

Menstruation mystery: The way forward

“Adolescence” – The transition period from childhood to adulthood, is complicated with several physical and psychological changes occurring in the body [1]. For the female adolescents, this period is characterized by “Menarche” or the beginning of menstruation [1,2] since times immemorial, menarche instills a fright in adolescent girls, and menstruation is considered a social taboo. Menstruation is “perceived as unclean or embarrassing, extending even to mere mention of menstruation in public or private.” Most of the religions consider menstruation “ritually unclean” [3,4]. These beliefs are traditionally passed down from generations; wherein, the most of these religious and cultural restrictions are actually formed in order to give rest to the female during this phase of her lifecycle [4]. Several studies have been carried out all over India and other countries to know the perceptions, beliefs, practices and knowledge, attitude and behavior of adolescent females regarding menstruation [1,2,5-7]. There has been observed a lack in knowledge passed from friends and mothers regarding this event in adolescent girls’ life, which has added to the awe and mystery of the menstrual taboo [5].

This issue of Indian Journal of Child Health contains a study by Varghese et al. which attempts to focus on the taboos related to menstruation and its knowledge among adolescent school girls in and around Porur [8]. As correctly mentioned, findings can be possibly generalized after replication of the study in different demographic areas; however, the same study can also be replicated in the adolescent girls of the community in Porur. These could have been missed out due to school dropouts, which is quite common among adolescent girls of this age group. Getting this rich data can help compare the existence of taboos in community and school going adolescent girls. Furthermore, comparison could be based on their educational status (community girls probably not going to schools). Knowing the socio-economic status and source of information (along with their education status) of these restrictions and taboos can help stratify findings as per socio-economic and education status.

Further add on to the research could be to get an idea of their hygiene practices during menstruation and correlating the same with the existing restrictions and taboos in their households. Furthermore, the authors could try giving correct information regarding the practices and the science behind the following such traditions. A counseling tool based on the baseline study findings can be prepared, which could be used as an intervention; thus, having an interventional study in future.

Quantitative findings can be enriched with qualitative data; hence, the way forward would be conducting focus group discussion among the adolescent girls regarding how they perceive these restrictions and taboos, and their take on the same. A good key finding would be to know if any of them has tried to defy or not follow such practices and the elder females’ response to the same. Key informant interviews of school teachers, team leaders, etc., could help know their perceptions and ideas regarding these restrictions, and could probably help find ways in order to reduce the same.

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