

MENSTRUAL MANAGEMENT AND HYGIENE PRACTICES AMONG TRIBAL GIRLS OF KERALA

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Abstract

The lives of adolescents in the Paniya community are distinct from those of other sections of society, and they have yet to be addressed by the government or the media. A Paniya girl from Vattachira (Calicut) must trek around 2 kilometers during menstruation to get fresh water for cleanliness. They use cloth to manage menstruation since they don't have access to pads or tampons, and drying garments during the rainy season is difficult, leaving them prone to rashes and infections. Data from observational methods, structured interview schedules, and case studies are included in the paper. This study can shed some light on the lives of Paniya adolescents, as well as assist policymakers and government officials in putting in place a few policies to provide basic services to Paniya community members.

Keywords: Menstruation, Hygiene practices, Tribal communities, Menstrual management.

INTRODUCTION

India is home to numerous tribal communities. India is ranked second globally for having the largest tribal population. Approximately 8.6% of the nation's population is comprised of tribal people (Census Report, 2011). As per D.N. Majumdar, a tribal group is a group of families or a collection of families with a common name, who live in the same area, speak the same language, observe certain taboos related to marriage, profession, or occupation, and have established a well-evaluated system of mutual obligations and reciprocity.

According to the Indian Ministry of Tribal Affairs (2004), tribal populations in India have the highest death rate and the greatest number of epidemic disease cases when compared to other tribes. Smoking and drunkenness are more common among Indian groups. Subramanian, Nandy, Gordon, Kelly, and Smith (2004).

There are 426,204 scheduled tribal members in Kerala, which makes up 12.7% of the state's total population, according to the 2011 census report. With a literacy rate of 49.5 percent vs the state's 93.9 percent, they are a disadvantaged community (Census Report, 2001). There are 92,500 Paniyas in Kerala, and 64 percent of them reside in the hilly regions (Census Report, 2011). The term "pani," which signifies effort in Malayalam, is the root of the word "paniya." Most members of the Paniya sect work as farmers or laborers. They had previously worked as bonded laborers for the affluent members of society.

It is thought that Paniyas belong to a Dravidian tribal tribe. Another widely held assumption is that Paniyas are African in origin. To labor in their fields, the European planting society brought the Paniya sect to Northern Kerala from Africa (Thurston, 1909). Paniyas speak Paniya, a dialect of Malayalam, when they interact. The northern districts of Kerala—Wayanad, Kannur, Malappuram, and Calicut—are home to Paniya settlers. The majority of Paniyas reside in the hills and forests. As

Scheduled Tribes, they were granted a special status by the Indian government.

Major issues of Paniya Tribal Community

The Paniya tribes' standard of living is poor in comparison to other communities around the nation. Poor housing standards, inadequate sanitary facilities, and unfavorable living conditions are prevalent in almost half of the Paniyas. Their lack of hygiene, inappropriate bathroom use, and tainted drinking water leave them open to several diseases. They are reluctant to seek medical attention even when they have serious health needs (Haddad, Feletto, Mohindra, Contreras, & Narayana, 2008).

Living in unclean conditions and being susceptible to epidemic diseases are two big risks to Paniya members' health and lives. Any community's children and teenagers are its best hope for the future, but Paniya teenagers are living unhealthy lifestyles with poor dental and sexual hygiene. Instead of using sanitary napkins, teenage females in Paniya communities use discarded garments, which can have negative health effects.

METHODOLOGY

Study Site

The study site was the tribal village of Calicut district. Calicut district is having a total population of 3,086,293 (Census of India, 2011). The data were collected from the tribal villages of Pullurampara village, Vattachira village and Koduvally village of Calicut district.

Sample

Participants of the study were 35 Paniya tribal adolescent girls aged 14-18 years. Most of the Paniya tribal adolescents had dropped their studies. The final sample was selected from 4 tribal colonies of Kerala.

Study Tool

Structured Interview Schedule (Saranya, 2018): A Structured Interview Schedule is a powerful tool used in both qualitative and quantitative types of research. The Structured Interview Schedule was developed to understand the menstrual management and hygiene practices of Paniya adolescent girls.

Objectives

The study aims to shed light on the issues confronting Paniya tribal adolescents. The study also describes the issues that adolescent girls face during menstruation and goes into detail about their menstrual management and menstrual hygiene practices.

Data Collection

Prior permission was collected from KIRTARDS, a governmental organization working in the area of tribal welfare and research. The researchers visited the tribal colonies and

explained the study objectives to the subjects. Data were collected using case study method and through a face to face interview method by using the Structured Interview Schedule. All ethical issues i.e., like informed consent, confidentiality of information and timings of the interview were taken care of prior to final data collection. The tools were translated into local language by two experts from the state. A good rapport was created before administering the tool then the following instructions were given

“This is a brief attempt to learn about your opinions on a range of topics pertaining to mental health and parental care. Enrollment in this research is entirely voluntary. There is no time limit to answering the questions, so feel free to respond with whatever first comes to mind. There are no right or incorrect responses to the questions. Try to complete the response as soon as you've read the question. so as to spare you the precious time. Your answers should be as honest as possible.”

