

First Draft

**KNOWLEDGE AND PRACTICES OF NFPE-AG
GRADUATES REGARDING MENSTRUATION**

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EXECUTIVE SUMMARY

BRAC carried out a two-year Non-Formal Primary Education Programme for Adolescent Girls (NFPE-AG) as part of its former Women's Health and Development Programme (WHDP) to increase basic literacy and numeracy skills as well as awareness on reproductive health, nutrition and social issues. The first phase of NFPE-AG was started in September 1991 through 1000 schools in 10 thanas of WHDP and ended in August 1993. This study was undertaken to assess the level of knowledge retained vis-à-vis practices of NFPE-AG graduates regarding menstruation.

A total of 30 former NFPE-AG schools (closed 2 years back) were selected from 6 WHDP areas (5 schools from each area). From each school, 7 NFPE-AG graduates aged 15-19 years who did not continue their study in formal schools after graduation were selected. Seven other girls aged 15-19 years with no schooling (NS-AG) were selected from the adjacent villages of each former NFPE-AG school as comparison group. Thus, a total of 420 adolescent girls (210 from each group) were interviewed in January 1996.

Key findings

Most of the girls knew that the onset of menarche is from the age of 11 years onwards (89%), what the interval between two menstrual periods is (96%) and that a menstrual period normally lasts for 3 to 7 days (94%). The majority of the NFPE-AGs (51%) knew that menstruation means 'periodic secretion of blood'. Unfortunately, 59% were in favour of food restriction during menstruation.

Around 27% of NFPE-AGs complained of several problems. The most common problems faced by the girls were lower abdominal pain (74%), irregularity in menstruation (28%), loss of appetite (11%), excessive bleeding and vertigo (9% each), etc.

The majority of the NFPE-AGs (61%) did not take any measures to solve such menstrual problems. Only 5% of NFPE-AGs (unmarried only) took traditional medicines, 16% consulted health workers or doctors while only 2% took modern medicines.

Most of the NFPE-AGs (81%) used old rags (*nekra* or piece of old clothes) as pads during menstruation while 17% of them did not use any thing (pad/rag). Besides, most of the NFPE-AGs (85%) used the same old rags for 2 to 7 times. Of these, the majority of the girls (54%) used rags either dried unhygienically or even wet.

Health precautions followed by the NFPE-AGs included cleanliness (29%), not leaving the house (24%), abstaining from household chores or doing only light work (14%), and abstaining from religious rituals (8%). Some of the married NFPE-AGs (16%) said that they abstained from intercourse during menstruation. However, 16% of NFPE-AGs did not abide by the restrictions and did all household works.

More than half of the NFPE-AGs (52%) did not follow any food restriction. However, the other girls did not eat sour foods, eggs, milk, fish, meat, etc.

The NFPE-AGs knew better than NS-AGs about the age at marriage, interval between two menstrual periods and duration of menstrual period. But NS-AGs knew better than NFPE-AGs about the meaning of menstruation, and food practices during menstruation. However, this difference in knowledge was not statistically significant. The management of menstrual episodes by the girls was not adequate, and proper hygiene and food practices were not followed. These issues need proper attention.

Recommendations

1. The girls should be provided with comprehensive knowledge in every aspects of menstruation including physiological aspects, as well as its hygienic management.
2. Parents and in-laws should also be made aware about the physiology of menstruation and its management. This will help reduce the social stigma and enable them to play a helpful and supportive role for their daughters/in-laws in management of menstrual problems.
3. BRAC may provide service to NFPE-AGs for encountering menstrual problems through antenatal care centres (ANCCs), satellite clinics (SCs) and BRAC health centres (BHCs).

INTRODUCTION

Onset of menstruation heralds the start of reproductive life in women. In rural Bangladesh, girls are expected to get married and bear children once they have reached menarche. The meanings which are ascribed to menstruation and the cultural practices associated with it have a bearing on women's sexuality and reproductive health, and consequently, on her overall health status (George, 1994).

