Culture of Silence: Understanding Psycho-Social Aspects of Menstruation

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Abstract—The present research aimed at understanding the level of awareness about menstruation and its psychological impact on undergraduate female aged between 17-21 years. Semi-structured questionnaire was used in order to understand the awareness at four levels, namely, knowledge about menstrual cycle, information providers, nature of restrictions imposed, products used during menstruation. Menstrual hygiene among the students is of great importance and awareness is the first step towards maintaining hygiene and psychological health. But, the silence surrounding the issue makes it difficult for the young females to address the issue and its concerns. Through the study, we gained insight into the current level of awareness among the female students about menstrual hygiene and health. Data gathered highlighted their level of knowledge about menstrual cycle, information providers, first-time experience and nature of restrictions imposed during the time. The study has implications for planning intervention strategies for sexual health among young adults.

1. INTRODUCTION

The growing attention towards the importance of monitoring health and well being, particularly in the 21st century, where challenges to perform, achieve and deliver are present as never before. Leading a healthy lifestyle and its ensuing well-being impacts overall growth and development of the individual. The Indian youth are one of the most vulnerable groups as they are straddling between the traditional and modern challenges as demanded by society. In this context health issues, particularly, sexual health and hygiene, need to be addressed. The culture of silence that surrounds the discourse of sex, sexuality, morality and related issues does not provide adequate spaces for open and free discussion.

The present paper attempts to investigate menstruation as an integral process of a woman's life cycle. It aims to explore the following aspects, namely, awareness and basic knowledge of the menstruation cycle, identify the information providers, nature of restrictions placed on the menstruating girl and the first menstrual experience. Discussion of menstruation and related issues are often avoided and even frowned upon thereby making awareness, promotion and intervention for sexual health rather difficult and complex.

Discourse on menstruation and its management in the Indian context is still interlinked with taboo, myths and socio-cultural norms. Prior information about menstruation and how this knowledge of bodily and associated changes are imparted possibly determines the impact on the growing young girl. Menstruation is a physiological process of maturity, yet we find that study of its psycho-social consequences are restricted. A culture of silence about sexual matters in terms of hygiene and related management has prevailed in India for long and it is significant to note that it continues even in the 21st century. The twin influence of modernization and globalization along with scientific advancement and educational expansion have failed to create safe and open spaces to talk on these issues. The transition from girlhood to 'being' and 'becoming' a young woman is still full of challenges - for any talk about sex and sexual issues includes feelings of shame and embarrassment. Adolescent girls constitute 1/5["] of the total Indian population [1]. Menarche for Indian girls occurs between the ages of 11 and 15 years with a mean of 13 years [2] In spite of geographical and racial variations, age of menarche is estimated to be between 8 to 16 years in developing countries [3]. Menstruation is still regarded as something unclean or dirty in Indian society [4]. Perceptions regarding menstruation and practices during menstrual cycles among high school going adolescent girls in resource limited settings around Bangalore city, Karnataka, India [5]. The reaction to menstruation depends upon the level of awareness and knowledge. The manner in which a girl learns about menstruation and its associated changes may have an impact on her response to the event of menarche [6]. The knowledge and practices related to menstruation are dependent on socio economic conditions as well [7]. The present study was conducted among adolescent female students of Daulat Ram College from middle socioeconomic status. The main aim was to assess the awareness, knowledge, practices, and restrictions faced by the female adolescents regarding their menstrual hygiene.

2. RATIONALE

The attempt was to explore the psycho-social aspects of menstruation in young female adults.

3. METHOD

3.1. Sample

The sample consisted of 101 female college students of Daulat Ram College, aged between 17-21 years, from the middle socio-economic status/background. Convenient sampling method was used to select the participants for the study.

3.2. Tools

A semi-structured interview schedule was used in order to address the awareness about menstruation, focused on:

- 1. Knowledge about menstrual cycle,
- 2. Information providers,
- 3. Restrictions during menstruation, and,
- 4. Products used during menstruation

4. RESULTS

Table 4.1: Beginning of menstrual cycle



Fig. 4.1: Prior information or knowledge about menstruation

Majority of the adolescents had prior knowledge about menstruation but still there were some who had no prior knowledge about it.



