

Menstrual Health and Challenges Faced by The Adolescent Girls Among Kadar Tribal Community

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Abstract

Adolescence is a crucial phase that bridges the gap between childhood and adulthood. It is a time of transition that has a significant impact on health outcomes throughout one's life. During this period, various aspects such as emotional, physical, cognitive, social, cultural, educational, and economic resources are established, which serve as the building blocks for the future. Menstruation often presents several challenges for women, including physical discomfort, psychological concerns, and other related issues. Menstrual diseases encompass a range of conditions. Dysmenorrhea is the medical term for experiencing terrible cramps during menstruation. Certain tribes adhered to detrimental cultural customs during menstruation. It has an impact on the girls' health. Presently, several cultures possess a deficiency in understanding regarding menstruation. They exhibit inadequate management of menstruation supplies, including low-cost pads and unwashed garments. Certain tribes experience limited access to water facilities, sanitation, and other amenities both at home and in school. The majority of the tribes are devoid of financial aid. They rely on their daily salaries. They encounter challenges when attempting to acquire menstrual supplies. Tribes adhere to specific cultural practices. These cultural behaviours have detrimental effects on adolescent girls. They are prohibited from consuming food and participating in certain ceremonial activities. This study aims to comprehensively examine the health conditions experienced by tribal adolescent girls during menstruation, assess the presence of any periods of poverty among them, and explore the taboos and myths surrounding menstruation within tribal communities.

Keywords: Challenges, Tribal, Adolescent girls, Menstruation, Health

Background of the Study

The tribal people is dispersed throughout the Indian territory. The tribal communities encounter systemic prejudice within the Indian society. Unlike the tribes, they have experienced marginalisation due to their ethnic background. The factors contributing to social marginalisation encompass sexual orientation and gender, religion or ethnicity, location or history, underrepresentation in political arenas, diverse traditions or rituals, distinct language or clothes, caste and class, poverty, and race, among others. Adolescence refers to the transitional period of development that occurs between childhood and maturity, including the ages of 10 to 19. Tribal adolescent females have various challenges, including malnutrition, menstrual problems, and so on. Menstruation is a prevalent occurrence in the lives of all women. Menstruation is universally stigmatised around the globe. Menstruation is a physiological phenomenon. Oestrogen and progesterone are released by the ovaries. She encountered numerous challenges during her menstrual cycle. Such include physical ailments and psychological disorders. Possible aetiologies for these menstrual disturbances include hormone imbalances, infections, specific drugs, and other factors. The Tribal populations exhibit diverse civilizations, distinct ways of life, varied customs, and so forth. The tribal adolescent girls are influenced by these cultures, lifestyles, dietary preferences, and understanding of menstruation. Certain Tribal communities were unable to cope with their monthly discomfort, resulting in their absence from school. It had an impact on their education. Tribes exhibit diverse lifestyles apart from those of the mainstream population.

Tribal communities inhabit forested and hilly regions. Due of their reliance on natural resources. They are involved in diverse occupations, including the sale of natural resources, hunting, and cultivation. Their living situations exhibit a complete disparity. These might have either positive or bad connotations. Negative individuals have numerous challenges. Issues pertaining to education, health, and other connected matters. Regular menstruation is indicative of a woman's physiological state being within the normal range. There is a plethora of studies pertaining to menarche and its associated concerns. A study was done to examine the impact of socioeconomic and dietary factors on the onset of menarche in Nigerian schoolgirls. The study included a sample of 352 secondary school girls randomly selected from urban locations. The findings indicated that there were no significant differences in biophysical parameters between the girls who had not yet reached menarche and those who had. The achievement of menarche was closely linked to the individual's nutritional state. The user's text is "A." According to Abioye-Kuteyi's study in 1997, the adolescent females belonging to a tribal community in Rajasthan lacked knowledge about menstruation issues when they encountered them for the first time. Her movement and behaviour have been subject to certain restrictions. Tribal adolescent girls who engage in risky menstruation practices have a prevalence of respiratory tract infections (RTIs) that is over three times greater than those who do not. Reproductive and sexual health have significant consequences. Anoop Khanan, R. S. Goyal, and Rahul Bhaswar published a paper in 2005. An investigation was carried out on the process of pubertal development in adolescent females. It resembles a review format. The objective of the review is to present a comprehensive summary of recent research conducted in the United States as well as other global regions. The writer's perspective is that if any pubertal changes occur before the age of eight, it is necessary to do a thorough study and reassessment. Most of these early growing females are typical girls who experience puberty at the younger end of the age range. Multiple studies indicate a decline in the age at which puberty begins over the last four decades, ranging from 0.5 to 1.0 years. Notably, black girls tend to experience puberty onset 0.5 percentage points to 1 year earlier than their counterparts. Paul Kaplowitz published a work in 2006.

