



Factors Associated with Menstrual Hygiene, Workplace Sanitation Practices, and Self- Reported Urogenital Symptoms among Female Workers in the Sylhet Division, Bangladesh

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Outline of Presentation

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Background

Effective menstrual hygiene practices require women using clean materials to absorb or collect menstrual blood, which can be changed privately as needed during the menstrual period.

Poor menstrual hygiene management can adversely impact the health and psychosocial well-being of women and girls.

Literature Review

A study conducted in Dhaka's slums, revealed that approximately 95% of women and 90% of adolescent girls routinely reused menstrual materials without adequate hygiene, leading to vaginal and urinary tract infections, and pregnancy complications (Ahmed & Yesmin, 2008).

Furthermore, qualitative research on women's menstrual experiences in the workplace in Uganda highlighted significant concerns and discomfort related to urogenital symptoms (Hennegan et al., 2020).

Problem Statement

Cultural constraints and discriminatory gender roles intensify women's challenges during menstruation.

In many cases, females are hesitant to share their issues, leading to various types of reproductive tract infections.

Rationale of the Study

Despite increased recognition of menstrual health's importance, research and interventions have primarily targeted adolescents.

Since working women spend substantial time in their workplaces, understanding their menstrual practices and related needs is crucial for identifying intervention opportunities.

Research Questions

- What are the menstrual care practices of working women in Sylhet Division, Bangladesh?
- What is the prevalence of self-reported urogenital symptoms among this population?
- What are the associations between menstrual care practices and self-reported urogenital symptoms?

Hypothesis

The self-reported urogenital symptoms are likely associated with the type and cleanliness of menstrual materials used, as well as infrequent handwashing and urinary restriction.

Aims and Objectives

General objectives

The study aims to examine menstrual care practices, self-reported urogenital symptoms prevalence, and their associations among working women in Sylhet Division, Bangladesh.

Aims and Objectives

Specific objectives

- To assess the menstrual care practices of working women in Sylhet Division, Bangladesh.
- To assess the prevalence of self-reported urogenital symptoms among this population.
- To identify the associations between menstrual care practices and self-reported urogenital symptoms.

Methods and Techniques

- **Study design:** Mixed-method approach
- **Study type:** Cross-sectional study
- **Study population:** Female workers
- **Study area:** Four districts within the Sylhet division
- **Sampling design:** A two-stage cluster sampling technique

Sample Size Estimation

Districts	Categories	Total Sample
Habiganj	Marketplace = 30	120
Moulvibazar	Healthcare facility = 30	120
Sunamganj	School = 30	120
Sylhet	Tea/Stone worker = 30	120
Total		480

Conceptual Framework

Dependent Variable

Urogenital symptoms

Independent Variables

Menstrual hygiene practices

Cofounders

- Urban and Rural Geographic Areas
- Administrative Districts
- Age Groups
- Educational Attainment
- Educational Level of Father/Husband/Partner
- Self-reported Economic Status
- Religious Affiliation
- Household Size
- Access to Mass Media
- Workplace type
- Poverty score
- Self-reported general health

Data Collection Tools

Quantitative data will be collected using a semi-structured questionnaire, while qualitative data will be obtained through an in-depth open-ended questionnaire.

Thorough checks will be conducted to ensure data consistency, followed by coding, categorization, and cleaning.

Statistical Analysis

Analysis will involve descriptive statistics and inferential tests, performed using the R programming language. Significance will be determined at a 5% level with a 95% confidence interval.

Ethical Consideration

Ethical clearance will be obtained from Shahjalal University of Science and Technology, Sylhet, before beginning data collection. Informed written consent will be obtained from all participants before their involvement in the study.

Expected Outcomes

This study aims to shed light on the urogenital symptoms and factors like menstrual material cleanliness, handwashing, and urinary restriction.

The findings will inform policymakers on creating accessible, clean, and affordable sanitation infrastructure to support women's urinary needs in the workplace and mitigate the burden of urogenital infections.

Work Plan

Activities	April	May	June
Designing the study			
Approval of proposal			
Development of Data Collection Tools			
Data Collection, Entry & Analysis			
Report Writing			
Submission & Approval of manuscript			
Printing, Binding and Submission			

Budget

Activities	Total Taka
Personal Cost (PI, data analyst, and data entry)	60000.00
Field Activity Cost (Field supervisor, data enumerator, and travel cost)	30000.00
Transportation Cost	10000.00
Professional Service (Honorarium for reviewer and language expert)	40000.00
General operating cost (findings printing)	20000.00
Total	160000.00

References

Ahmed, R., & Yesmin, K. (2008). Menstrual hygiene: Breaking the silence. Beyond Construction: Use by All. A Collection of Case Studies from Sanitation and Hygiene Promotion Practitioners in South Asia.

Hennegan, J., Kibira, S. P. S., Exum, N. G., Schwab, K. J., Makumbi, F. E., & Bukenya, J. (2020). 'I do what a woman should do': a grounded theory study of women's menstrual experiences at work in Mukono District, Uganda.

Thank you!

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