Assessing Knowledge, Attitude and Behavior of Rural Women of District Muzaffargarh Regarding Menstrual Hygiene

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Abstract:

The present study was an attempt to explore the knowledge, practices and behaviors of rural women regarding their menstrual hygiene in District Muzaffargarh. A sample of 400 women was selected through random sampling technique. The data was collected through personal interviews using a well prepared interview schedule. The major objectives of the study were to identify the awareness level and practices of women regarding their management of menstrual hygiene. To identify the traditional and cultural practices of women during their menstruation. To check the facilities available for females in Schools as well as homes to manage their menstruation hygienically. The findings of the results show that the Women of district Muzaffargarh practising unhygienic practices to manage their
menstruation. This leads to School dropout ratio, many reproductive health problems, directly indirectly impact on MDGs, development and economics of the country.

Key words: Menstrual Hygiene Management, Non Government Organization, Lady Health Worker, Rural Support Programme, Family Planning Association of Pakistan

Introduction

In Pakistan, the female population is about 52% from which 26% is of reproductive age. The reproductive age started from 12 to 40 years of age. Many females and adolescent girls menstruate every month for 2-7 days. Menstrual period is a normal reproductive process in healthy women. In the menstruation process the blood loss occurs through the vagina. Instead of normal and natural process, the process of menstruation is still considered a secret and taboo topic in many countries including Pakistan. There are lot of socio cultural taboos and myths regarding menstruation. To handle menstruation hygienically and safely, it is necessary that women and adolescent girls from rural areas should have accurate opportunity to use water for sanitation and domestic facilities. Women require some private and personal place to change the clothes or napkin pads, water to wash their body parts after changing the pads or clothes, or for washing the used clothes, for drying the clothes, and also for disposing the used pads or used clothes safely. It is necessary for both of the sex to pay their attention towards the menstrual hygienic management. Presently, the long term customs and traditions and community myths which are prevailing in many societies force harmfully to the lives of females and adolescent girls.

Cleanliness during menstrual has been mostly unnoticed by WASH sectors and many areas which are focusing on sexual and reproductive health, well being and dignity. Due to these
problems and issues, most of the females and adolescent girls are deprived of their basic rights to avail WASH facilities for their health, education, self-respect compared to male gender equity. If the condition still remain, it is impossible for improvement programmes to accomplish their goals. (Population Reference Bureau 2011)

Objectives of the study:

Objective 1: To identify the awareness level and practices of women regarding their management of menstrual hygiene.
Objective 2: To identify the traditional and cultural practices of women during their menstruation.

Methods of Research

Quantitative research design was used for the study. The study was delimited to the women of District Muzaffargarh having aged from 10—45 years as a target population. A sample of 400 respondents was selected through random sampling techniques from 20 rural union councils of District Muzaffargarh. A non-random sample is used in which as a researchers, was chooses a person, and happens to come across. Interview schedule was applied as an official document for information aggregation. For data analysis, Chi-square test and Regression analysis was used. Data is also analyzed through SPSS including frequency distribution

Empirical Evidences

H₁: There is some association between age of respondent and her age of menarche.

<table>
<thead>
<tr>
<th>Age of Respondent * Age of menarche Cross tabulation</th>
<th>Age of menarche</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>10-12</td>
<td>12-15</td>
</tr>
<tr>
<td>Age of Respondent</td>
<td>10-15</td>
<td>24</td>
</tr>
</tbody>
</table>
The above table shows the results of chi-square test to check that is there any association between age of respondent and her age of menarche. The p-value for this test is 0.005 which indicates that there is some association between age of respondent and her age of menarche.

**H2:** There is no association between "what are the things that you don't do during menses? and what are the things that you do when you have pain during menses?"

<table>
<thead>
<tr>
<th>What are the things that you don't do during menses?</th>
<th>What are the things that you do when you have pain during menses?</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Take bath</td>
<td>Have pain killer</td>
<td>26</td>
</tr>
<tr>
<td>Take bath with hot water</td>
<td>Do &quot;Tokor&quot;</td>
<td>25</td>
</tr>
<tr>
<td>Drink milk</td>
<td>Rest</td>
<td>19</td>
</tr>
<tr>
<td>Eat meat</td>
<td>Nothing</td>
<td>24</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>94</td>
</tr>
</tbody>
</table>

Chi-Square= 28.399; p-value= 0.001

The above table shows the results of chi-square test to check that is there any association between "what are the things that you don't do during menses? and what are the things that you do when you have pain during menses?" The p-value for this test is 0.001 which indicates that there is some association between "what are the things that you don't do during menses?"
and what are the things that you do when you have pain during menses?"

**H₃:** There is no association between "what kind of sanitary napkin do you use during menses? and how many times do you change sanitary napkin in day?"

<table>
<thead>
<tr>
<th>What kind of sanitary napkin do you use during menses? * How many times do you change sanitary napkin in day?</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>One time</td>
</tr>
<tr>
<td>Old piece of cloth</td>
<td>23</td>
</tr>
<tr>
<td>Cotton and gauze or new cloth</td>
<td>21</td>
</tr>
<tr>
<td>Commercial sanitary napkin</td>
<td>22</td>
</tr>
<tr>
<td>Any other</td>
<td>20</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>86</strong></td>
</tr>
</tbody>
</table>

Chi-Square= 17.998; p-value= 0.035

The above table shows the results of chi-square test to check that is there any association between "what kind of sanitary napkin do you use during menses? and how many times do you change sanitary napkin in day?" The p-value for this test is 0.035 which indicates that there is some association between "what kind of sanitary napkin do you use during menses? and how many times do you change sanitary napkin in day?"

**Conclusion**

The topic of menstruation is a taboo topic. The reluctance to discuss it is so extensive, that it is spoken of very rarely, even among women. MHM is considered to be a totally private and personal phenomenon, which the girls should be able to manage on their own, without requiring the schools to provide them with any additional facilities. Traditional beliefs and practices
regarding menstruation were observed to be very widely prevalent among the adolescent girls, mothers and teachers. These consisted of prohibitions against bathing, using water to clean oneself, restrictions against consuming certain types of food, etc. These practices have an adverse impact on the health of the girls, as they directly affect their hygiene and nutrition. This culturally based reluctance to discuss menstruation leads to issues in many other areas as well.

**Recommendations**

The education officials and teachers need to focus on the MHM needs of the girls at school level. There is also a need for policy dialogue with senior government policy-makers to prioritize support for adolescent girls in schools for MHM. Furthermore there is a need to advocate at various levels and create awareness and recognition of the MHM related needs of adolescent girls in schools and highlight the urgency of this issue. Capacity building program of education department officials and school teachers on MHM and rights can be started to increase their understanding on the issue and consideration for inclusion of MHM in training module of teachers.

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