

MENSTRUAL RESTRICTIONS: BARRIER TO POSITIVE COMMUNICATION ON MENARCHE

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Abstract

The adolescent is a period of transition from childhood to adulthood which results in physical changes, biological changes, and changes in the hormonal phenomenon. These changes bring out psycho-social, behavioural and sexual maturation. Both pubertal development and sexual maturation take place during adolescent stage. In girls, the adolescent phase is marked by the first occurrence of menstruation which is known as menarche. For most of the adolescent girls, mothers are found to be the primary sources of information and knowledge about menstruation. However mothers pass on negative messages by imposing menstrual restrictions on their daughters which they followed during menstruation. Therefore it is important to ensure that effective and positive communication must happen between the mother and her daughter as it will affect future experiences and understanding of daughter regarding menstruation. Thus the present study focuses on menstrual restrictions which act as barrier to effective and positive communication on menstruation between mothers and their adolescent daughters.

Keywords; Adolescent, Menstruation, Positive Communication, Mother, Daughter

Introduction

In the Asian region, the subject of menstruation is always surrounded by secrecy as far as communication on menstruation is concerned. The process of menstruation has always been related to dirt, taboos and also result in the various activities of prohibitions in the lives of Indian women especially in rural areas. The subject of menstruation comes under the private matter and hence it lacks communication. As a result, the first experience of menarche among young girls is traumatic. The education on the physiology of menstruation is also absent and further, it is not linked with sexual development and fertility. The adolescent girls thus feel embarrassed and they hesitate to talk to talk about their experiences during their menstrual days. Further the negative attitudes towards menstruation which called the phenomenon as 'impure' results in restrictions on women such as not performing of domestic and religious activities. These restrictions are no interaction with men, no touching of religious books or food, no entering in the kitchen and visiting religious places. Adolescent girls are forced to disconnect themselves with the outside world and hence they remain isolated which brings inferiority and neglect towards their bodies during menstruation. The physical maturity during menstruation not only affect a young girl's sexuality and her reproductive status but also simultaneously their overall health status. They faced health threats which have serious health consequences, neglecting of which can result in potential reproductive health problems. During the adolescent phase, the young girls require both mental and emotional

support to assure them that menstruation is not an embarrassing phase rather it is a natural and healthy phenomenon. Mothers who are the primary sources of information and knowledge regarding menstruation for most of the adolescent girls play a very important role in this regard. However they failed to address their daughters issues and needs due to various reasons such as their own lack of knowledge on menstruation, negative attitude resulted from bad experiences during their own menstrual days and societal norms and barriers. Thus the adolescent girls have lack of knowledge about the physical changes that are happening in their bodies during puberty and attainment of menarche. As a result, they do not know understand or are confused on how to cope with these changes during, menstruation.

Adolescents come under vulnerable groups as both their social status and health status are critical during the adolescent phase. Menstruation is connected with many misconceptions and practices resulting severe health outcomes. It is surrounded by secrecy which our society carried as cultural norms. Certain restrictions that are imposed on adolescent girls during menstruation make them isolated from the rest of the world and most probably incorporating negative attitude and behaviour towards this phenomenon. Adolescents girls are heavily dependent on women informer particularly mothers for information and knowledge on menstruation. However, mothers themselves do not know about the biological facts and feel uncomfortable discussing menstruation. Their advice is often limited to practical knowledge and tends to reinforce negative beliefs on menstruation. In India and over the globe, menstruation is not seen as a health perspective rather it is encompassed by a long list of 'what to do' and 'what not to do'. There is an absence of proper guidance on menstrual preparedness and management for adolescent girls. And thus these taboos not only restrict the freedom of women and young girls but also restrict them to access health services for their betterment and development. These restrictions act as prominent barrier in positive communication about menstruation. Hence it has become necessary to motivate mothers to pass on positivity about menstruation to their adolescent daughters. It will not only improve their awareness level on the subject but also their quality of life.

Literature Review

Barathalakshmi and others (2012) studied the causes that create barriers for mother in communicating regarding menstruation with her daughter. They found that very few mothers indulge in discussion regarding menstruation with their daughters. The authors also stated that her negative attitude towards the phenomenon and low level of education create fear and anxiety among adolescent girls.

Gupta and Gupta (2001) found that mothers who have a negative attitude towards menstruation transfer the same to her daughters. The content of communication regarding menstruation was only limited to the technological aspects and restrictions. It was also found that the women informant hardly dealt with aetiology and significance of this biological process. The author suggested that the mothers should talk to her daughter about the process, causes of menstruation, and relations of menstruation process with fertility and reproduction with her daughters.