BRAC educated adolescent girls (AGs) through its two-year Non-Formal Primary Education Programme for Adolescent Girls (NFPE-AG) as a component of its former Women's Health and Development Programme (WHDP). Through the NFPE-AG curriculum, the adolescent girls were educated about menstruation to a limited extent. This issue was not discussed in detail because of prevailing social norms and values. It was hoped that the programme would help shift the average age at first marriage and first conception (BRAC, 1992). The first phase of NFPE-AG programme started in September 1991 through 1000 schools in 10 thanas of WHDP and ended in August 1993.

After completion of the course, NFPE-AG graduates were organized through Kishori Club to pursue recently acquired literacy skill. Recently, BRAC has initiated a programme for educating NFPE-AG graduates on reproductive health and nutrition through Kishori clubs. Given this situation, a study was done to evaluate the current level of knowledge vis-à-vis practices of NFPE-AG graduates regarding menstruation it should also prove helpful as a baseline for future evaluation of the programme.

Objective

The overall objective of the study is to assess the level of knowledge retained vis-à-vis practices of NFPE-AG graduates regarding menstruation. More specifically the study aims to:

- assess the knowledge of NFPE-AG graduates regarding menstruation,
- assess the menstrual problems encountered and their management by the NFPE-AG graduates,
and
- assess the hygiene and food practices of the NFPE-AG graduates.

METHODOLOGY

Six areas from six WHDP thanas (two thanas from each of the 3 regions: Mymensingh, Bogra and Dinajpur) were selected at random. From each area, 5 former NFPE-AG schools were selected which had been closed 2 years back and where no reproductive health education was given to the graduates. Thus, a total of 30 former NFPE-AG schools were selected. From each former NFPE-AG school, 7 NFPE-AG graduates aged 15-19 years who had not continued their study in formal schools after graduation were selected. Seven other adolescent girls aged 15-19 years with no schooling (NS-AG) were selected from the adjacent villages of each former NFPE-AG school. Data was collected in January 1996 using a pre-tested structured questionnaire.

RESULTS

Background characteristics

A total of 420 adolescent girls (NFPE-AG 210, NS-AG 210) were interviewed. Of the 210 NFPE-AGs, 104 (50%) were married, while among the 210 NS-AGs, 133 (63%) were married. The mean ages of both groups of girls were almost similar (NFPE-AG 16.8 years, NS-AG 17.2 years). About 90% of NFPE-AGs and 87% of NS-AGs were Muslim.

Two NFPE-AGs and 5 NS-AGs under this study who had not started menstruation were unmarried. The other girls began menstruating for 1 to 7 years ago (mean: for NFPE-AG 2.7 years, for NS-AG 3.2 years). The mean age at menarche was 14 years for both the groups (Table 1).

Meaning of menstruation

The majority of the girls (NFPE-AG 51%, NS-AG 67%) knew that menstruation meant periodic secretion of blood. Other meanings cited by them were: secretion of contaminated blood (NFPE-

AG 15%, NS-AG 14%), unnecessary blood (NFPE-AG 14%, NS-AG 2%), and fresh blood from uterus (NFPE-AG 11%, NS-AG 9%) (Table 2).

Age at menarche

Table 3 shows the knowledge of adolescent girls about the age at menarche. The results revealed that only a portion of the girls (NFPE-AG 10%, NS-AG 13%) believed that menstruation started even before the age of 11 years. Greater proportion of married girls from both the groups believed this. However, 2% of NFPE-AGs and 12% of NS-AGs were not sure about the age at menarche.

Interval between two menstrual periods

There was a wide variation in knowledge about interval between two menstrual periods. It ranged from 10-30 days. However, most of the girls (NFPE-AG 96%, NS-AG 95%) could mention correctly about the interval between two menstrual periods (Table 4). All the girls who did not experience menstruation (NFPE-AG 2, NS-AG 5), failed to mention the interval time between two menstrual periods. A difference in knowledge was also observed between married and unmarried girls in both the groups.

