

Assessment of Menstruation Awareness Among School Students in Takhatpur Block of Bilaspur District

Dr. Rashmi Singh Dhurve

In-charge Principal, Government High School, Pali, Takhatpur, Bilaspur (C.G.), India

ABSTRACT

The present cross-sectional descriptive study was conducted over a period of three months (September–November 2025) among 115 female students from government schools in Takhatpur Block of Bilaspur District, Chhattisgarh. The aim was to assess knowledge, attitudes, and practices related to menstruation and menstrual hygiene. The study area comprises girls school students from rural belt. Participants were from Classes 9 to 12, with 41.7% aged 13–16 years and 58.3% aged 17–19 years. While 88.7% of respondents had heard of menstruation, only 47.0% correctly identified its biological cause. Mothers were the most common first source of information (46.1%), followed by friends, sisters, teachers, and media. Approximately 65.2% viewed menstruation as a normal process, but 13.9% did not, and 20.9% were unsure. Hygiene awareness was relatively high, with 85.2% recognizing its importance. Still, 33.9% of participants perceived menstruation as dirty or impure, which reflects persistent stigma. Cultural restrictions were common, with over 84% reporting limitations on kitchen or religious access. Importantly, 83.5% recommended school-based information sessions on menstrual hygiene. The findings point up the need for comprehensive menstrual health education, community sensitization, and behavior-change interventions to improve knowledge, reduce stigma, and support adolescent girls' well-being in rural school settings.

Keywords: Menstrual Hygiene, Adolescent and Young Girls, Knowledge, Attitudes & Practices (KAP), Rural Schools, Menstrual Stigma, Takhatpur Block

INTRODUCTION

Menstruation is a natural biological process that significantly affects the physical and psychological health and social well-being of adolescent and young girls (Khound *et al.*, 2025). Despite its natural occurrence, it is often perceived as unclean or shameful in many communities (Sommer, 2009). Adolescents and young girls frequently encounter limited access to accurate information and hygienic resources related to menstruation in rural settings worldwide (McMahon *et al.*, 2011). Lack of menstrual awareness can lead to poor hygiene practices, school absenteeism, reproductive tract infections (RTIs), and psychosocial stress (Das *et al.*, 2025). Ravindranath *et al.* (2023) reported that limited access to reliable information, entrenched traditions, and pervasive socio-cultural taboos contributed to social embarrassment surrounding menstrual hygiene, ultimately resulting in adverse health outcomes for women in rural settings. These factors collectively fostered a sense of discomfort and reluctance among women toward adopting appropriate menstrual hygiene practices. The data obtained in this study were intended to inform

NGOs and policymakers to facilitate targeted interventions and policy reforms. The study specifically aimed to assess the level of knowledge and attitudes regarding menstruation among school teachers, male students, and female students, as well as to evaluate menstrual hygiene practices among schoolgirls.

According to the World Health Organization (WHO), *health* is defined as “a state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity” (WHO, 2019). Within this framework, menstrual health constitutes a critical component of overall health and well-being in women. Given that most individuals assigned female at birth experience menstruation regularly from menarche to menopause, menstrual health significantly influences physical, psychological, and social dimensions of health (Matteson *et al.*, 2013). Normal menstruation is currently characterized as cyclical uterine bleeding that occurs between the onset of menarche and the cessation of menses at menopause. Clinically, menstruation is evaluated by assessing the frequency of bleeding episodes, the regularity or predictability of the menstrual cycle, the duration of menstrual bleeding in each cycle, and the volume or heaviness of menstrual blood loss. These parameters provide a comprehensive account of menstrual patterns and help identify abnormalities, e.g., irregular cycles, prolonged bleeding, and excessive blood loss-like issues. Such clinical assessments are essential for diagnosing menstrual disorders and guiding appropriate management strategies (Munro *et al.*, 2018; Sharp *et al.*, 2017). Deviations in any of these parameters indicate underlying gynaecological or systemic pathology and indicator of further clinical assessment. Therefore, menstrual health is not only a reproductive health issue but also a vital indicator of women's overall health status, necessitating adequate attention in public health policies and clinical practice. In line, the Ministry of Health and Family Welfare launched the Menstrual Hygiene Scheme (MHS) was launched under the Adolescent Reproductive and Sexual Health (ARSH) component of RCH II. It targets rural adolescent girls aged 10–19 years, aiming to promote menstrual hygiene and improve their overall health.