RESULTS

Background Information

Table 1. The background information of the participants (n=35)

Variable	n (%)	Variable	n (%)
Age		<input type="checkbox"/> 5-6 members	24 (68.57)
<input type="checkbox"/> 14	5 (14.28)	<input type="checkbox"/> 7 & above	2(5.71)
<input type="checkbox"/> 15	8 (22.85)		
<input type="checkbox"/> 16	17(48.57)	Mother's education	
<input type="checkbox"/> 17	5 (14.28)	<input type="checkbox"/> Not educated	27 (77.14)
Education		<input type="checkbox"/> Till 5 th standard	2 (5.71)
<input type="checkbox"/> Studying	4 (69.7)	<input type="checkbox"/> Till 10 th standard	2 (5.71)
<input type="checkbox"/> Drop out	30 (28.1)	<input type="checkbox"/> Till 12 th standard	2 (5.71)
<input type="checkbox"/> Not educated	1(2.2)	<input type="checkbox"/> Above 12 th standard	2 (5.71)
Family type		Father's education	
<input type="checkbox"/> Joint family	30 (83.4)	<input type="checkbox"/> Not educated	27(77.14)
<input type="checkbox"/> Single family	5 (16.6)	<input type="checkbox"/> Till 5 th standard	4 (11.42)
No. of siblings		<input type="checkbox"/> Till 10 th standard	3(8.57)
<input type="checkbox"/> Only child	2 (4.7)	<input type="checkbox"/> Till 12 th standard	1 (2.85)
<input type="checkbox"/> 1 siblings	8 (41.1)	<input type="checkbox"/> Above 12 th standard	0
<input type="checkbox"/> 2 siblings	20 (17.5)	Mother's occupation	
<input type="checkbox"/> 3 & siblings	5 (36.7)	<input type="checkbox"/> Self-employment	28 (80)
Total monthly income of the family		<input type="checkbox"/> Service	2 (5.71)
<input type="checkbox"/> Less than 1000	11 (41.5)	<input type="checkbox"/> Seasonal employment	3 (8.57)
<input type="checkbox"/> 1001-3000	19 (50.1)	<input type="checkbox"/> Agriculture	1 (2.85)
<input type="checkbox"/> 3000-5000	4 (7.2)	<input type="checkbox"/> Unemployed	1 (2.85)
<input type="checkbox"/> 5001 and above	1 (1.1)	Father's occupation	
Place of living		<input type="checkbox"/> Self-employment	15 (42.85)
<input type="checkbox"/> Calicut	20 (57.14)	<input type="checkbox"/> Service	8 (22.85)
<input type="checkbox"/> Malappuram	15 (42.85)	<input type="checkbox"/> Seasonal employment	7 (36.7)
		<input type="checkbox"/> Agriculture	5(14.28)
		<input type="checkbox"/> Unemployed	0

Decimal places rounded to the nearest full number

Majority of the participants have at least one sibling. 50% of the participants monthly family income is between 1000 and 3000. More than 75% of the participants reported that their parents are not educated. Around 8% of the participants reported that their parents have seasonal employment.

Living in unclean conditions and being susceptible to epidemic diseases are two big risks to Paniya members' health and lives. Any community's children and teenagers are its best hope for the future, but Paniya teenagers are living unhealthy lifestyles with poor dental and sexual hygiene. Instead of using sanitary napkins, teenage females in Paniya communities use discarded garments, which can have negative health effects.

