**Menstrual Hygiene and Practices among the Adolescent Girls of ‘Rupsha Char Basti’: An Anthropological Exploration**

**Introduction**

Menstruation, commonly known as a period, is a natural physiological process that occurs in females typically between puberty and menopause. It involves the shedding of the uterine lining, accompanied by bleeding, as part of the menstrual cycle. The menstrual cycle is regulated by hormonal fluctuations, primarily oestrogen and progesterone. While menstruation is a normal part of a woman's life, cultural and societal attitudes toward it vary. Some societies celebrate it, while others have stigmas associated with it. Over time, efforts have been made to educate and reduce the stigma surrounding menstruation, promoting a healthier understanding of this natural bodily function.

According to the World Health Organization, “Menstruation is the process in which the uterus sheds blood and tissue through the vagina”. (WHO, 2022). The term “menstruation” derives from the Latin word “menses”, which means moon, and refers to the lunar month, which lasts about 28 days. (Abdullah, 2022).

The onset of menstruation is an important event of a women’s lifecycle. Adolescence, the period of transition from childhood to adulthood, marks the onset of menstruation for a girl. The World Health Organization (WHO) defines adolescents as individuals between 10 and 19 years of age. A female human body’s first menstruation is called ‘menarche’. The age of menarche differs from person to person, but on average, menarche occurs at the age of 13. (Bhakta & Duque, 2023).

Maintaining hygiene during menstruation is an essential aspect of women's lives, addressing crucial concerns related to the health and well-being of the female population.  (Deshpande et al., 2018). The United Nations (2018) defines adequate menstrual hygiene management 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.” The United Nations millennium development goal 2 and 3 directly focused on menstrual hygiene and management for universal education, and on gender equality and women empowerment. (Mohite & Mohite, 2016).

Studying menstrual hygiene and practices are important as they have a positive impact on women’s lives. Examining the advantages of practising proper menstrual hygiene allows us to dispel misconceptions, question societal expectations, and motivate individuals, communities, and policymakers to give importance to menstrual health.

Superstitions and cultural taboos surrounding menstruation have been widespread, influencing the behaviour of menstruating women. Examples, as described by James Frazer in ‘The Golden Bough’ (1951), include beliefs that menstrual blood harms plants and animals, wells dry up if drawn by a menstruating woman, men fall ill from contact, and various substances like beer, wine, vinegar, milk and jam are spoiled if touched. These beliefs have been reported worldwide including Europe, Asia, Africa, Australia and the Americas. (Uppal, Rana & Batta, 2022). These beliefs are also noticed in contemporary notions restricting activities like bathing, swimming, heavy housework, sports, and specific dietary choices during menstruation. (Williams, 1983).

In India, women experiencing menstruation are required to move to a separate room for three days. They face restrictions such as avoiding contact with pickles and *papads* due to beliefs that these items may spoil, being prohibited from entering the kitchen, bedroom, and puja room, and encountering limitations on sexual activity during this time. (Sowjanya, 2019). The blood that comes out during menstruation is stigmatised as ‘dirty blood’ which leads to the belief of segregation and untouchability. (Garg et al., 2001).

Not only culturally, rather numerous religions also maintain lasting beliefs and ideas concerning menstruation, with commonalities in taboos across them. In Judaism, menstruating women are deemed ritually unclean, while Christianity views them as potentially hazardous. Hinduism labels them impure, Buddhism as polluted, and Islam, in contrast, doesn't perceive menstruating women as possessing any form of “contagious uncleanness” but she is considered ritually impure and is restricted to perform religious activities such as praying and fasting. (Abdullah, 2022).

This research aims to explore the comprehension of menstrual hygiene practices among adolescent girls residing in an urban slum, 'Rupsha Char Basti' in Khulna. Moreover, It delves into the influence of male family members on the girls' hygiene practices and addresses their perceptions. The study also highlights the challenges faced by these girls in managing menstrual hygiene due to a scarcity of safe water in the mentioned slum.

**Research Question and Study Objectives**

R.Q. What are the knowledgeand primary sources of information regarding menstruation among the study participants, what are their beliefs regarding menstrual practice and how does this correlate with their hygiene practices?

To meet our research question we chose three objectives for our study.

* To explore the adolescent girls’ existing knowledge about menstrual hygiene.
* To comprehend their menstrual hygiene practice.
* To understand the perception of the male members of their family regarding menstrual practice

**Literature Review**

**Rationality of the Study**

**Methodology**

**Study design**

**Qualitative and exploratory study (read exploratory)**

**Study area**

This study was conducted in Khulna city, more specifically in the *‘Rupsha Beribadh Notun Bazar Char Basti’* of Khulna. Add mapp with description.

**Duration of Study**

**Study Population**

There were 30 families consisting of around 200 people in the study area. Study sample were taken from the population randomly.

**Sampling**

In this study, we mainly used the random sampling method. It is mainly a non-probability sampling method and it occurs when elements selected for the sample are chosen by the judgement of the researcher (Black, 2010). Why random sampling? In this study, our total number of participants were 16 including 5 male participants along with 11 female participants. Among them 15 were the residents if the ‘Rupsha Char Basti’ and 1 was a pharmacist.

**Inclusion Criteria and**

The study sample consisted of adolescent girls between the ages of 10-19 years. Besides, we have also included people from various professions who reside in their surroundings.

The research didn't reach any participant under the age of 10 or anyone outside the ‘Rupsha Char Basti’ area.

**Sources of Data**

**Primary Source**

Primary data were collected through interviewing people and through direct observation. In-depth interview, informal group discussion and case studies have been taken from native people. All data were collected through unstructured interview guidelines.

**Secondary Source**

Secondary data was also used to conduct the research. The data were collected from the reports, including books, journals, research papers, and articles. These secondary sources were chosen for their dependability and consistency with the objectives of the research.

**Searching Strategy**

Literatures were chosen for the study by searching on Google Scholar and Jstor by searching the keywords *menstruation, menarche, menstrual hygiene, adolescent girl, taboo.*

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**Data Collection process**

**Observation**

Observation is the technique where researchers collect data through observing. The surrounding of the Char Basti area has been observed. First of all we observed their households. Then we tried to observe our participants. We took the observation notes. their reaction their facial expressions, , their facial expressions (shyness, hesitation, discomfort etc.) were also noticed. When they felt uncomfortable on any issue we tried to Furthermore, the analysis of the observation notes helped us to understand them well. Source of clean water, reactions of the residents

**Informal Interview**

For interviewing we used informal interview method. For informal interview we followed unstructured interview guidelines. Unstructured interview guidelines rely on asking participants questions to collect data on a topic. Also known as non-directive interviewing, unstructured interviews do not have a set pattern and questions are not arranged in advance, but typically still covers certain topics. These interviews are open-ended and are spontaneous in form.

**In-Depth Interview**

In-depth interviews are a qualitative data collection method that involves direct, one-on-one engagement with individual participants. We found 4 participants from ‘Rupsha Char Basti’, who gave us core information about our objectives. Thus 4 IDIs were conducted so that individual insight about the knowledge, attitude and practice of menstrual hygiene can be gained. Why in this study

**Other Tools**

We used camera, audio recordings, notebook, pen for data collection.

**Findings**

**Discussion**