Fig. 4.5: Identification of hygiene products

This shows that the adolescents were aware about the hygienic products. But very few were aware about the alternative products.



Fig. 4.3: Products used during menstruation

This reflects that the adolescent girls are using hygienic products, mostly sanitary napkins. But, when they were asked about the number of sanitary napkins they use per day few girls stated that they use one napkin per day. Though the girls seemed aware of the hygienic products but they were not quite aware of the pros and cons of using them.



Fig. 4.4: Disposal of used products





Fig. 4.5: Source of information

It was found that mother alone was the first source of information in 18.40% of girls while school alone was the first source in 17% of the girls. Other sources of information included friends, sister, T.V., internet and relatives.

The qualitative analysis was done using thematic analysis and the major themes revolved around:



Fig. 4.5: Major themes

5. DISCUSSION

The aim of the present study is to explore the that exists about menstrual health and hygiene among the female youth today.

The culture of silence maintained by of menstrual health and hygiene is because this subject is considered a taboo and hence, often ignored. But, this means that cleanliness and hygiene issues related to sexual health and menstrual health are also ignored because of the myths and taboos associated with it. And cleanliness, both personal as well as at the community level is essential to living a healthy life.

Insufficient knowledge, hygiene and management about menstruation have been reported by studies in India [8-10]. The present results reflect how the lack of awareness about menstrual hygiene makes the young females vulnerable to infections - reproductive tract infections and problems that can affect their health on a long term. Even in today's day and age when the society has progressed on all fronts, menstruation still remains a topic rarely to be discussed. It is regarded as an unclean or dirty process even though it is a physiological process that is natural and indicative of fertility in females. Discussing menstruation is considered as a matter of embarrassment and hence avoided. Mothers usually educate their daughters about menstruation but often they have reservations taking about it. This leads to young females being unaware about the process, hygiene and health related issues making them vulnerable to infections. Young females due to this taboo associated with menstruation are unable to address the questions that they might have. Menstruation is a physiological process but there are psycho-social factors that are associated with it and play a critical role in its nonacceptance at both a private and a public level.

Table 4.1 indicates that the age range in which the menstrual cycle begins is 10-16 years. Fig. 4.3, shows that 71% of the adolescent females had prior information about menstruation, whereas 23% had no prior knowledge and 6% students had little knowledge about menstruation. These results show that there is still a considerable number of young adults who were not educated about menstruation before they actually experienced it. These findings are similar to other studies in Delhi where most of the young girls were previously unaware that it would happen and the information they are given is sparse [11, 12]. Similar findings are also seen from other parts of India like Rajasthan [13], Gujarat [14], Haryana [15], and Kerala [16].

Menstruations is considered as something impure and unclean, something that is not to be talked about. But knowledge about the same is essential so that the adolescents are better prepared to handle it and more aware about the health and hygiene issues. Surprisingly this is something more prevalent in the urban participants [17].

When the participants were questioned about the information providers, it can be noted that mother was the primary information source to the female adolescents about menstruation followed by school, sisters and friends playing an important role. Mothers and sisters are the same gender and there is more identification with them making information providers who can relate to the issues and challenges associated with menstruation, a process unique to females. Educational programmes by schools and support and advice from friends also play a key role in providing information.

When the participants were asked to identify menstrual hygiene products (cloth, sanitary napkins, menstrual cup, menstrual sponge, tampon, towel, and homemade pad), the products identified were: Sanitary napkins (100%), tampons (19.80%), menstrual cup (10.80%) and homemade pads (5.94%). When the participants were asked the products they use during menstruation 100% participants said sanitary napkins, 1.95% said tampons and 1.30% said cloth. This reflects that even though the adolescents were aware about different products but the one they used most frequently was sanitary napkins.

While their primary disposal method was to 'wrap and throw' (86.20%), followed by 'throwing in dustbin' (12.90%) and 'burying in soil' (1.30%).