Duration of menstrual period

The majority of the girls said that the duration of the menstrual period varied from person to person and it even varied from time to time for the same girl. Most of the girls (NFPE-AGs 94%, NS-AGs 86%) stated that the duration ranged from 3 to 7 days (Table 5). A difference in knowledge was observed between married and unmarried girls in both the groups. The girls of both the groups who did not experience menstruation failed to answer this question.

Food practices during menstruation

Of the 210 girls in each group, more than half of the girls (NFPE-AG 59%, NS-AG 54%) said that a variety of foods should be restricted during menstruation. According to them, restricted food

items included: sour foods, *hilsha* fish/dried fish, eggs, milk, meat (duck/pigeon), etc. (Table 6). A variation in opinion was observed between married and unmarried girls in both the groups.

Menstrual problems and management

Around 27% of both NFPE-AGs (57 out of 208) and NS-AGs (56 out of 205) reported that they experienced different types of menstrual problems. Proportionately, greater number of unmarried NFPE-AGs reported menstrual problems while the reverse was true for NS-AGs. The major problems faced by the girls were lower abdominal pain, irregularity in menstruation, loss of appetite, excessive bleeding, vertigo, etc. (Table 7). Irregularity in menstruation was reported more by married than unmarried girls in both the groups.

The majority of the girls (NFPE-AG 61%, NS-AG 59%) did not take any measures to solve such menstrual problems. More unmarried girls in both the groups did not take any measures to solve such menstrual problems. Some girls (NFPE-AG 5%, NS-AG 16%) took traditional medicines. However, married NFPE-AGs did not take any traditional medicine. About 16% of NFPE-AGs and 20% of NS-AGs consulted health workers or doctors while only 2% of NFPE-AGs and 4% of NS-AGs took modern medicines (Table 8).

Hygiene practice in pad use

Most of the girls (NFPE-AG 81%, NS-AG 80%) reported that they used old rags (*nekra* or piece of old cloth) as pads during menstruation while some of them (NFPE-AG 17%, NS-AG 20%) did not use any thing (pad/rag) (Table 9). Only 1% NFPE-AGs used sanitary pads.

Most of them (NFPE-AG 85%, NS-AG 79%) used the same old rags more than once, ranging from 2-7 times (Table 10). The majority of them (NFPE-AG 54%, NS-AG 59%) used rags either dried unhygienically or even wet (Table 11). Both married and unmarried girls of the groups followed similar unhygienic practices.

(1992). The married girls abstain from intercourse. In Islam, intercourse is strictly prohibited during menstruation because the woman is polluted and it will reduce the longevity of the man. At this time the couple is advised not to sleep together in the same bed (Maloney et al, 1981).

A considerable proportion of the girls followed food restriction. The dietary restriction they followed are contrary to the needs of the girls during menstruation. They were forbidden from eating eggs, milk, fish, leafy vegetables, etc. These foods are rich in protein and essential for her normal growth.

The NFPE-AGs knew better than NS-AGs about the age at marriage, interval between two menstrual periods and duration of menstrual period. But NS-AGs knew better than NFPE-AGs about the meaning of menstruation, and food practices during menstruation. However, this difference in knowledge was not statistically significant. The management of menstrual episodes by the girls was not adequate, and proper hygiene and food practices were not followed. These issues need proper attention.

Recommendations

1. The girls should be provided with comprehensive knowledge in every aspects of menstruation including physiological aspects, as well as its hygienic management.
2. Parents and in-laws should also be made aware about the physiology of menstruation and its management. This will help reduce the social stigma and enable them to play a helpful and supportive role for their daughters/in-laws in management menstrual problems.
3. BRAC may provide service to NFPE-AGs for encountering menstrual problems through antenatal care centres (ANCCs), satellite clinics (SCs) and BRAC health centres (BHCs).

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Table 1: Background of adolescent girls.

Variable (in years)	NFPE-AG			Never schooling-AG		
	Married	Unmarried	All	Married	Unmarried	All
Mean age girls	17.1	16.6	16.8	17.9	16.1	17.2
Mean age at menarche	14.0	14.2	14.1	14.0	14.0	14.0
Mean age of menstruation	3.0	2.3	2.7	3.8	3.8	3.2
N	104	106	210	133	77	210

Figures in parentheses indicate the number

Table 2: Knowledge of adolescent girls about meaning of menstruation.