House and others (2012) in their article mentioned that mothers have limited knowledge regarding menstruation. They passed on cultural taboos through restrictions they put on their daughter during menstruation. Further, the authors stated that not only women but men should also be educated on menstrual hygiene so that they can support their daughters, wives, sisters, and mothers.

Lee (2000) focused on the supportive nature of the mother during menstruation. She mentions that the mothers are personally supportive and emotionally engaged with her daughters during their menstrual days. Emotional support by mother develops positive experiences of menarche whereas unsupportive mothers develop negative experiences of menarche in their daughters. Mothers' support is very important to help her daughters to overcome misconceptions and confusion regarding menstruation. The authors also mentioned in her study about increased openness on the issues of menstruation in the contemporary society in comparison to past studies which states menstruation is surrounded by confusion and restrictions.

Mahon and Fernades (2010) in their case study on Water Aid Programme in India found that menstrual taboos are highly prevalent in the society. Young women, men and elderly women found to be against towards discussion on menstruation. The study also revealed that rural communities are still deprived of basic information on menstruation. Gender inequalities, cultural perceptions, and beliefs are found to be major obstacles in the implementation of practical solutions.

Singh, Bandhani, and Malik (2010) concluded their study stating that there is poor communication between mother and daughter regarding menstruation because of traditional taboos around menstruation. Therefore the authors suggested that both parents and their daughters need to be encouraged to discuss the subjects openly.

Objectives

1. To find out the contents on menstrual restrictions communicated by mothers to their adolescent daughters.
2. To find out what kind of negative messages daughters receive from their mothers while performing menstrual restrictions.

Methodology

The study was conducted in Nuaguda village of Koraput district. Total 52 respondents that is 26 mothers and 26 adolescent daughters were selected for the study. The daughters who have attained menarche were selected for the study. The age of the adolescent daughters was between 9-18 years. Purposive (Non-probability) sampling technique was employed to enroll women and adolescents girls in the study. The study was conducted from October 2017 to December 2017.

A pre-designed, pretested and structured schedule was designed by the investigator which included the demographic information like age, education, occupation, religion of the

respondents. Personal information like age at menarche, awareness before menarche and source of information about menstruation were also documented.

Results

The table given below shows the age of the respondents (adolescent daughters) in the village during the research study. Most of them (34.6%) are of 15 years, (26.9%) are of 17 years, and (23.1%) are of 16 years. Very few are 18 years of age (15.4%) as shown in Table 1. Table 2 shows the age of both mothers and adolescent daughters when they attained menarche. Menarche is the age when the girls get their first period. In the present study out of 26 respondents of the mothers, (50%) attained their menarche at the age of 12, (26.9%) of the mothers reached menarche at the age of 13 and (23.1%) attained menarche at the age of 14. In case of adolescent daughters, (53.8 %) of the respondents have got their menarche at the age of 12, (19.2%) at the age of 13, (15.4%) at the age of 11, (7.7%) at the age of 14 and (3.8%) at the age of 9. The topics on which mothers mostly talk to their daughters are menstrual restrictions followed by menstrual health and hygiene (95.6%) and menstruation process (88.5%) (Figure 1). Table 3 shows the menstrual restrictions that are communicated by mothers to their adolescent daughters. All mothers communicate menstrual restrictions, list of what to 'Do' and what 'Don't' to their daughters. The adolescent daughters are not allowed to enter kitchen. Touching religious things are also forbidden. The girls cannot touch any male during menstruation. They sleep separately when they attained menstruation.

Table 1. Age of the Adolescent Daughters

Age (Years)	No. of Respondents	Percentage (%)
15	9	34.6
16	6	23.1
17	7	26.9
18	4	15.4
Total	26	100

Table 2. Age of Mothers and Adolescent Daughters at Menarche

Age at Menarche (Years)	Mothers (No. %)	Adolescent Daughters (No. %)
9	0(0.0)	1 (3.8)
11	0(0.0)	4 (15.4)
12	13 (50)	14 (53.8)
13	7 (26.9)	5 (19.2)
14	6 (23.1)	2 (7.7)
Total	26	26

Figure 1. Topics discussed with Adolescent Daughters about Menstruation (%)