After, looking at the responses of the participants, three major themes came up, namely, first experience of menstruation, information shaping the outlook towards menstruation, and, nature of restrictions during menstruation.

5.1. First Experience

The first experience of menstruation was described more in terms of being 'afraid', 'confused', 'irritated', and 'stressed'. All these terms used are all indicative of a 'bad' first experience. Feelings of negativity, hesitation, and embarrassment is associated with menstruation. The girl's first experience of menstruation and related problems marked by feelings of anxiety and eagerness to know about this natural phenomenon [18]. The participants who had no prior knowledge about menstruation stated that they were 'scared' as they were unable to understand what was happening with them. Fear and anxiety are associated with the menstrual experience [19]. They thought that there was something wrong with them - disease/injury that was a cause of concern for them. And due to lack of knowledge about it they did not know what to do and instead a few of them, even tried to hide it from their mothers. This further reiterates the need to educate and prepare the adolescents about menstrual and sexual health so that they are more prepared to deal with the changes in their body and its psychological impact. In order to make them more comfortable in dealing with menstrual issues, information dissemination and imparting knowledge about the same is critical.

.2. Information Shaping the Outlook towards Menstruation

Based on their personal experiences, prior knowledge, some participants viewed menstruation as a 'natural process' whereas others perceived it as a 'natural problem'.



Fig. 5.1: Menstruation as perceived by the participants

The participants who viewed menstruation as a 'natural process' focused on the biological/physiological process part of menstruation, where they explained the menstrual cycle as natural process. Its importance with respect to the reproductive system was also explained and this link further helped the participants view the process as 'natural'. They also explained the process in terms of hygiene and precautions to be taken during menstruation. This further reflects their preparedness and positive outlook in terms of handling menstruation and related issues.

Whereas, there were participants viewed menstruation as a 'natural problem'. The word 'problem' itself is indicative of the negative outlook associated with menstruation. The participants viewed menstruation as a 'problem' related to 'girls' that they have to 'face'. It is something that is seen as forced upon only girls making them feel uncomfortable, helpless and irritated. This can also be seen in connection with those who had no awareness about menstruation and their apprehensive approach towards menstruation.

This is the time when young female adults are specifically told not to discuss their problems with their fathers and interactions with the opposite gender is also gets limited.

5.3. Restrictions

Another theme that emerged from the data was related to the restrictions placed on the females during menstruation. There are varied restrictions associated with menstruation. During the menstrual period, the adolescents are trapped within a web of societal restrictions related to physical activities, diet/food intake and religious restrictions. Menstruation is a time when the females are seen as 'unclean', 'dirty' and during this time they are told to stay away from auspicious activities, not enter temples which make them feel left out and it is viewed as a punishment meted out to the girls only. There are diet related restrictions as well when the adolescents are told to avoid spicy and oily foods. They wish that this time ends soon as it irritates them. They also limit their physical activities and movements. All these restrictions imposed on the adolescents make them feel as if caught in the situation and lowered their confidence level. They are forced to make changes in their routine, even if they do not want to, due to the pressures imposed by the societal and prevalent cultural norms.

The onset of menarche often means reduced mobility, possible withdrawal from school and a list of do's and don'ts that the girls are required to follow [20]. As per a study in Delhi, India shows that 92% were restricted in religious and social activities [13]. In Gujarat, India, many families continue the custom of celebrating the first menarche and observing social restrictions [15]. Studies thus show a rather harsh situation for girls and women who are considered as unclean (21, 13) and untouchable while menstruating and as a consequence kept away from normal activities of life by not leaving the home (11), presumably missing work and school, or being unable to attend places of worship (21), or to swim or exercise [22]. There are some practices of socio-cultural taboos concerning menstruation [23]. In Hindu religion, menstruation is considered religiously impure and ceremonially unclean, but no scientific reason has been given [17]. Lack of knowledge about menstruation and consequently, poor menstrual hygiene practices among adolescent girls [24, 25, 26, 27, 19, 28, 29 and 301.