According to data reported on the Census India web platform, based on the 2011 Census survey conducted by the Government of India, the average literacy rate in urban areas was recorded at 81%, whereas rural areas exhibited a lower average literacy rate of 67.9%. Specifically, for Takhatpur Tehsil in Bilaspur District, the total literacy rate was reported as 70.14%. A gender-disaggregated analysis revealed notable disparities: the male literacy rate in Takhatpur Tehsil was 68.52%, while the female literacy rate was considerably lower, at 48.76%. In such areas, cultural taboos and misinformation persistently shape attitudes toward menstruation. This study seeks to assess the knowledge, attitudes, and practices (KAP) related to menstruation among school students in Takhatpur Block, with the ultimate aim of informing policy-level interventions.

MATERIALS AND METHODS

The present study aimed to comprehensively assess knowledge, attitudes, and practices (KAP) related to menstruation among school students, with a specific focus on understanding their awareness and behaviors surrounding menstrual health and hygiene. This study examines the importance of a holistic approach to adolescent health education that addresses both knowledge gaps and social barriers to menstrual health and dignity. To meet the study objective following systematic methodology was applied.

Study Design

A survey-based descriptive study was conducted over a period of three months (September–November 2025).

Study Area

The study area comprised the Government schools of Takhatpur Block of Bilaspur District, Chhattisgarh. This block includes largely rural settlements.

Sample Size

A total of 115 girls from Class 9 to Class 12 who studied in the Government schools of Takhatpur Block participated in the study.

Data Collection Tool

A structured questionnaire was developed in both Hindi and English to comprehensively assess menstrual health awareness among participants. The instrument included sections on demographic information to capture age, class, school type, and gender, ensuring the ability to analyze subgroup differences. It further addressed awareness and understanding of menstruation, evaluating students knowledge about the biological process, its causes, and the perceived normality of menstruation. To explore the origins of this knowledge, the questionnaire included items on primary sources of menstrual information, such as family members, teachers, peers, or media. Hygiene practices were carefully assessed through multiple-response questions examining the use of sanitary materials, frequency of changing them, methods of disposal, and genital hygiene during menstruation. Additionally, the questionnaire investigated the prevalence of myths and taboos, documenting restrictive beliefs and practices such as avoiding kitchens or religious places during menstruation. Finally, the survey included questions about school absenteeism linked to menstruation and its psychological impact, capturing the extent to which menstrual challenges affect educational participation and emotional well-being. This comprehensive design aimed to provide robust, culturally sensitive, and actionable insights for improving menstrual health education and support in schools.

All the gathered data were tabulated and analyzed followed by a graphical representation using MS Office 2021.

RESULTS AND DISCUSSION

The present research work was conducted among 115 girl students from government schools in Takhatpur Block provided important insights into their knowledge, attitudes, and practices related to menstruation. A majority (58.3%) of participants belonged to the 17–19 years age group, while 41.7% were aged 13–16 years. Notably, 88.7% of respondents reported that they had heard of menstruation. Among those aware, the first source of information was most often from their mother (46.1%), followed by friends (18.3%), sisters (14.8%), teachers (10.4%), and media or books (6.1%). Despite high general awareness, only 47.0% indicated that they knew the biological cause of menstruation, while 53.0% did not. Regarding knowledge level and perception, 65.2% girls believed menstruation was a normal process. When asked about the average duration of bleeding, 69.6% correctly identified 3–7 days, while 16.5% were unsure.

