



RESEARCH ARTICLE

RELEVANCE OF SOCIAL WORK AND WOMEN’S HEALTH: A STUDY ON MENSTRUAL HYGIENE AND PRACTICES

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ABSTRACT

Menstruation is common process after the attainment of puberty among girls. Up to 80% of women report having some symptoms prior to menstruation. Common signs and symptoms include acne, tender breasts, bloating, feeling tired, irritability, and mood changes. These may interfere with normal life, therefore qualifying as premenstrual syndrome, in 20 to 30% of women. In 3 to 8%, symptoms are severe. If menstrual hygiene is practiced during the time of mensus, it will result in good reproductive health and good mental health too

Objective:

1. To assess the practices of menstrual hygiene among the respondents.
2. To know the restrictions which were practiced during Menstruation?

Methodology: The type of research design used is Descriptive. The Population size is 600 and the sample size is 60(Female Students). The sampling technique used for the study is simple random Sampling technique from probability sampling technique. The field of study is (insert ur college name and remove the brackets).

Finding: Least number of respondents (5%) changes the pads once in a day, whereas the remaining members change more than once in a day. One third of the respondents (33%) mentioned that they are not allowed to do their house hold works during menstruation.

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INTRODUCTION

Menstrual hygiene management has been defined as: 'Women and adolescent girls using a clean menstrual management material 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 to dispose of used menstrual management materials' (UNICEF and WHO, 2014). The first menstrual period occurs after the onset of pubertal growth, and is called menarche. The average age of menarche is 12 to 15. The first day of menstrual bleeding is the date used for the last menstrual period (LMP). The typical length of time between the first day of one period and the first day of the next is 21 to 45 days in young women, and 21 to 31 days in adults (an average of 28 days).

Health Effects

In most women, various physical changes are brought about by fluctuations in hormone levels during the menstrual cycle.

This includes muscle contractions of the uterus (menstrual cramping) that can precede or accompany menstruation. Some may notice water retention, changes in sex drive, fatigue, breast tenderness, or nausea. Breast swelling and discomfort may be caused by water retention during menstruation. Usually, such sensations are mild, and some females notice very few physical changes associated with menstruation. A healthy diet, reduced consumption of salt, caffeine and alcohol, and regular exercise may be effective for women in controlling some symptoms.

Menstrual Disorders

There are many menstrual disorders which includes

| | |
|-----------------|--|
| Oligomenorrhea | Infrequent periods |
| Hypo menorrhea | Short and extremely light periods |
| Hyper menorrhea | Heavy and long periods |
| Polymenorrhea | Too-frequent periods (defined as more frequently than every 21 days) |
| Dysmenorrhoea | Extremely painful periods |
| Metrorrhagia | Breakthrough bleeding (also called spotting) between periods; normal in many females |
| Amenorrhea | Absent periods |

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Menstrual Management

Menstruation is managed by menstruating women to avoid damage to clothing or to accord with norms of public life. Menstrual management practices range from medical suppression of menstruation, through wearing special garments or other items, washing or avoidance of washing, disposal and laundry of stained materials, to separation of menstruators to particular places or activities. Menstrual products (also called "feminine hygiene" products) are made to absorb or catch menstrual blood. A number of different products are available - some are disposable, some are reusable. Where women can afford it, items used to absorb or catch menses are usually commercially manufactured products. In developing countries, many women may not afford these products and use materials found in the environment or other improvised materials.

Disposable item

1. Disposable soft cup
2. Disposable sanitary napkin
3. Tampon in plastic applicator
4. Sanitary napkins (Sanitary towels) or pads
5. Tampons
6. Padettes
7. Disposable menstrual cups

Non-commercial materials

Absorption materials that may be used by women who cannot afford anything else include: sand, ash, cloth - new or re-used, whole leaf, leaf fibre (such as water hyacinth, banana, papyrus, cotton fibre), paper (toilet paper, re-used newspaper, pulped and dried paper), animal pelt e.g. goat skin, double layer of underwear, skirt.

Impact of Poor Menstrual Hygiene Practices

Poor menstrual hygiene can cause fungal infections, Reproductive Tract Infection (RTI) and Urinary Tract Infection (UTI). Unhygienic practices also leave women vulnerable to infertility. Menstrual hygiene and management can be essential in ensuring that your everyday life is not interrupted by menstruation. It ensures that you can continue with your daily routine such as going to school, going to work or doing household chores. It can also prevent potential situations of embarrassment and in turn, make you feel confident about yourself and your body.