Menstruation meant	NFPE-AG			Never schooling-AG		
	Married	Unmarried	All	Married	Unmarried	All
Periodic secretion of blood	57.7 (60)	44.3 (47)	51.0 (107)	71.4 (95)	58.4 (45)	66.7 (140)
Secretion of contaminated blood	13.5 (14)	17.0 (18)	15.2 (32)	12.0 (16)	16.9 (13)	13.8 (29)
Secretion of unnecessary blood	10.6 (11)	17.0 (18)	13.8 (29)	3.8 (5)	-	2.4 (5)
secretion of fresh blood	11.5 (12)	11.3 (12)	11.4 (24)	8.3 (11)	10.4 (8)	9.0 (19)
Secretion of necessary blood	3.8 (4)	2.8 (3)	3.3 (7)	3.0 (4)	1.3 (1)	2.4 (5)
Others	1.9 (2)	5.7 (6)	3.8 (8)	1.5 (2)	6.5 (5)	3.3 (7)
Don't know	6.7 (7)	7.5 (8)	7.1 (15)	3.8 (5)	9.1 (7)	5.7 (12)
N	104	106	210	133	77	210

Figures in parentheses indicate the number

Multiple answers considered

Table 3: Knowledge of adolescent girls about age at menarche.

Age (Years)	NFPE-AG			Never schooling-AG		
	Married	Unmarried	All	Married	Unmarried	All
9	1.9 (2)	-	1.0 (2)	3.0 (4)	2.6 (2)	2.9 (6)
10	10.5 (11)	6.6 (7)	8.6 (18)	12.8 (17)	6.5 (5)	10.5 (22)
11	8.7 (9)	7.6 (8)	8.1 (17)	2.3 (3)	1.3 (1)	1.9 (4)
12	46.2 (48)	44.3 (47)	45.2 (95)	44.3 (59)	44.2 (34)	44.3 (93)
13	14.4 (15)	9.4 (10)	11.9 (25)	9.8 (13)	7.8 (6)	9.0 (19)
14	1.0 (1)	4.8 (5)	2.9 (6)	6.0 (8)	3.8 (3)	5.2 (11)
15	13.5 (14)	24.5 (26)	19.0 (40)	15.0 (20)	10.4 (8)	13.3 (28)
16-18	2.8 (3)	-	1.4 (3)	0.8 (1)	1.3 (1)	1.0 (2)
Not sure	1.0 (1)	2.8 (3)	1.9 (4)	6.0 (8)	22.1 (17)	11.9 (25)
N	104	106	210	133	77	210

Figures in parentheses indicate the number

Table 4: Knowledge of adolescent girls about interval between two menstrual periods.

Interval (days)	NFPE-AG			Never schooling-AG		
	Married	Unmarried	All	Married	Unmarried	All
10-12	-	-	-	-	1.3 (1)	0.5 (1)
15-20	-	0.9 (1)	0.5 (1)	-	-	-
20-25	1.9 (2)	0.9 (1)	1.4 (3)	1.5 (2)	-	1.0 (2)
26	1.9 (2)	-	1.0 (2)	-	-	-
28	16.4 (17)	20.8 (22)	18.6 (39)	1.5 (2)	3.9 (3)	2.4 (5)
30	79.8 (83)	75.5 (80)	77.5 (163)	97.0 (129)	85.7 (66)	92.8 (195)
Don't know	-	1.9 (2)	1.0 (2)	-	9.1 (7)	3.3 (7)
N	104	106	210	133	77	210

Figures in parentheses indicate the number

Table 5: Knowledge of adolescent girls about duration of menstrual period.