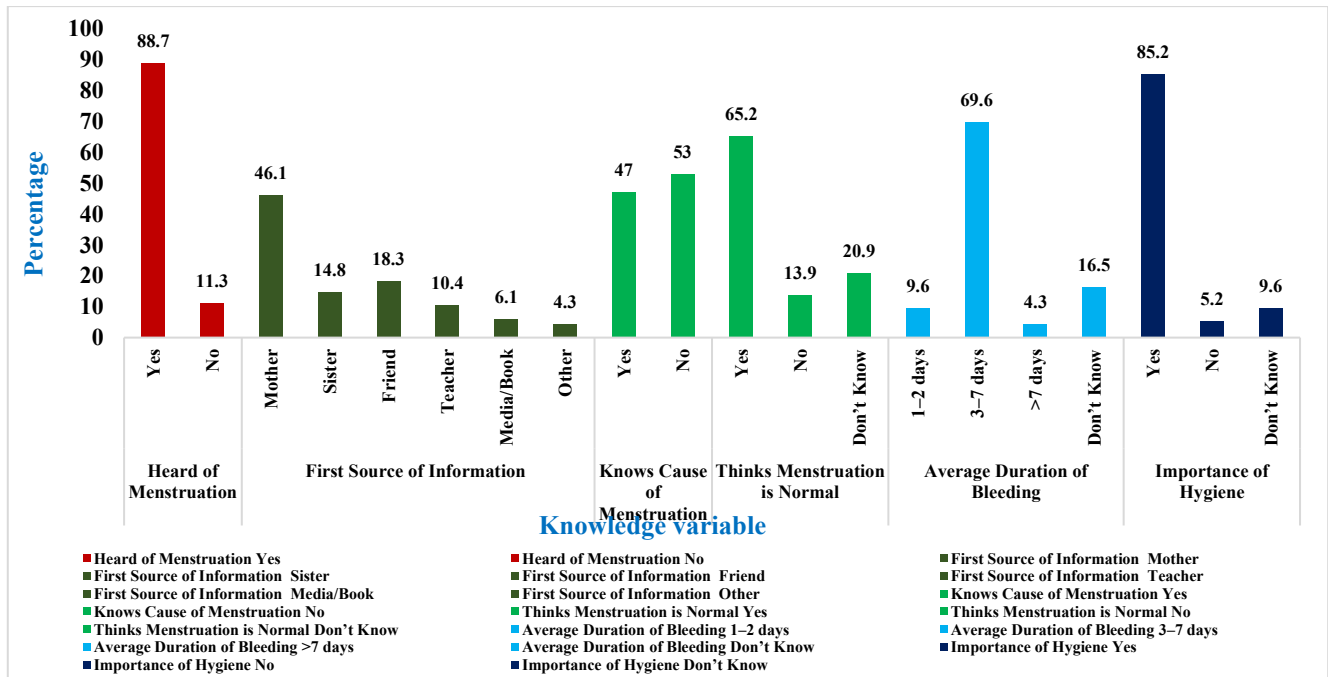


Fig. 1: Knowledge of Menstruation Among School Students (n = 115 Female Students, Government Schools)

Hygiene awareness appeared relatively high (85.2%), and the majority were recognized key practices such as using sanitary pads (74.8%), washing the genital area with clean water (70.4%), disposing of pads properly (67.0%), and changing pads or cloth regularly (63.5%). However, 14.8% still considered using unwashed cloth repeatedly to be acceptable.

Table 1: Attitudes Toward Menstruation Among School Students

Variable	Categories for Response	Percentage (%)
Thinks Menstruation is Dirty/Impure	Yes	33.9
	No	50.4
	Not Sure	15.7
Should Be Discussed in Schools	Yes	75.7
	No	11.3
	Not Sure	13.0
Embarrassed Discussing It	Yes	40.9
	No	33.9
	Sometimes	25.2
Thinks Boys Should Learn About It	Yes	66.1
	No	12.2
	Not Sure	21.7
Material Used During Menstruation	Sanitary Pad	73.9
	Cloth	19.1
	Both	7.0
Change Frequency per Day	Once	11.3