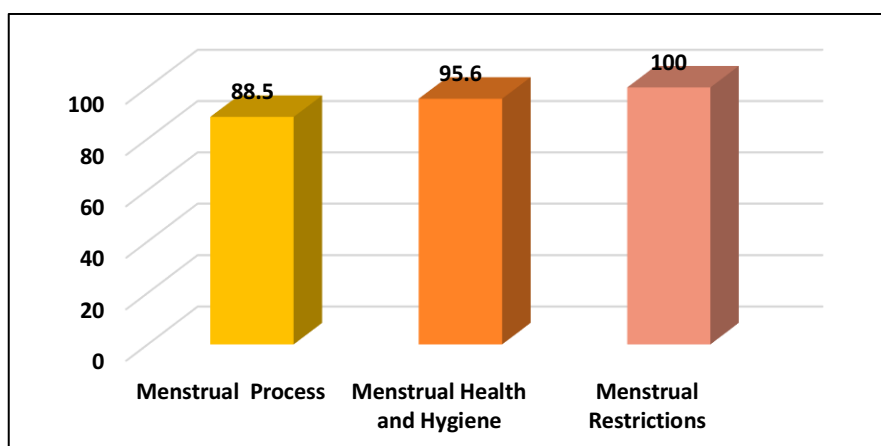


Table 3. Menstrual Restrictions communicated by Mothers

Menstrual Restrictions	Yes (No. %)	No (No. %)	Total
Not to do physical activity	1 (3.8)	25 (96.2)	26
No to enter kitchen/cooking	26 (100)	0 (0.0)	26
Not to touch religious things	26 (100)	0 (0.0)	26
Not to touch male person	26 (100)	0 (0.0)	26
Not to attend school	0 (0.0)	26 (100)	26
Not to play with boys	26 (100)	0 (0.0)	26
Not to eat certain kind of food	0 (0.0)	26 (100)	26
Not to touch pickles	0 (0.0)	26 (100)	26
To sleep separately	26 (100)	0 (0.0)	26

Discussion

In the study it was found that the adolescent girls are getting their menarche at a very early age that is 9 and 11. However, if we look at Table 2, the highest number of respondents of mothers and daughters, both of them got their menarche at the age of 12 which is also the average age of menarche. Mothers discussed with their daughters about menstruation so that their daughters can manage menstruation effectively. Mothers mostly guide their daughters for maintaining health and hygiene during menstruation. Communication about practising

restrictions during menstruation is also prominent. In this study, it was found mothers also told their daughters regarding social and cultural restrictions which should be followed during menstruation. However, discussion regarding menstruation process found to be less as compared to menstrual health and hygiene and menstrual restrictions. Menstruation being an important reproductive process is surrounded by social and cultural restrictions. The study showed that during menstruation the adolescent girls followed various menstrual restrictions. These restrictions are communicated to them none other than by their mothers who have been performing these restrictions since their adolescent phase. In the present study mothers are found to put restrictions on their daughters during menstruation. The most prominent are not to enter kitchen, not to touch religious things, not to touch male person, not to play with boys and sleep separately. Some mothers said that in their culture it is believed that if a menstruated girl touch a male person in her family it will bring bad luck to them, for example, they will feel pain in their ear. Few mothers also found not to allow their daughters to touch themselves during menstruation. However the adolescent daughters do all household works including cleaning of utensils during menstruation. As they are not allowed to enter into the kitchen, mothers took out utensils from the kitchen and keep outside for cleaning. Only few mothers do not allow their daughters to do any physical activity because of menstrual pain. It was also found in the study that there is no restrictions in attending the school, eating certain kind of food (sweet or sour), and touching the pickles.

Thus it can be analysed from the discussion that mothers not only communicate about menstruation but also myths and false beliefs in the form of menstrual restrictions. Mothers mostly asked their daughters not to enter kitchen, not to touch religious things, not to touch male person, not to play with boys and to sleep separately during menstruation. The negative messages which daughters received from their mothers are menstruated girl should not touch a male person in her family as it will bring bad luck to them, for example, they will feel pain in their ear. Adolescent girls said that they attend school during menstruation. And while in school they touch boys and play with them. They do not follow restriction in schools. However during their first period they do not go to school and remain outside the house for seven days in a small hut or verandah where they will eat and sleep. They eat only khichadi during their first period. After the seven days they will take bath at the river bank and after conducting few rituals they will enter the house. A special ceremony is then conducted called as 'BadaKaniyaBhoujii' where few people from the neighbourhood are invited for lunch. A girl is also not allowed to visit a marriage ceremony or any kind of celebration during their menstrual days because it is believed as inauspicious.

Conclusion

From the study, it can be concluded the adolescent daughters mostly learned from their mothers about the most significant event of life. It cannot be denied that mothers also pass negative messages about menstruation to their daughters through the communication of social and cultural restrictions to be followed during menstruation. Mothers, thus, need to be encouraged to communicate positivity about menstruation to their daughters. Overall mothers have an important role in supporting their daughters to manage the menstruation effectively.

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