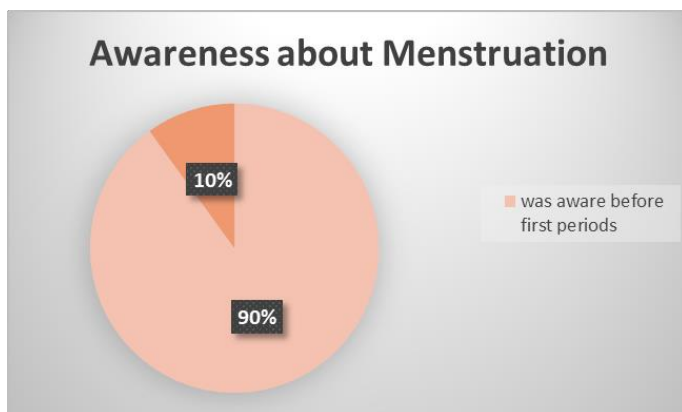


Chart 1. Awareness about Menstruation

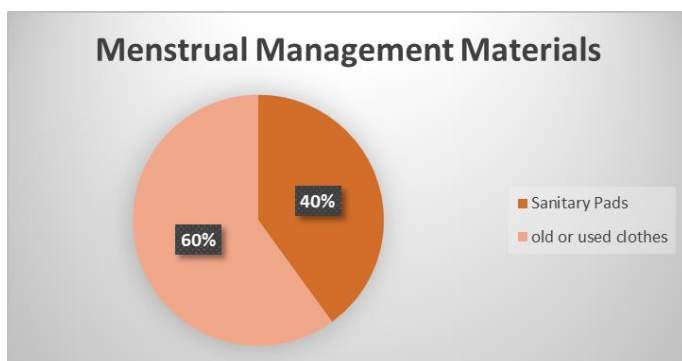


Chart 2. Menstrual Management Materials use by Paniya Adolescents

Chart 1 and 2 shows the menstrual awareness and management practices of Paniya adolescent girls. The data is obtained by Structured Interview Schedule. It shows that 90% of Paniya adolescents were not aware about menstruation process till their first periods and 60% of adolescent girls use old clothes for menstrual management. They also report that water scarcity makes their period days miserable.

CASE STUDY

Menstrual Hygiene: Perspective of an adolescent girl

Case 'a' lives in the Calicut region, namely in the Paniya village. She is not enrolled in school and is fifteen years old. When she was thirteen years old, she experienced her first period. She knew nothing about the menstrual cycle or how to control it. Sensing that her mother was sick, she rushed to see her. Her mother made her stay in her 'padi,' or hut, for a week while giving her some shabby clothes. She doesn't know how to use sanitary napkins and has never used them for managing her period. She uses the sun to wash and dry old clothes. She finds it difficult to dry her clothes after a wet day, and there are few

items of clothing made entirely of cotton. "I wish I hadn't experienced periods at all during rainy season" she says.

Case "b" is a 17-year-old resident of the Wayanad area. Prior knowledge about menstruation and its management was not provided to her. During her period, she had to stay alone in her paddy, which worried her since it was her first time sleeping by herself. She never used a sanitary napkin when she was menstruating and wore cotton clothing. As soon as she started her periods, she immediately quit studying.

DISCUSSION

Adolescents in the Paniya Community have very little knowledge about period hygiene and the menstrual management process. 90% of teenagers did not obtain sufficient information on menstruation from any of the sources, as shown in Figure 1. Within the community, discussing menstruation is frowned upon. Menstruating women are consequently excluded from a variety of activities. Period pain is a common experience for Paniya women due to inadequate sanitation and menstrual management supplies. Unfavorable weather and a lack of resources also have an impact on their wellbeing during menstruation.

The adolescent girls reported that they don't receive adequate health care facilities. In a study conducted by the health status of tribal women is very pathetic in Kerala. Mohindra, Haddad and Narayana (2006) conducted a study to analyze the health status of women in the marginalized areas. They found that women from lower caste have a high prevalence of health problems than those from higher castes. They also found that low economic condition and lower caste together contributes to the poor health condition among women of Kerala.

CONCLUSION

The broad objective of the study was to find out the menstrual hygiene and menstrual management practices among tribal adolescents. So far as the socio-economic background of the Paniya community is concerned, they are the marginalized section of society and the monthly income of the majority of the people (90%) was found to be less than Rs. 3000/.

More than half of the family had more than 4 family members. Therefore, it is a big challenge for most of the families to survive in today's social set-up. So they are finding it difficult to provide proper sanitation, menstrual management tools, or medical amenities to adolescent girls.

The lack of awareness among Tribal adolescents about menstruation, menstrual hygiene, and menstrual management can contribute to poor gyno health among tribal women. That is one of the reasons for increased maternal mortality rate and infant mortality rates among tribal communities.

IMPLICATIONS

The present study threw light on the life of one of the marginalized sections of the society, that is, the Pandya adolescents. The findings of the present study are eye opener for the tribal welfare policy makers of Kerala Government and they should think of improving the situation of adolescents in terms of educational facilities and nutrition and their safety from psychological, physical and sexual abuse. Lack of educational facilities in and around the village is the main cause of low level of literacy among Paniya community. Efforts should be made to arrange vocational training program for the Paniya adolescents who are out of school or had never been to school so that they can lead an independent life.

In order to improve the economic condition of the Paniya families, local Panchayat should act as facilitator for helping the poor families to form self-help group for imitating income generating activities which will be rewarding and in turn it will improve the economic condition of the family. Apart from this, local panchayt should address some other important issues like sanitation facilities and safe drinking water in and around the village where Pandya people reside. Local NGOs should be encouraged to join hands with the Panchayat and block office for over all development of the area and wellbeing of Pandya community.

LIMITATIONS

Like every study, the present study also suffered from some limitations. First, the study was carried out with a small group of Paniya adolescents. Second, the study could not capture the views of Panchayat and other government officials to understand their plan and future strategies for improvement of conditions of Paniya community. Third, the findings of the study were based on self-report. High illiteracy among Paniya adolescents was one of the barriers to get their perspectives of their present living condition and perception about future.

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