	Twice	38.3
	Three times or more	36.5
	Only when soaked	13.9
Disposal Method	Dustbin	87.8
	Open field	5.2
	Burning	7.0
Cleans Genital Area During Menstruation	Yes	93.0
	No	2.6
	Sometimes	4.4

(n = 115 Female Students, Government Schools)

Attitudes toward menstruation among school students are mentioned in Table 1. Social attitudes revealed persisting stigma: 33.9% viewed menstruation as dirty or impure, while 50.4% rejected this notion, and 15.7% were uncertain. Encouragingly, 75.7% believed menstruation should be discussed in schools, although 40.9% felt embarrassed talking about it and 25.2% reported occasional discomfort. About 66.1% felt boys should also learn about menstruation. Menstrual management practices showed that 73.9% used sanitary pads, 19.1% relied on cloth, and 7.0% used both. Change frequency varied, with 38.3% changing twice daily and 36.5% three times or more, although 13.9% changed only when soaked. Disposal practices were largely safe, with 87.8% using dustbins. Nearly all (93.0%) cleaned their genital area during menstruation, reflecting strong adoption of key hygiene behaviors.

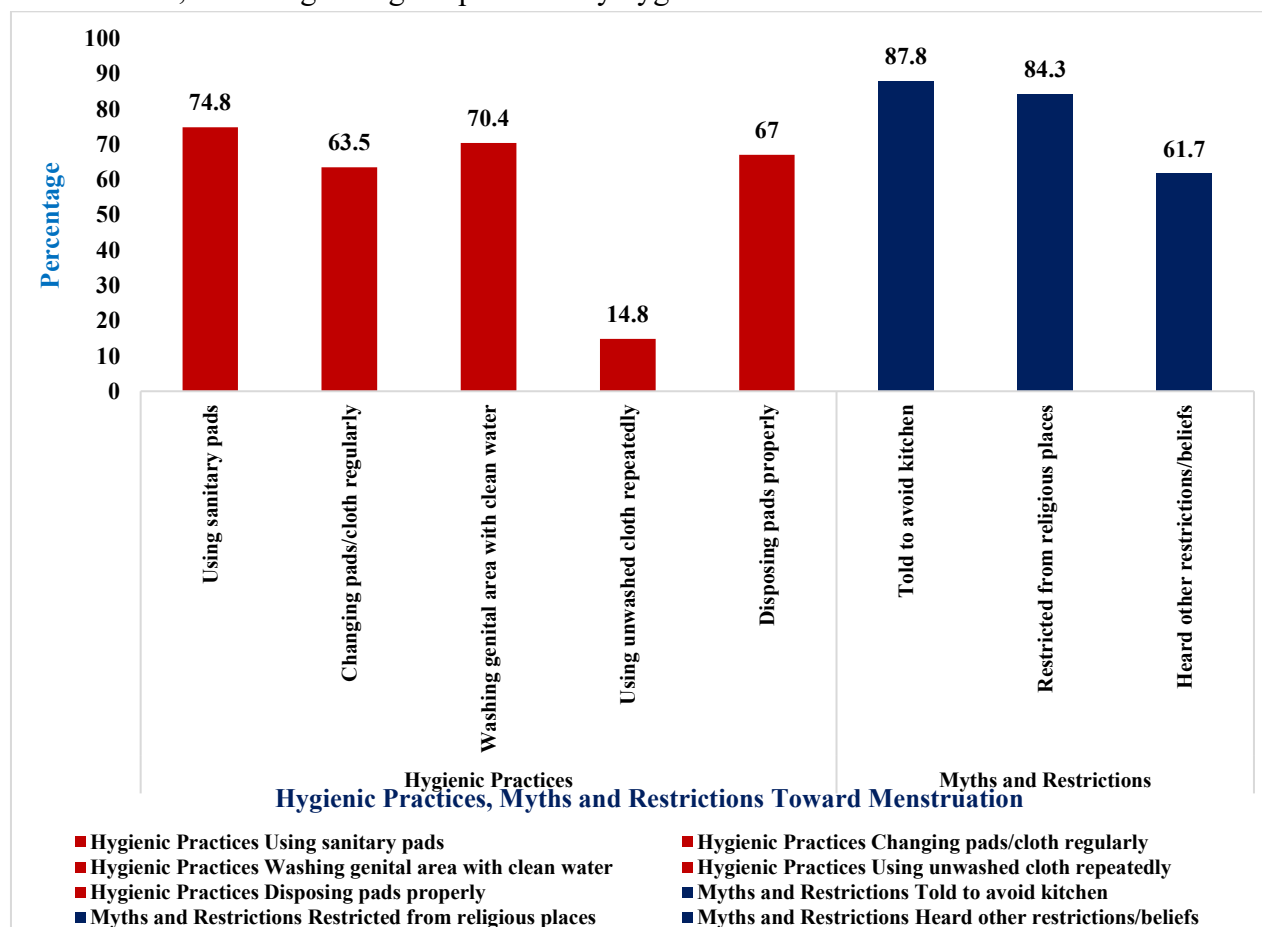


Fig. 2: Hygienic Practices, Myths and Restrictions Toward Menstruation Among School Students

Hygienic practices, myths and restrictions toward menstruation among school students are depicted in Fig. 2. In the context of cultural restrictions, 87.8% had been told to avoid the kitchen, 84.3% were restricted from religious places, and 61.7% reported other restrictive beliefs or taboos. Importantly, 83.5% of participants recommended that schools should provide information sessions on menstrual hygiene. This comprehensive assessment indicated that while awareness and hygiene practices were relatively strong overall, substantial gaps persisted in biological understanding, social attitudes, and the persistence of cultural taboos.

Our findings from Takhatpur Block are consistent with earlier studies that underscore persistent gaps in menstrual health knowledge, attitudes, and practices among adolescents in rural and semi-rural India. In our survey of 115 girl's students from government schools in Takhatpur, with balanced representation across classes 9th to 12th. The present study was aligned closely with Ravindranath *et al.