Duration (days)	NFPE-AG			Never schooling-AG		
	Married	Unmarried	All	Married	Unmarried	All
1	-	-	-	0.8	-	0.5
	-	-	-	(1)	-	(1)
2	1.9	-	1.0	3.0	5.2	3.8
	(2)	-	(2)	(4)	(4)	(8)
3	39.4	38.7	39.0	40.6	26.0	35.2
	(41)	(41)	(82)	(54)	(20)	(74)
4	16.3	17.9	17.1	26.3	27.3	26.7
	(17)	(19)	(36)	(35)	(21)	(56)
5	19.2	24.5	21.9	28.6	20.8	25.7
	(20)	(26)	(46)	(38)	(16)	(54)
6	25.0	21.7	23.3	14.3	15.6	14.8
	(26)	(23)	(49)	(19)	(12)	(31)
7	41.3	43.4	42.4	36.8	23.4	31.9
	(43)	(46)	(89)	(49)	(18)	(67)
8	1.9	5.7	3.8	7.5	2.6	5.7
	(2)	(6)	(8)	(10)	(2)	(12)
9	-	0.9	0.5	1.5	1.3	1.4
	-	(1)	(1)	(2)	(1)	(3)
Don't know	-	1.9	1.0	-	6.5	2.4
	-	(2)	(2)	-	(5)	(5)
N	104	106	210	133	77	210

Figures in parentheses indicate the number
Multiple answers considered

Table 6: Knowledge of adolescent girls about food restriction during menstruation.

Name of foods	NFPE-AG			Never schooling-AG		
	Married	Unmarried	All	Married	Unmarried	All
Sour foods	57.8 (37)	62.7 (37)	60.2 (74)	43.9 (29)	60.4 (29)	50.9 (58)
Hilsha/dried fish	34.4 (22)	40.7 (24)	37.4 (46)	40.9 (27)	54.2 (26)	46.5 (53)
Egg	42.2 (27)	33.9 (20)	38.2 (47)	45.5 (30)	43.8 (21)	44.7 (51)
Milk	42.2 (27)	30.5 (18)	36.6 (45)	37.9 (25)	35.4 (17)	36.8 (42)
Meat (Duck/pigeon)	25.0 (16)	23.7 (14)	24.4 (30)	19.7 (13)	31.3 (15)	24.6 (28)
Fried rice	17.2 (11)	11.9 (7)	14.6 (18)	28.8 (19)	16.7 (8)	23.7 (27)
Fruit	9.4 (6)	6.8 (4)	8.1 (10)	7.6 (5)	12.5 (6)	9.6 (11)
Sweet	1.6 (1)	6.8 (4)	4.1 (5)	4.5 (3)	10.4 (5)	7.0 (8)
Vegetable	1.6 (1)	-	0.8 (1)	7.6 (5)	2.1 (1)	5.3 (6)
Others	6.3 (4)	3.4 (2)	4.9 (6)	9.1 (6)	27.1 (13)	16.7 (19)
N	64	59	123	66	48	114

Figures in parentheses indicate the number
Multiple answers considered

Table 7: Types of problems faced by adolescent girls during menstrual episodes.

Problem	NFPE-AG			Never schooling-AG		
	Married	Unmarried	All	Married	Unmarried	All
Lower abdominal pain	73.9 (17)	73.5 (25)	73.7 (42)	78.4 (29)	68.4 (13)	75.0 (42)
Irregularity in menstruation	30.4 (7)	26.5 (9)	28.1 (16)	32.4 (12)	21.1 (4)	28.6 (16)
Loss of appetite	8.7 (2)	11.8 (4)	10.5 (6)	-	-	-
Excessive bleeding	8.7 (2)	8.8 (3)	8.8 (5)	8.1 (3)	10.5 (2)	8.9 (5)
Vertigo	17.4 (4)	2.9 (1)	8.8 (5)	2.7 (1)	5.3 (1)	3.6 (2)
Black/faint blood	4.3 (1)	2.9 (1)	3.5 (2)	16.2 (6)	5.3 (1)	12.5 (7)
Nausea/ vomiting	4.3 (1)	2.9 (1)	3.5 (2)	-	-	-
Pain in body/back/ hand & leg	4.3 (1)	-	1.8 (1)	2.7 (1)	5.3 (1)	3.6 (2)
Feel more hungry/ weak	-	-	-	-	10.5 (2)	3.6 (2)
N	23	34	57	37	19	56

Figures in parentheses indicate the number
Multiple answers considered

Table 8: Management of menstrual problems by adolescent girls.