6. CONCLUSION

Menstruation is a natural and normal biological process. But it is considered a taboo in the Indian society. Parents specially mothers, don't discuss or educate their daughters about menstruation. According to them it is embarrassing to discuss about this. A cross-sectional study undertaken in West Bengal with 160 respondents reported that the majority of the girls did not fully understand the physical process of menstruation hence were not prepared for their first period [24]. This combined with restrictions and myths which propagate only because of lack of knowledge and impact every aspect of growing up such as personality, self-esteem and even academics.



Fig. 6.1: Conclusion of Study

So, as observed that even in today's day and age there a lot of misconceptions, taboos associated with menstruation and the adolescents are not prepared to handle this phase of their life making them vulnerable to emotional, physiological and psychological disturbances. So, what is needed is empowerment of the female adolescents with information about menstrual cycle, accompanied changes-physical, emotional and psychological, awareness and knowledge about the variety of products used during menstruation and its pros and cons., so that this 'culture of silence ' is broken. This makes them confident and they can be prepared to handle this change in their lives, which occurs naturally and is of great importance in terms of fertility. Thus, making them lead a happy and a healthy life.

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REFERENCES

 Drakshayani DK, Venkata RP. A study on menstrual hygiene among rural adolescent girls. Indian J of Med Sci 1994; 48 (6): 139-43.

- [2] Banerjee I, Chakraborty S, Bhattacharya NG, Bandopadhyay S, Saiyed HN, Mukherjee D. A cohort study of correlation between body mass index and age at menarche in healthy Bengali girls. Journal of the Indian Medical Association 2007; 105(2): 75-8.
- [3] Sharma K. Age at menarche in northwest Indian females and a review of Indian data. Ann Hum Biol 1990; 17: 159–162.
- [4] Shanbhag, RD. Shilpa, R. D'Souza, N. Josphine, P. Singh, J. Goud, B. R. (2012). Perceptions Regarding Menstruation and Practices during Menstrual Cycle Among High School Adolescent Girls in Resource Limited Setting Around Bangalore City Karnataka, India. International Journal of Collaborative Research on Internal Medicine & Public Health 4 (7): 1353 1362.
- [5] International J of Collaborative Research on Internal Medicine and Public Health 2012; 4(7): 1353-62.
- [6] Rao S, Joshi S, Kanade A. Height velocity, body fat and menarcheal age of Indian girls. Indian Pediatr 1998; 35:619-28.
- [7] Drakshayani Devi K, Venkata Ramaiah P. A study on menstrual hygiene among rural adolescent girls. *Indian J Med Sci* (1994) 48(6):139–43.
- [8] Gupta, A. & Vatsayan, A. (1996). Age at menarche, menstrual knowledge and practices in the apple belt of Shimla Hills. J. Obstet. Gynaecol., 16 (6), 548–551.
- [9] Dhingra, R., Manhas, S., Kohli, N. & Mushtaq, A. (2007). A comparative study of understanding of menstrual process among married women belonging to two ecological settings. J. Hum. Ecol., 22 (3), 261–266.
- [10] Nemade, D., Anjenaya, S. & Gujar, R. (2009). Impact of health education on knowledge and practices about menstruation among adolescent school girls of Kalamboli, Navi-Mumbai. Health Popul. Perspect. Issues, 32 (4), 167–175.
- [11] Garg S, Sharma N, Sahay R. Socio-cultural aspects of menstruation in an urban slum in Delhi, India. Reprod Health Matters (2001) 9(17):16–25. doi:10.1016/ S0968-8080(01)90004-7
- [12] Nair P, Grover V, Kannan A. Awareness and practices of menstruation and puber- tal changes amongst unmarried female adolescents in a rural area of East Delhi. *Indian J Community Med* (2007) **32**:156–7. doi:10.4103/0970-0218.35668
- [13] Khanna A, Goyal RS, Bhawsar R. Menstrual practices and reproductive problems: a study of adolescent girls in Rajasthan. J Health Manage (2005) 7(1):91–107. doi:10.1177/097206340400700103
- [14] Tiwari H, Oza UN, Tiwari R. Knowledge, attitudes and beliefs about menar- che of adolescent girls in Anand district, Gujarat. East Mediterr Health J (2006) 12(3–4):428–33.
- [15] Goel MK, Kundan M. Psycho-social behaviour of urban Indian adolescent girls during menstruation. Australas Med J (2011) 4(1):49–52. doi:10.4066/AMJ. 2011.534
- [16] Unni JC. Adolescent attitudes and relevance to family life education programs. Indian Pediatr (2010) 47(2):176–9. doi:10.1007/s13312-010-0029-y
- [17] Selvi K.T, Ramachandran S.Socio-cultural Taboos concerning Menstruation: A Micro Level study in the Cuddalore District of Tamil Nadu, International Journal of Scientific and Research Publications, Volume 2, Issue 8, August 2012.