* (2023), who in Sawarde village, Ratnagiri, found 100% of teachers had good knowledge, while 72.02% of female students and only 32.44% of males did. Positive attitudes were seen in all teachers, but only 28.81% of female and 2.89% of male students. Among girls, 90.86% used sanitary pads, 36.29% changed them three or more times daily, 52.08% used paper wrapping, 87.26% disposed in dustbins, and 93.63% cleaned their genitalia. Likewise, Dasgupta and Sarkar (2008) in rural West Bengal found 67.5% aware of menstruation before menarche, with mothers as first informants for 37.5%. 86.25% considered it physiological, but only 48.75% knew of sanitary pads, and just 11.25% used them. While 97.5% used soap and water, 85% observed restrictions. Our study reinforces a common pattern of partial knowledge, high stigma, cultural restrictions, and gaps in hygienic practices, underlining the need for comprehensive, school-based menstrual education, community sensitization, and policy support in regions like Takhatpur.

CONCLUSION AND RECOMMENDATIONS

The study concludes that menstrual health awareness among high school students in Takhatpur Block is insufficient and influenced by socio-cultural taboos and a lack of formal education. Menstruation continues to be a stigmatized subject, discussed in hushed tones and perpetuated through generations. This affects not only their health but also their dignity and educational prospects of adolescent girls. To improve menstrual health education and management among adolescents, several actionable recommendations are proposed. First, comprehensive menstrual health education should be integrated into school curricula as part of health and life skills education, ensuring that all students receive age-appropriate, scientifically accurate, and culturally sensitive information. Second, the teacher training programs should be implemented to equip both male and female teachers with the skills to address menstrual topics sensitively and accurately, fostering a supportive learning environment. Third, the inclusion of boys in menstrual awareness programs is essential to eliminate stigma and foster mutual respect, promoting open dialogue and shared understanding. Fourth, infrastructure development must be prioritized to provide gender-sensitive washrooms, sanitary pad availability, and safe disposal units in all schools, which enables girls to manage menstruation hygienically and with dignity. Fifth, community outreach initiatives should engage parents and community leaders in awareness campaigns to dispel harmful myths and taboos, ensuring that supportive attitudes extend beyond the school setting. Together, these measures aim to create an enabling environment that supports adolescent girls' health, education, and well-being.

