

## Reproductive Health Problems Among The Adolescent Girls

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### Abstract

Adolescent is a stage of development transition i.e. a bridge between childhood and adulthood. This stage usually develops gradually without proper attention, specially in the developing countries. Adolescence is a particular vulnerable group and need special health care. Care of the reproductive organs lays the foundation for the world's demographic future to find out the pattern of reproductive health problem among the adolescent girls aged 13-18 years. This cross sectional study was carried out at two selected institutions of Dhaka city. Data were collected through a semi-structured questionnaire which was pre tested before data collection. The mean age of menarche of the adolescent girls was 12 years. Most of the adolescents 84 (66.67%) suffered from reproductive health problems during menstruation.

### Introduction

The World Health Organization defines in 1996, adolescence as the period of life between ages 10 and 19 years. International conference on population and development (ICPD) defines Reproductive Health as "Complete state of

Among respondents, 52(41.27%) had painful bleeding (Dysmenorrhoea), 14(11.11%) had excessive bleeding (Menorrhoea), 10(7.94%) complained of irregular bleeding and 08(6.35%) suffered from scanty bleeding (Oligomenorrhoea). Regarding other reproductive health related problems, majority 76(60.32%) respondents mentioned no problem and rest 50(39.68%) mentioned about some problems. Among 50(39.68%) respondents, 44(34.92%) suffered from per vaginal whitish discharge (Leucorrhoea). The study may conclude that majority of the adolescent girls suffer from reproductive health related problems which demand raising their awareness, education and appropriate health care facilities as well as mental support to improve their reproductive health.

Physical, Mental and Social well-being and not merely an absence of disease and infirmity, in all matters related to reproductive systems, functions and disease".<sup>1</sup>

Over the last decade or so, there has been an increasing interest in adolescents throughout the world. In Bangladesh the idea is comparatively new. Adolescents and youth in Bangladesh are particularly vulnerable to health risks, especially in the area of reproductive health. This is due to their lack of access to information and services and social pressure to perform as adults notwithstanding the physical, mental, and emotional changes they are undergoing.<sup>2</sup>

Adolescent is a distinct group in the society, clearly different from the children and the adults. This stage always develops gradually without proper attention, specially in the developing countries. International conference on population and development (ICPD) held in Cairo in 1994, recognized the fact that the adolescence is a particular vulnerable group and need special health care. Care of the reproductive organs lays the foundation for the world's demographic future.<sup>1</sup>

United Nations estimated in 1995 that among 914

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million adolescents in the developing world, about one-fifth of the total population of which 19% live in Asia. Bangladesh has nearly 27 million adolescents among which 13.7 million are girls.<sup>1</sup>

This study is an attempt to assess reproductive health related complaints among the adolescent girls in two selected institutions of Dhaka city.

#### Methods

This cross sectional study was conducted among the female students of class eight to ten of High School and H.S.C class of a higher secondary College at Mirpur, Dhaka. Two institutions were selected purposively. Total students of two institutions were 300. Out of them total 126 students were selected by using lottery method. A structured questionnaire were prepared and pre tested among the female students and after pre testing, questionnaire were modified and finalized for data collection. Due permission was taken from concerned authority. After taking verbal consent from selected students, data were collected and recorded in a preformed data sheet. Collected data were analyzed by using SPSS 11.5 version.

#### Results

A Total number of 126 respondents were interviewed. Table 1 showed the highest and lowest variation of age was 18 and 13 years respectively. Most of the respondents 90 (71.4 %) was in 16-18 years of age, and 36 (28.6 %) was in 13-15 years of age. The mean age of respondents was 16 years.

**Table-1**

Distribution of respondents by age (n=126)

Age in Year	Number	Percentage (%)
13-15	36	28.6
16-18	90	71.4
Total	126	100

According to Table 2, among 126 respondents, the highest percentage 60(47.63%) started their menstruation at the age of 12 years, followed by 30(23.80%) who had their menarche at the age of 13 years and only 20(15.87%), 10(7.94%), and 6(4.76%) had their menarche at the age of 11

years, 14 years and 10 years respectively. The mean age of menarche was 12 years with SD±1.58 years.

**Table-2**

Distribution of respondents by their age at menarche

Age (Years)	Number	Percentage (%)
10	06	4.76
11	20	15.87
12	60	47.63
13	30	23.80
14	10	7.94
Total	126	100

From Table 3 it was observed that 52(41.27%) had painful bleeding, 14(11.11%) had excessive bleeding, about all of the related problems, 10(7.94%) mentioned about irregular bleeding, 08(6.35%) suffered from scanty bleeding and 42(33.33%) mentioned about having no menstrual problems.

**Table-3**

Distribution of respondents according to menstrual problems

Menstrual problems among respondents	Number	Percentage (%)
Scanty bleeding	08	6.35
Excessive bleeding	14	11.11
Painful bleeding	52	41.27
Irregular bleeding	10	7.94
Other problems	00	00
No problems	42	33.33
Total	126	100

Table 4 showed majority 76(60.32%) had no problems. Only 44(34.92%) and 06(4.76%) suffered from whitish discharge and itching respectively.