MATERIALS AND METHODS

Research Design and Technique

The researcher adopted Descriptive Research Design for the study and used Simple random technique.

Universe and Sample Size

The total number unit in the population consists of 600 female students and 60 is the Sample size.

Tool of Data Collection

Questionnaire

Period of Data Collection

The data was collected in the month of February 2017.

Table 1. Showing Menstrual Hygiene Practice

| Response | Number of Respondents | Percentage |
|--|-----------------------|------------|
| Changing of undergarments | | |
| Once A Day | 12 | 20 |
| Twice A Day | 31 | 52 |
| More than Twice | 17 | 28 |
| Hand wash after usage of absorbent | | |
| Yes | 60 | 100 |
| No | 0 | 0 |
| Removal of genital pubic hair | | |
| Daily | 1 | 2 |
| Weekly | 35 | 58 |
| Once A Month | 17 | 28 |
| Never | 7 | 12 |
| Frequency of pads changing during first two days of menstruation | | |
| 4 Hours | 19 | 32 |
| 6 Hours | 24 | 40 |
| 8 Hours | 14 | 23 |
| Once A Day | 3 | 5 |
| Usage of vaginal wash | | |
| Yes | 54 | 90 |
| No | 6 | 10 |

Table 02. Showing Restrictions followed during Menstruation

| Response | Number of respondents | Percentage |
|-----------------------------------|-----------------------|------------|
| Allowed to do household works | | |
| Yes | 40 | 67 |
| No | 20 | 33 |
| Allowed to touch stored food | | |
| Yes | 42 | 70 |
| No | 18 | 30 |
| Allowed to sit on the threshold | | |
| Yes | 37 | 62 |
| No | 23 | 38 |
| Allowed to sleep on regular bed | | |
| Yes | 36 | 60 |
| No | 24 | 40 |
| Allowed to touch members in house | | |
| Yes | 40 | 67 |
| No | 20 | 33 |
| Allowed to play outside | | |
| Yes | 34 | 57 |
| No | 26 | 43 |
| Allowed to goto college | | |
| Yes | 45 | 75 |
| No | 15 | 25 |

Major Findings

- More than half of the respondents (52%) have the habit of changing undergarments twice a day during menstruation
- All the respondents (100%) had mentioned that have the habit of washing their hands after the usage of menstrual absorbent
- Small number of respondents (12%) never practiced removing of genital pubic hair
- Least number of the respondents (10%) does not use vaginal wash during menstruation.
- Least number of respondents (5%) changes the pads once in a day, whereas the remaining members change more than once in a day.
- One third of the respondents (33%) mentioned that they are not allowed to do their house hold works during menstruation

- Nearly three fourth 3/4 of the respondents (70%) have mentioned that they are allowed to touch stored food during menstruation
- More than one third of the respondents (38%) have mentioned that they were not allowed to seat on threshold during menstruation.
- More than half of the respondents (62%) have mentioned that they were allowed to sleep on regular bed during menstruation
- One third of the respondents (33%) have mentioned that they were not allowed to touch their family members during menstruation.
- More than half of the respondents (57%) have mentioned that they were allowed to play during menstruation
- Three fourth of the respondents (75%) have mentioned that they were allowed to go to college during menstruation

DISCUSSION

- Every girl need to be educated about the menstruation before the puberty.
- Various awareness programme regarding the menstrual hygiene need to be conducted.
- Every mother need to be aware and should have adequate knowledge regarding menstruation.
- Awareness need to be provided to avoid myths regarding the menstruation and to avoid forced restriction practices during Menses.
- College management need to conduct awareness camps regarding menstrual hygiene.

- Educate the girls about vaginal wash usage which prevents from the infections.

Conclusion

Social work is a diverse profession working in many of the health and social sectors included in a primary health care approach. It is a profession that focuses upon improving the health and social well-being of individuals, families, groups and communities. Social workers work with people of age group and sex to resolve, prevent or lessen the impact of psych-social, physical and mental health related issues. Health promotion is one of the important principles in Primary health care.

The social work profession has a history of interdisciplinary collaboration and a commitment to the importance of early intervention, prevention and health promotion. This can be achieved through creating awareness about Menstrual Hygiene, providing counseling, educating the girls before and after puberty on the impact of menstrual hygiene.

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