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Assessment of MHM Practices among School going Adolescent Girls during

Covid-19 lockdown in Sithayankottai village, Dindigul District, Tamil Nadu

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ABSTRACT

Background: COVID - 19 Pandemic has so much of devastating impact on our society especially due to complete lockdown status in almost all parts of India. During this critical situation, one of the worst-hit sections of society is women who menstruate. National Family Health Survey 2015-2016 estimates that there are 336 million menstruating women in India. The ongoing lockdown to contain the corona virus (COVID-19) pandemic is severely challenging women's and girls' access to menstrual hygiene products and toilets for managing menstruation. The major challenges faced by women and adolescent girls in India related to maintenance of menstrual hygiene during COVID-19 pandemic lockdown are unavailability of sanitary pads, unavailability of sanitation facilities, anxiety and stress over how to manage menstruation, inadequate production and supply of menstrual hygiene products. Objectives: 1.To assess the level of knowledge regarding COVID-19 pandemic. 2. To identify the menstrual health management practices during the lockdown period. 3. To study the role of stakeholders in MHM practice 4.To plan the intervention programmes when the school reopens. Materials and Methods: The study design is an exploratory and descriptive study conducted in and around the Government Higher Secondary School in Sithayankottai of Dindigul District. A structured questionnaire was used as study tool to collect data from the respondents. Simple random sampling was adopted to the study. Totally 60 adolescent girls in the age group of 10-19 years were selected as respondents. The questionnaire was pretested to verify the clarity, absence of ambiguity, objectivity, sequence and simplicity. Based on the pretest necessary corrections and modifications were carried out accordingly before administering for data collection. Data Analysis: The collected data were computed and tabulated in Microsoft excel and analyzed. The findings were described in terms of proportions and percentage. Period of the study was from 31.07.2020 to 08.08.2020

Results: A total of 60 adolescent girls were studied to **assess the MHM Practices among School going Adolescent Girls during Covid-19 Lockdown. The** percentage of MHM practices during lockdown was normal among the adolescent girls. But the awareness of safety measures to be taken to avoid COVID-19 is less among them hence it is need to communicate appropriate messages to them in order to practice the safety measures to avoid COVID-19.

KEYWORDS: School going children, menstrual hygiene, menstrual hygiene products, Challenges, COVID-19, lockdown.

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I. INTRODUCTION

Menstrual Hygiene Management (MHM) or Menstrual Health and Hygiene (MHH) is about access and use of menstrual hygiene products to absorb or collect menstrual blood, privacy to change the materials, and access to facilities to dispose of used menstrual waste materials. It can also include the "broader systemic factors that link menstruation with health, well-being, gender equality, education, equity, empowerment, and rights". In developing countries like India, menstrual hygiene management can be very much challenging for girls and women, where clean water and toilet facilities are often inadequate. An estimated 1.8 billion girls, women, and gender non-binary persons menstruate, yet millions of menstruates across the world cannot manage their

monthly cycle in a dignified and healthy way. Menstrual hygiene management was quite challenging to the menstruating girls and women, prior to Covid- 19 pandemic, due to many social and economical factors. The situation got worse and challenging in different parts of the country during the complete lockdown status due to the outbreak of Covid – 19. The **MHM Challenges were** 1.The ongoing lockdown to contain the corona virus (COVID-19) pandemic is severely challenging women's and girls' access to menstrual hygiene products and toiletries for managing menstruation.

2. Challenges to MHM in relation to COVID19 pandemic lockdown in India have not just led to closed trades, shuttered businesses, and movement of migrant workers but also have far-reaching consequences for many people. During this critical situation, one of the worst-hit sections of society is women who menstruate. Fernandes Kasmin in her article 'Menstrual Hygiene Day 2020: Periods don't stop for pandemics' has said that before the COVID-19 pandemic started, more than 500 million women worldwide did not have what they needed to manage their periods. The current pandemic highlights and further exacerbates the menstruationrelated challenges that many women and girls face around the world. In India, the lockdown and its extension impacts access to menstrual hygiene products and the ability to maintain hygiene during periods in privacy and with dignity for millions of girls and women. Measures to overcome the challenges to MHM related to COVID-19 pandemic; UNICEF Brief on April 2020 summarizes the essential considerations to ensure continuation of MHH during the pandemic as: 1.Ensure MHH supplies and WASH facilities are in place for healthcare workers and patients.2. Mitigate the impact of lack of access to menstrual materials and WASH facilities by providing menstrual materials in NFI and food assistance for girls and women with limited movement or in camps or institutions. Provide basic WASH facilities and services in communities, camps, and institutional settings. Muralidharan Arundati and Mahajan Tanya stated four simple and essential sets of actions which can enable women and girls to manage their periods hygienically within their constrained settings: Firstly, access to essential menstrual products must be eased through private and public sector channels. The government must ensure that the sanitary pads are distributed to girls in the community via its large network of Auxiliary Nurse Midwives (ANMs) along with support from the ASHA frontline workers. In addition, subsidized sanitary pads can be made available for sale through the ration shops. Secondly, for girls and women who are unable to access disposable sanitary pads in required numbers, information on making, using and maintaining homemade cloth pads safely is critical. Thirdly, sanitary pads and underwear must be made available in isolation and quarantine facilities. Separate and safe toilets for women in these facilities, with sufficient water must be established. Dustbins for immediate disposal and downstream management of menstrual waste from the facilities are also necessary. Lastly, information on hygienic use of disposable and reusable menstrual products is needed. Messaging on storing water for washing and maintaining personal hygiene and hygienic maintenance of both disposable and reusable products is needed.