Measures	NFPE-AG			Never schooling-AG		
	Married	Unmarried	All	Married	Unmarried	All
Discuss with sister-in-law	26.1 (6)	14.7 (5)	19.3 (11)	10.8 (4)	5.3 (1)	8.9 (5)
Take traditional medicine	-	8.8 (3)	5.3 (3)	18.9 (7)	10.5 (2)	16.1 (9)
Consult doctor	13.0 (3)	11.8 (4)	12.3 (7)	13.5 (5)	15.8 (3)	14.3 (8)
Consult with H&FPW	4.3 (1)	2.9 (1)	3.5 (2)	2.7 (1)	10.5 (2)	5.4 (3)
Take medicine	-	2.9 (1)	1.8 (1)	5.4 (2)	-	3.6 (2)
Don't discuss with anyone/taken no measures	56.5 (13)	64.7 (22)	61.4 (35)	56.8 (21)	63.2 (12)	58.9 (33)
N	23	34	57	37	19	56

Figures in parentheses indicate the number
Multiple answers considered

Table 9: Types of pads used by the adolescent girls during menstruation.

Types of pads	NFPE-AG			Never schooling-AG		
	Married	Unmarried	All	Married	Unmarried	All
Old rags	78.8 (82)	83.7 (87)	81.3 (169)	85.7 (114)	69.4 (50)	80.0 (164)
Piece of new clothes	1.9 (2)	-	1.0 (2)	-	1.3 (1)	0.5 (1)
Pad	1.0 (1)	0.9 (1)	1.0 (2)	-	-	-
Use no pad/rag	18.3 (19)	15.4 (16)	16.8 (35)	14.3 (19)	29.2 (21)	19.5 (40)
N	104	104	208	133	72	205

Figures in parentheses indicate the number

Table 10: Frequency of pad use by adolescent girls during menstruation.

Frequency	NFPE-AG			Never schooling-AG		
	Married	Unmarried	All	Married	Unmarried	All
1	10.7 (9)	18.4 (16)	14.6 (25)	18.4 (21)	25.5 (13)	20.6 (34)
2	15.4 (13)	19.5 (17)	17.5 (30)	19.3 (22)	15.7 (8)	18.2 (30)
3	35.7 (30)	18.4 (16)	26.6 (46)	26.3 (30)	19.6 (10)	24.3 (40)
4	9.5 (8)	14.9 (13)	12.3 (21)	15.8 (18)	9.8 (5)	13.9 (23)
5	3.6 (3)	4.6 (4)	4.1 (7)	1.8 (2)	2.0 (1)	1.8 (3)
6	4.8 (4)	5.8 (5)	5.3 (9)	3.5 (4)	3.9 (2)	3.6 (6)
7	20.2 (17)	18.4 (16)	19.3 (33)	14.9 (17)	23.5 (12)	17.6 (29)
N	84	87	171	114	51	165

Figures in parentheses indicate the number

Table 11: Drying of used pads by the adolescent girls.

Drying of used pads	NFPE-AG			Never schooling-AG		
	Married	Unmarried	All	Married	Unmarried	All
Hidden place but under sun	44.0 (37)	47.1 (41)	45.6 (78)	41.2 (47)	39.2 (20)	40.6 (67)
In hidden place	39.3 (33)	33.3 (29)	36.3 (62)	46.5 (53)	45.1 (23)	46.1 (76)
Inside bathroom/toilet	3.6 (3)	17.2 (15)	10.5 (18)	3.5 (4)	9.8 (5)	5.5 (9)
Under the roof	8.3 (7)	6.9 (6)	7.6 (13)	4.4 (5)	7.8 (4)	5.5 (9)
In side room	4.8 (4)	6.9 (6)	5.8 (10)	2.6 (3)	2.0 (1)	2.4 (4)
Open place	3.6 (3)	1.1 (1)	2.3 (4)	3.5 (4)	3.9 (2)	3.6 (6)
Under shari	1.2 (1)	3.4 (3)	2.3 (4)	-	-	-
Don't dry	-	10.3 (9)	5.2 (9)	0.9 (1)	-	0.6 (1)
N	84	87	171	114	51	165

Figures in parentheses indicate the number
Multiple answers considered

Table 12: Precautions taken by adolescent girls during menstruation.