BIBLIOGRAPHY

1. Census India (2011). Takhatpur Tehsil Population, Caste, Religion Data - Bilaspur district, Chhattisgarh. <https://www.censusindia.co.in/subdistrict/takhatpur-tehsil-bilaspur-chhattisgarh-3294>. Accessed on .03.06.2025.
2. Das, T., Das, P., & Roy, T. B. (2025). Disregarding hygienic menstrual practices initiating reproductive tract infections during adolescents and early adulthood periods: a cross-sectional analysis from Indian women. *Discover Public Health*, 22(1). <https://doi.org/10.1186/s12982-025-00461-5>
3. Dasgupta, A., & Sarkar, M. (2008). Menstrual Hygiene: How Hygienic is the Adolescent Girl?. *Indian journal of community medicine : official publication of Indian Association of Preventive & Social Medicine*, 33(2), 77–80. <https://doi.org/10.4103/0970-0218.40872>
4. Khound, M., Bhattacharyya, H., & Ghosh, S. (2025). Menstruation and menstrual hygiene: Analyzing the gaps in knowledge, perception and practices in a rural area of North East India. *Indian Journal of Community Medicine: Official Publication of Indian Association of Preventive & Social Medicine*. https://doi.org/10.4103/ijcm.ijcm_513_24
5. Matteson, K. A., Raker, C. A., Clark, M. A., & Frick, K. D. (2013). Abnormal uterine bleeding, health status, and usual source of medical care: analyses using the Medical Expenditures Panel Survey. *Journal of Women's Health (2002)*, 22(11), 959–965. <https://doi.org/10.1089/jwh.2013.4288>
6. McMahon, S. A., Winch, P. J., Caruso, B. A., Obure, A. F., Ogutu, E. A., Ochari, I. A., & Rheingans, R. D. (2011). “The girl with her period is the one to hang her head” Reflections on menstrual management among schoolgirls in rural Kenya. *BMC International Health and Human Rights*, 11(1), 7. <https://doi.org/10.1186/1472-698X-11-7>
7. Munro, M. G., Critchley, H. O. D., Fraser, I. S., & FIGO Menstrual Disorders Committee. (2018). The two FIGO systems for normal and abnormal uterine bleeding symptoms and classification of causes of abnormal uterine bleeding in the reproductive years: 2018 revisions. *International Journal of Gynaecology and Obstetrics: The Official Organ of the International Federation of Gynaecology and Obstetrics*, 143(3), 393–408. <https://doi.org/10.1002/ijgo.12666>
8. Ravindranath, W., Ravindranath, V., & Chopade, R. R. (2023). Assessment of knowledge, attitude, and practice of menstrual hygiene amongst school students in rural India. *International Journal of Reproduction, Contraception, Obstetrics and Gynecology*, 12(9), 2633–2639. <https://doi.org/10.18203/2320-1770.ijrcog20232469>
9. Sharp, H. T., Johnson, J. V., Lemieux, L. A., & Currigan, S. M. (2017). Executive summary of the reVITALize initiative: Standardizing gynecologic data definitions. *Obstetrics and Gynecology*, 129(4), 603–607. <https://doi.org/10.1097/AOG.0000000000001939>
10. Sinha S, Paul B. (2018). Menstrual hygiene management among adolescent schoolgirls in urban slums of Kolkata, India. *Journal of Family Medicine and Primary Care*, 7(6), 1439–1445.
11. Sommer, M. (2009). Ideologies of sexuality, menstruation and risk: girls' experiences of puberty and schooling in northern Tanzania. *Culture, Health & Sexuality*, 11(4), 383–398. <https://doi.org/10.1080/13691050902722372>
12. UNICEF. (2014). *Menstrual Hygiene Management in Schools: A Manual for Teachers*.
13. World Health Organization (2019). Frequently asked questions. <https://www.who.int/about/who-we-are/frequently-asked-question>