Women and girls may use their menstrual products for longer than recommended, or turn to unhygienic alternatives such as old cloth or rags. Irrespective of what is used, changing menstrual products regularly, washing reusable cloth pads, cleaning the body, and disposing of used materials, is now more challenging than usual. In slums, where many are dependent on community toilets, social distancing measures and mobility restrictions makes it difficult for girls and women to use toilets as frequently as they need to during their menstrual period.

Objectives:1.To assess the level of knowledge regarding COVID-19 pandemic.2.To identify the menstrual health management practices among the school going girls during the lockdown period.3.To study the role of stakeholders in MHM practice 4.To plan the intervention programmes when the school reopens.

Need of the study:

An estimated 1.8 billion girls, women and gender non-binary persons menstruate, yet millions of menstruates across the world cannot manage their monthly cycle in a dignified healthy way. Where menstrual hygiene management was quite challenging prior to Covid-19 pandemic due to many social and economical factors, the situation got worst after the outbreak of Covid-19 and complete lockdown state in different parts of the country. The ongoing lockdown to contain the corona virus (Covid-19) pandemic is severely challenging the girls access to menstrual hygiene products and toilets for managing menstruation. Hence it necessitated to study the condition of the school going adolescent girls of Government Higher Secondary School in Sithayankottai of Dindigul District.

II. MATERIALS AND METHODS

Study and Sampling

The study design is an exploratory and descriptive study conducted among the Government Higher Secondary School in Sithayankottai in Dindigul District. A structured questionnaire was used as study tool to collect data from the respondents. Simple random sampling was adopted to the study. Totally 60 adolescent girls

as respondents were selected in the age group of 10-19 years. The questionnaire was pretested to verify the clarity, absence of ambiguity, objectivity, sequence and simplicity. Based on the pretest necessary corrections and modifications were carried out accordingly before administering the questionnaire.

Data Analysis: The collected data were computed and tabulated in Microsoft excel and analyzed. The findings were described in terms of proportions and percentage. Period of the study was from 31.07.2020 to 08.08.2020

III. Analysis and Results
Table 1. Source of information on Covid-19

Source of information	Basic awareness on COV	ID-19
Source of information	No	%
From peer group	6	10
Television/Radio	22	36.7
Newspaper	3	5
Internet	6	10
All the above	23	38.3
Total	60	100

From the above table, out of the total 60 respondents, we see 36.7% (22 girls) of them got awareness on COVID-19 from TV/Radio that seemed to be the major source of information.

Table 2. How do you feel about Covid-19

Feel about Covid-19	No	%
It is treatable	13	21.7
Highly Dangerous	17	28.3
Affects the human organs	12	20
All the above	18	30
Total	60	100

From the above table, out of the total 60 respondents 28.3% (17 girls) feel that COVID-19 is highly dangerous.

Table 3. How do you protect yourself from the spread of COVID-19

Protect yourself from the spread of COVID-19	No	%
Hand washing periodically	12	20
Using Mask	13	21.7
Social distancing	11	18.3
All the above	24	40
Total	60	100

From the above table, out of the total 60 respondents 40% (24 girls) admitted that to protect themselves they follow all 3 major recommended practices like hand washing, wearing mask, social distancing etc from the virus. The other 60% need proper education on prevention of COVID-19.

Table 4. What are the immunity boosting family practices?

Family practices any precaution	No	%
Inclusive Diet pattern	12	20
Ayurveda medicines	11	18.3
Yoga & Meditation	1	1.7
Regular exercise	30	50
All the above	6	10
Total	60	100

From the above table, out of the total 60 respondents 30 girls i.e. 50% of them were practicing regular exercises to boost their immunity power.

Table 5. What did you do during the school closure period?

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During the school closure period	No	%
Preparing for the examination	1	1.7
Spent time with family members	16	26.6
Engaged in household activities	21	35
Learnt new skills	7	11.7
All the above	15	25
Total	60	100

From the above table, out of the total 60 respondents one third i.e 35% (21 girls) of them were engaged in household activities during the school closure period. 26.6% of them were spending time with their family members.