Precaution	NFPE-AG			Never schooling-AG		
	Married	Unmarried	All	Married	Unmarried	All
Maintain cleanliness	20.2 (21)	37.5 (39)	28.8 (60)	22.6 (30)	19.4 (14)	21.5 (44)
Don't go out of the house	23.1 (24)	25.0 (26)	24.0 (50)	21.8 (29)	41.7 (30)	28.8 (59)
Don't care/ do all works	8.7 (9)	23.1 (24)	15.9 (33)	19.5 (26)	18.1 (13)	19.0 (39)
Abstain from work/ do light work	17.3 (18)	11.5 (12)	14.4 (30)	6.0 (8)	13.9 (10)	8.8 (18)
Abstain from intercourse	16.3 (17)	-	8.2 (17)	18.0 (24)	-	11.7 (24)
Take rest/sleep alone	6.7 (7)	1.9 (2)	4.3 (9)	4.5 (6)	4.2 (3)	4.4 (9)
Abstain from religious rituals	6.7 (7)	8.7 (9)	7.7 (16)	8.3 (11)	5.6 (4)	7.3 (15)
Don't go to cowshed	4.8 (5)	2.9 (3)	3.8 (8)	5.3 (7)	6.9 (5)	5.9 (12)
Don't climb any tree/ go under big tree	2.9 (3)	3.8 (4)	3.4 (7)	3.0 (4)	8.3 (6)	4.9 (10)
Don't cook/ serve food to elders	4.8 (5)	1.0 (1)	2.9 (6)	3.0 (4)	-	2.0 (4)
Don't cross any hole/ bridge	1.9 (2)	2.9 (3)	2.4 (5)	1.5 (2)	1.4 (1)	1.5 (3)
Don't take anything before bathing	1.0 (1)	3.8 (4)	2.4 (5)	3.8 (5)	5.6 (4)	4.4 (9)
N	104	104	208	133	72	205

Figures in parentheses indicate the number
Multiple answers considered

Table 13: Food practices followed by adolescent girls during menstruation.

Types of food	NFPE-AG			Never schooling-AG		
	Married	Unmarried	All	Married	Unmarried	All
Follow no restriction	51.0 (53)	52.9 (55)	51.9 (108)	59.4 (79)	48.6 (35)	55.6 (114)
Sour foods	32.7 (34)	32.7 (34)	32.7 (68)	18.0 (24)	37.5 (27)	24.9 (51)
Egg	24.0 (25)	23.2 (24)	23.6 (49)	18.8 (25)	23.6 (17)	20.5 (42)
Milk	21.2 (22)	17.3 (18)	19.2 (40)	18.0 (24)	19.4 (14)	18.5 (38)
Dried foods	16.3 (17)	13.5 (14)	14.9 (31)	9.8 (13)	9.7 (7)	9.8 (20)
Fish	8.7 (9)	17.3 (18)	13.0 (27)	19.5 (26)	30.6 (22)	23.4 (48)
Meat	3.8 (4)	13.5 (14)	8.7 (18)	4.5 (6)	23.6 (17)	11.2 (23)
Spices	5.8 (6)	1.0 (1)	3.4 (7)	9.8 (13)	8.3 (6)	9.3 (19)
Fruit	-	3.8 (4)	1.9 (4)	5.3 (7)	9.7 (7)	6.8 (14)
Vegetable	-	-	-	2.3 (3)	4.2 (3)	2.9 (6)
Sweet	1.0 (1)	-	0.5 (1)	0.8 (1)	-	0.5 (1)
N	104	104	208	133	72	205

Figures in parentheses indicate the number
Multiple answers considered

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