- [18] Singh MM, Devi R, Gupta SS. Awareness and health seeking behavior of rural adolescent school girls on menstrual and reproductive health problems. Indian J of Med Sci 1999; 53:439-43.)
- [19] Mahon, T & Fernandes, M. (2010). Menstrual Hygiene in South Asia. A Neglected Issue for WASH (water, sanitation and hygiene) Programmes. Gender & Development, 18 (1): 99-113.
- [20] Garg, R., S. Goyal, and S. Gupta. 2012. "India moves towards menstrual hygiene: Subsidized sanitary napkins for rural adolescent girls—Issues and challenges," Maternal and Child Health Journal 16: 767–774.
- [21] Singh AJ. Place of menstruation in the reproductive lives of women of rural North India. *Indian J Community Med* (2006) 31(3):10–4. doi:10.4103/0970-0218.54923
- [22] Rierdan C, Rise J. Living arrangement and health behaviors in adolescence and young adulthood. Health Edu Res Theory Prac (1995) 8(4):494–503.
- [23] S. Puri, S. Kapoor "Taboos and Myths Associated with Women's Health among Rural and Urban Adolescent Girls in Punjab"; Indian Journal of Community Medicine, Vol. 31, No. 4. Year 2006
- [24] Dasgupta, A. & Sarkar, M. (2008). Menstrual Hygiene: How Hygienic is the AdolescentGirl? Indian Journal of Community Medicine 33 (2): 77-80.
- [25] WaterAid, (2009). Is Menstrual Hygiene And Management An Issue For Adolescent Girls? A Comparative Study of Four Schools In Different Settings of Nepal, WaterAid in Nepal. [Online], Available: http://www.indiahabitat.org/qefl/link/Practices/wa_nep_mhm_re p_march2009.pdf
- [26] Dhingra, R., Kumar, A. & Kour, M. (2009). Knowledge and Practices Related to Menstruation Among Tribal (Gujjar) Adolescent Girls. Studies on Ethno Medicine 3 (1): 43-48.
- [27] Adinma, E. D. & Adinma, J. I. B. (2008). Perceptions and Practices on Menstruation Amongst Nigerian Secondary School Girls. Afr Report Health 12 (1): 74-83. [Online], Available: http://www.ajrh.info/vol12_no1/74-83.pdf
- [28] Thakre, B. S., Thakre, S.S., Reddy, M., Rathi, N., Pathak, K. & Ughade, S. (2011). Menstrual Hygiene: Knowledge and Practice among Adolescent School Girls of Saoner, Nagpur District. Journal of Clinical and Diagnostic Research, 5 (5): 1023-1033. [Online], Available: http://www.wsscc.org/sites/default/files/publications/thakreetal mhknowlsgepracticenagpur india 2011.pdf
- [29] Nagar, S. & Aimol, R.K. (2011). Knowledge of Adolescents Girls Regarding Menstruation in Tribal Areas of Meghalaya. Stud Tribes Tribals, 8 (1): 27-30.
- [30] Shanbhag, RD. Shilpa, R. D'Souza, N. Josphine, P. Singh, J. Goud, B. R. (2012). Perceptions Regarding Menstruation and Practices during Menstrual Cycle Among High School Adolescent Girls in Resource Limited Setting Around Bangalore City Karnataka, India. International Journal of Collaborative Research on Internal Medicine & Public Health 4 (7): 1353 1362.