In 2006, the World Health Organisation released a progress report on the health and development of children and adolescents. Adolescent health is a matter of utmost importance in global health, and obtaining data on the extent of health problems among teenagers is highly crucial. Their health is adversely impacted by malnutrition and a deficiency in understanding menstruation. During menstruation, women need adequate hygiene, which encompasses access to water and sanitary facilities. However, the majority of the girls rejected the training session developed by WHO, in partnership with SEARO and AFRO, which aimed to enhance their skills and knowledge in adolescent programme mapping and measurement, as well as the health sector-based strategy for country programming (2006). A study was undertaken by Margaret L. Stubbs and Ann N.Y. Acad to examine cultural views and practices related to menarche and adolescent menstruation in the United States. This is a research that provides a detailed description of the issue. The study primarily centres on the girl's perspectives and beliefs regarding menstruation. The researcher discovers a lack of awareness among the girls regarding menstruation, and the menstrual-related schooling offers contradictory facts. Just like menstruation, it is a normal and natural occurrence, but it should be kept private. Researchers discovered that the girl harbours a negative disposition towards menstruation. They hold pessimistic attitudes towards menstruation. The source cited is a publication titled "Margaret L. Stubbs and Ann N.Y. Acad" from the year 2008. Filipa Calado conducted a study to determine the frequency of adolescent problem gambling. This is a comprehensive analysis of the most current studies conducted in a methodical manner. Prior study has indicated that gaming is a widely favoured pursuit among individuals. Numerous scholars have conducted studies on adolescent gambling and the issue of problem gambling. The study's findings indicate that the majority of girls fulfil the criteria for problem gambling. A small proportion of girls experience gambling-related issues. Filipa Calado (2017). An investigation into the menstrual hygiene behaviours of adolescent females in metropolitan areas of northeastern Ethiopia. In underdeveloped nations, inadequate menstrual hygiene habits have a significant impact on the dignity, well-being, and health of schoolgirls. These practices also contribute to school absenteeism, poor academic performance, and school dropout rates. A cross-sectional study was conducted in Dessie City, located in north-eastern Ethiopia, to investigate a sample of 546 high school students picked randomly from several schools. Merely a small number of students reported adhering to proper menstrual hygiene routines. Several factors strongly

linked to positive menstrual hygiene practices include being female high school students aged 16-18, being in grade level 10, having mothers who completed primary, secondary, or college education, experiencing regular menstrual cycles, possessing adequate knowledge about menstruation, engaging in discussions about menstrual hygiene with friends, and receiving financial support from family members to purchase sanitary pads (Habtegiorgis, 2021). Risa Mitsuhashi conducted a study on the parameters linked to the occurrence and intensity of symptoms related to menstruation. This study is a form of systematic review and meta-analysis. The primary objective of the study is to ascertain the parameters linked to the occurrence and intensity of symptoms connected to menstruation. The researcher discovered a total of 77 studies. The majority of the ladies encountered primary dysmenorrhea. The symptoms comprise an erratic menstrual cycle, insufficient sleep, heightened stress levels, and premenstrual syndrome linked to body mass index. The majority of women encounter issues associated to menstruation. Risa Mitsuhashi (2022) is subject to inadequate treatment.

Methodology

The primary objective of this study is to examine the specific difficulties encountered by adolescent girls from tribal communities during menstruation. Additionally, it aims to analyse the socio-economic characteristics of the participants, the health status of these girls during their menstrual cycle, the duration of poverty experienced by them, and the prevailing misconceptions about menstruation within their social context. The study was conducted among adolescent girls belonging to the Kadar tribal community in Kerala, India. The researcher gathered the data using the interview approach. The research was carried out on a sample of 61 Tribal teenage girls.

