was 27 years. Watched that around two-third of respondent's moms were

unskilled and comparable discoveries have been noted in our examination. In the present investigation, the greater part of the women (80.4 %) procured learning with respect to menstruation from their moms, trailed by neighbors and relatives. Part of instructors was watched irrelevant in conferring training about different parts of menstrual cycle in spite of the way that data on period given by the mother is frequently fragmented and erroneous Women (43.4%) in our investigation were terrified at the season of their first monthly cycle which means that they had no/little information about monthly cycle before its beginning. Revise data and training with respect to period and conceptive wellbeing is as yet a major test in Pakistan and in the greater part of the creating nations. In our investigation more than 33% of the women realized that uterus is the wellspring of menstrual draining and this learning was higher than different examinations where around 20 percent subjects knew the right source. In our study larger part of the investigation subjects had a negative mentality towards women entering sanctuary, touching pickle or having sex amid her menses. Almost 50% of the subjects differ that ladies require not keep away from any sustenance amid period though they had an uplifting state

of mind towards ladies entering kitchen, scrubbing down, washing hair and mulling over same bed as others amid her menses. These discoveries could be an impression of the way of life and taboos in the general public with respect to menstrual cycle. In the present investigation, just 53.7% ladies were utilizing sterile cushions while in the examination led by country group greater part of the young ladies utilized material (46.67%) and just 15.67% were utilizing clean napkins. Seen in his examination that absence of security was an essential issue since the greater part of the respondents did not have a secured can and just 57.5% young ladies legitimately arranged the utilized material while in the present investigation every one of the ladies had acceptable works on with respect to capacity and transfer of permeable material. Measurably critical affiliation was seen amongst information and financial status and education status of the investigation members. These discoveries propose that with increment in proficiency level or financial status information increments. Measurably huge affiliation was seen amongst mentality and member's financial status portraying that ladies having a place with a higher financial status have a superior disposition in regards to monthly cycle contrasted with those having a place with bring down financial status. Critical affiliation was additionally observed amongst training and respondent's financial status and education status.

The findings of our study can be generalized and applied to all the rural women of Pakistan with similar socioeconomic and cultural background. Women need to be educated about MHM and significance of menstruation and use of satisfactory absorbent material so as to enable them to lead a healthy reproductive life.

Limitations

This study found many limitations:

- Time duration was too short.
- This study was focus only on rural community.
- Likert scale questionnaire has been used in this study.
- Data collection was faced lot of issues.
- The respondents of the study have very careless attitude regarding filling questionnaire.

Participants of study have no idea about the importance of the filling questionnaire sincerely.

Conclusion

The findings of our study can be generalized and applied to all the rural women of Pakistan with similar socioeconomic and cultural background. Women need to be educated about MHM and significance of menstruation and use of satisfactory absorbent material so as to enable them to lead a healthy reproductive life.

Acknowledgement

Authors acknowledge all persons who directly or indirectly helped during research and manuscript writing. Thanks to Ms. Chanda Jabeen, being a lecturer she teaches the basics of research by her excellent teaching strategies to first author and many thanks to authorities of University for all facilities.

References

- Ameade (2016). Medical students' knowledge and attitude towards complementary and alternative medicine—A survey in Ghana. *Journal of traditional and complementary medicine*, 6(3), 230-236.
- Aslan S & Kapdan IK (2006) Batch kinetics of nitrogen and phosphorus removal from synthetic wastewater by algae. *Ecological engineering* 28(1): 64-70.
- Bennett (1976) Proposals for the classification of the acute leukaemias French-American-British (FAB) co-operative group. *British journal of haematology* 33(4): 451-458.
- Garg R & Telang R (2012) Inferring app demand from publicly available data.
- Garg R, Goyal S & Gupta S (2012) India moves towards menstrual hygiene: subsidized sanitary napkins for rural adolescent girls—issues and challenges. *Maternal and child health journal* 16(4): 767-774.
- Saghir (2010) Gene expression profiling and cancer-related pathways in type I endometrial carcinoma. *International Journal of Gynecological Cancer* 20(5): 724-731.
- Shah (2012) The clonal and mutational evolution spectrum of primary triple-negative breast cancers. *Nature* 486(7403): 395.
- Suha SM & Haque MR (2013) Adolescent girls in urban slum: environmental health perspective. *The International Journal of Social Sciences* 9(1).