Table 6. Self-protection measures you plan when school re-opens

Self protection measured you plan when school re-opens	No	%
Wearing mask	15	25
Keeping distance	1	1.7
Hand sanitizer	5	8.3
All the above	39	65
Total	60	100

Out of the total 60 respondents we see 65% (39 girls) of them said that they would be wearing mask, keeping distance, using hand sanitizer when school reopens.

Table 7. Frequency of menstrual period

Enaguency of manetinal paried		Do you have regular menstrual period			
Frequency of menstrual period	Y	Yes		No	
In days	No	%	No	%	
28-30	32	53.3	1	1.7	
31-45	14	23.3	2	3.3	
above 45	0	0	1	1.7	
Can't say	2	3.3	8	13.3	
Total	48	80	12	20	

The above table No.7 reveals that out of the total 60 respondents 20% (12 girls) of them have irregular menstrual period.

Table 8. Did you find any difficulty to receive the sanitary napkins during this lockdown period?

Difficulty to receive	No	0/0
Yes	10	16.7
No	50	83.3
Total	60	100

Out of the total 60 respondents we see 16.7% (10 girls) of them found difficult to receive the sanitary napkins during lockdown period.

Table 9. How did you manage your periods during this lockdown period?

How managed	No	%
Used sanitary napkins	38	63.3
Used cotton cloth	3	5
Both napkin & cloth	19	31.7
Total	60	100

As per the above table No.9 among the 60 respondent girls only 5% (3 girls) of them used cotton cloth to manage their periods during this lockdown whereas 63.3% used only sanitary napkins and the rest 31.7% used both cloth and napkins. From the above table we could infer that the access to sanitary napkin was easy.

Table 10. How did you dispose your used napkin?

Disposal of used napkin	No	%
Burning	45	75
Added in Panchayat waste	15	25
Throwing open space	0	0
Total	60	100

Out of the total 60 respondents we see 75% (45 girls) of them disposed their used napkins in an appropriate way by burning.

Table 11. What kind of bleeding did they suffer during any menstrual periods?

Kind of bleeding	Menstrual problems			
	Painful	Body pain	Fatigue	All the above

	No	%	No	%	No	%	No	%
Mild	3	5	9	15	6	10	1	1.7
Moderate	13	21.7	13	21.7	9	15	2	3.3
Heavy	1	1.7	0	0	0	0	3	5
Total	17	28.4	22	36.6	15	25	6	10

Out of the total 60 respondents 36.6% (22 girls) of them had moderate bleeding with body pain during menstruation.

Table 12. Did you feel any change in body weight?

Body weight	Any weight changes during lockdown period					
Body weight	1-2 kg	%	3-4 kg	%	above 4	%
Increased	25	41.7	2	3.3	1	1.7
Decreased	6	10	0	0	0	0
No change	26	43.3	0	0	0	0
Total	57	95	2	3.3	1	1.7

Out of the total 60 respondents 25 girls (41.7%) of them had observed an increased weight during this lockdown period.

Table 13 Peer group interaction on MHM?

Boom amoun interaction	Periodicity					
Peer group interaction	Regularly		Rare		None	
	No	%	No	%	No	%
Yes	3	5	20	33.3	6	10
No	0	0	3	0	28	0
Total	3	5	23	38.3	34	56.7

As per the above table 38.3% (23 girls) of the total respondents (60) had regular interaction and support from peer group on MHM.

Table 14. What further support services you expect on MHM?

Support services expected on MHM	No	%
Psychological support	10	16.7
Direct supply	21	35
Guidance	15	25
All the above	14	23.3
Total	60	100

The above table No.14 reveals that 35% (21 girls) of the respondents were expecting direct supply of material oriented support for MHM.

Table 15. What kind of family support you received during menstruation?

Family support received	No	%
Emotional support	3	5
Giving her rest	28	46.6
Balanced diet	10	16.7
All the above	19	31.7
Total	60	100

46.6% (28 girls) of the total respondents had said that they got full rest during menstruation and 31.7% said that they received emotional support, full rest and balanced diet during the menstrual period.

Table 16. Is there any history of dysfunctional uterine bleeding in your family?

Any history of dysfunctional		
uterine bleeding in your family	No	%
Yes	8	13.3
No	52	86.7
Total	60	100

Out of the total 60 respondents 13.3% (8 girls) of the respondents had said that their family had the dysfunctional uterine bleeding problem with their family members.

IV. CONCLUSION

In research area, the lockdown and its extension impacts had a negative impact on menstrual hygiene products and the ability to maintain hygiene during periods in privacy and with dignity for thousands of girls and women. And therefore it is the need of the hour to ensure a gender-sensitive and inclusive response to the COVID-19 crisis so that the menstrual health and hygiene needs of women and girls are met especially to the most marginalized and hard to reach populations. The health care professional must take initiative to create awareness among the public regarding the need of safe practices and adequate maintenance of menstrual hygiene. Government should adopt new policies so that adequate facilities and uninterrupted supplies of menstrual hygiene products can be made available for all the women and adolescent girls of the District and the State.

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