Findings

and

Analysis

The study provides insights on the menstrual health status of adolescent girls from tribal communities. The health status of tribal adolescent girls is quite substandard. The majority of tribal adolescent girls experience menarche between the ages of 10 and 13. Premature onset of menstruation results in several health complications for adolescent females. 29.5 percent of adolescent girls from tribal communities experience early onset of menstruation. Their age at menarche is less than 10. The causes of early menarche include hormonal and genetic changes. Early menarche is linked to physical and psychological issues, such as stunted growth and increased anxiety. Dysmenorrhea can be attributed to irregular menstrual cycles. Irregular menstrual cycles are experienced by 52.5 percent of adolescent girls from tribal communities. Menstruation, often known as the menstrual cycle, has a duration of twenty-eight days, starting from the onset of one period to the onset of the next. Fluctuations lasting from three to five days are considered typical. But there is a significant gap; it is the irregularity of the menstruation. Excessive haemorrhaging is an additional indication of dysmenorrhea. 36 Tribal adolescent girls have significant bleeding during their menstruation. Anaemia occurs as a result of excessive bleeding and subsequent depletion of red blood cells. Haemorrhage causes a fast decrease in blood pressure, leading to dizziness in females. Tribal adolescent females have a decline in their physical state due to the gradual blood loss resulting from heavy bleeding. Due to several menstruation concerns, such as excessive bleeding, abdominal pain, and back pain during menstruation, some are unable to focus on their regular duties. A total of 38 tribal adolescent females exhibit a lack of concentration in their daily activities. Dysmenorrhea manifests as one of its symptoms. Many Tribal adolescent females have an inability to focus on daily activities. It results in numerous psychological problems. 83.6 percent of adolescent girls from tribal communities experience physical debilitation during menstruation. Dysmenorrhea and anaemia might be attributed to weakness. Fatigue is another symptom of anemia. 54.1 percent of adolescent females from tribal communities experience exhaustion when menstruating. People who endure anemia often experience weariness. Excessive menstrual bleeding frequently leads to feelings of weariness in girls. Dizziness is the second sign of anemia. A total of 38 tribal adolescent females have vertigo during menstruation. Some individuals experience psychological issues during their menstrual cycle. 54.1 percent of adolescent females from Tribal communities experience discomfort throughout their menstrual periods. A significant number of females experience mood fluctuations during menstruation. Minority girls experience loneliness. 38 tribal adolescent girls use drugs. Intoxicating substances such as alcohol. Early substance usage will have an impact on their health. It causes a variety of menstruation problems. The study demonstrates that period poverty is a prevailing circumstance. It is the lack of information of proper menstruation and some financial concerns that make it difficult to acquire menstrual goods. Most Tribal adolescent girls do not seek medical attention or visit a hospital for managing their menstrual cycle, relying instead on folk cures. Anemia and other menstruation diseases are severe. It needs correct treatment to prevent the condition.

However, just a few adolescent females contact a doctor to handle their menstruation difficulties. understanding of menstruation before the menarche is greater compared to the low understanding among Tribal adolescent girls. 50.9 percent of adolescent girls from Tribal communities has knowledge about menstruation. Friends and classmates are the primary channels via which information about menstruation is exchanged. The family members did not discuss information regarding menstruation before their menarche. A staggering 68.8 percent of parents of tribal adolescent females fail to provide any information to their children. Based on the previous research, it is evident that a significant number of parents possess a lower level of education. A significant number of parents have not successfully completed the Secondary School Leaving Certificate (SSLC) examination. The issue at hand is the inadequate level of literacy among parents. It is imperative to maintain proper menstrual hygiene. 55.7 percent of adolescent girls from tribal communities neglected to cleanse their external genitalia after replacing their absorbent materials. They just replace their absorbent material twice daily. It is crucial to immerse the genitalia in clean water during menstruation. Effective menstrual hygiene management is essential for maintaining proper cleanliness. However, a mere 42.4 percent of adolescent females from tribal communities had knowledge regarding appropriate menstrual management. Others lack awareness. Poor menstrual hygiene can have a detrimental impact on the health of young girls. It specifically impacts the health of the reproductive system. Furthermore, it leads to menstruation irregularities. A staggering 55.7 percent of adolescent females from tribal communities encounter challenges when it comes to acquiring sanitary napkins. Period poverty refers to the financial incapacity to purchase menstruation supplies. The majority of tribal adolescent girls encounter these challenges. 54.9 percent of adolescent females from tribal communities lack knowledge about the connection between menstruation and reproduction. They lack awareness of the detrimental impact that unclean menstruation practices might have on reproductive health. Insufficient knowledge of menstruation, inadequate financial resources to purchase menstrual products, limited understanding of proper hygienic practices during menstruation, and similar factors contribute to the phenomenon known as period poverty. Tribal peoples reside within diverse cultural contexts. They are founded upon beliefs. However, there exist certain misconceptions. Approximately 78.6 percent of adolescent girls from tribal communities have limitations on certain activities while menstruating. Activities such as accessing the kitchen, engaging in rituals, interacting with others, and so on. Most of the family uses cloth to regulate their bleeding. According to a survey, 60.6 percent of parents of Tribal adolescent girls recommend using a lotus flower to absorb menstrual bleeding. 68.4 percent of Tribal adolescents have a restriction on touching some plants during menstruation. Plants such as basil and neem leaves. They have the belief that these plants are slender and extensively refined. 63.9% of adolescent females belonging to tribal communities have dietary limitations on some types of food. These foods, such as pickles and ghee, are believed to have negative effects on menstruation. 88.5 percent of tribal adolescent females have limitations on touching various religious artefacts, such as prayer books, God statues, etc. They believe that girls are considered impure throughout their menstrual cycle. During the menstrual period, 60.6 percent of tribal adolescent girls' family members adhere to restrictions linked to menstruation. The primary factor is their lack of understanding of menstruation. 50.8 percent of tribal adolescent girls sleep in different places during menstruation. In close proximity to the woodland, there exists a refuge specifically designated for girls and women who are experiencing menstruation. Throughout their menstrual period, they reside in this sanctuary till the conclusion of their menstruation cycle. However, that shelter is not secure. Many creatures are there. Tribal adolescent girls consume medication to prevent remaining in that location. Some individuals choose to sleep in the kitchen or in alternative rooms. The prevailing belief is that menstruation renders the human body filthy. During her menstrual days, she is dirty. In conclusion

This study demonstrates that Tribal adolescent girls have numerous obstacles during their menstrual cycle. During menstruation, their health is significantly compromised. They encounter both physical and psychological challenges. However, they are failing to implement effective measures to mitigate their health issues. An effective home treatment is beneficial. However, there are instances where the act of diminishing the issues is not successful. Menstrual disorders need Allopathy treatment to diminish and eradicate the disease. Adhering to a nutritious diet, engaging in regular physical activity, and practicing meditation can effectively aid in the management of symptoms. Tribal communities reside in diverse environments and hold a deep reverence for the natural world. Nevertheless, some evaluate if more treatment is necessary. The majority of Tribal adolescent girls experience

psychological issues. During the initial phase, the girls employed several drugs. Substance abuse precipitates numerous complications associated to menstruation. Menstruation is a prevalent occurrence among females of all ages. It refers to their ability to gestate a foetus in their uterus. It is imperative that everyone shows respect towards girls throughout their challenging menstrual days. Tribal adolescent girls encounter numerous physical and psychological challenges. Inadequate availability of menstrual products is an additional concern. The economic resources of the Tribal teenage girl are quite limited. Furthermore, a deficiency of understanding regarding menstruation is an additional concern. They lack knowledge regarding effective management of menstruation, including hygiene procedures. The majority of females are unaware of the correlation between menstruation and reproductive health. They receive diverse teachings on teenage health from Aganawadies and schools. Nevertheless, many lack knowledge about menstruation. Tribal adolescent girls often encounter numerous limitations when they experience menstruation. They have limitations on certain activities, such as accessing the kitchen and refraining from handling specific plants. They hold the belief that menstruation is unclean. Therefore, they rest in separate locations. Engaging in frequent changes of sleeping locations can lead to many psychological complications, including but not limited to anxiety, depression, and feelings of isolation. According to the survey, tribal adolescent females are encountering numerous obstacles. They encounter societal discrimination during their menstrual cycles.

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