**Table-4**  
Distribution of respondents according to the other reproductive health problems in genital area

Problems in genital area	Number	Percentage (%)
Whitish discharge	44	34.92
Itching	06	4.76
Swelling	00	00
Ulceration	00	00
Others	00	00
No problem	76	60.32
Total	126	100

Table 5 showed that painful menstrual bleeding was poorly present among the respondents of low and high economic status which were 14 (35%) and 6(33.33%) respectively and present highly 32(47.05%) among the respondents of medium economic status. Hence there was found no association between economic status and painful menstrual bleeding and between economic status and per vaginal whitish discharge statistically.

From Table 6, it was observed that 84(66.67%) respondents were practicing hygienic protective measure among which 38(45.24%) suffered from painful bleeding and 24(28.57%) suffered from per vaginal whitish discharge during menstruation. Among 42(33.33%) respondents practicing unhygienic protective measures, 14(33.33%) had

**Table-5**  
Association among economic Status of adolescent girls and painful menstrual bleeding and per vaginal whitish discharge

Economic status	Painful menstrual bleeding		Per vaginal whitish discharge	
	Present	Absent	Present	Absent
Low (5000- 7000 Tk.)	14 (35 %)	26 (65 %)	18 (45%)	22 (55%)
Medium ( 7001-15000 Tk)	32 (47.05%)	36(52.95%)	20(31.25%)	44(68.75%)
High (15001 Tk to above)	6 (33.33%)	12(66.67%)	6 (27.27%)	16(72.73%)
Total	52(41.27%)	74(58.7%)	44 (34.92%)	82(65.08%)

**Table-6**  
Association among protective measures and painful bleeding and per vaginal whitish discharge during menstruation of adolescent girls

Protective measures	Painful Bleeding during menstruation		Total	$\chi^2$ value & p value	Per vaginal whitish discharge		Total	$\chi^2$ value & p value
	Present	Absent			Present	Absent		
Hygienic (use sanitar /cotton pads during menstruation and not reuse.)	38 (45.24%)	46 (54.76%)	84 (66.67%)	1.62 & >0.05	24 (28.57%)	60 (71.43%)	84(66.67%)	4.45 & <0.05
Unhygienic (use other than sanitary/ cotton pads during menstruation and reuse and preservation procedure is unhealthy).	14 (33.33%)	28 (66.67%)	42 (33.33%)		20 (47.62%)	22 (52.38%)	42(33.33%)	
Total	52(41.2%)	74(58.7%)	126 (100%)		44 (34.92%)	82 (65.08%)	126(100%)	

painful bleeding and 20(47.62%) suffered from per vaginal whitish discharge during menstruation. Though there was no association between protective measures and painful menstrual bleeding but there was significant association ( $p < 0.05$ ) between protective measures during menstruation and per vaginal whitish discharge of respondent.

#### **Discussion**

A Total number of 126 respondents were interviewed. The highest and lowest variation of age was 18 and 13 years respectively. The mean age of respondents was 16 years.

Out of 126 adolescent girls the highest percentage (47.63%) started their menstruation at the age of 12 years. These findings were consistent with the study done by BANS' 94, where mean age at menarche was 12.6 years & by 13.9 years, 90% of female adolescents attained their menarche. Another study in Mumbai (India) revealed similar findings, where the mean age at menarche was 12 years. This similarity (12 and 12.6 yrs) may be due to same socio-economic status & living standard of the adolescent girls. But in a different study, results differ from ours, where they showed mean age at menarche was 13.9 years. This dissimilarity may be due to variation in geographical distribution & physical growth of the adolescent girls.<sup>3,4,5</sup>

Regarding menstrual problems, total 66.67% complained some sort of problems. Among them 41.27% had painful bleeding, 11.11% had excessive bleeding, 7.94% mentioned about irregular bleeding and 6.35% suffered from scanty bleeding. The rest respondents mentioned having no menstrual problems. This observation was closely related with BIRPERHT study where they found, over 65% adolescent girls had menarche with menstrual problems.<sup>4</sup>

In this study, it also revealed that majority (60.32%) had no problems in genital area while 34.92% and 4.76% suffered from whitish discharge and itching respectively. A study was conducted by BRAC showed that most of the adolescent girl complaints of whitish discharge accompanied by severe abdominal pain which may be due to improper drying of reused sanitary napkin / cloth that become a source of fungal infection and ultimately leads to vaginal discharge.<sup>6</sup>

In this study we observed no association among economic status, painful menstrual bleeding and per vaginal whitish discharge.

There was statistical significant association of occurrence of per-vaginal whitish discharge among hygienic and unhygienic practiced by adolescent girls. It may be due to improper cleaning procedure of menstrual protective measures like cleaning without using disinfectant and improper preservation place of sanitary napkin/cloth. The frequently reuse of sanitary napkin/cloth and long time preservation may lead to infection.

#### **Conclusion**

Adolescent girls are the future of every society and also a great resource of every nation. This study revealed that our adolescent girls suffer from reproductive health problems which demands awareness, motivation, education and appropriate health care facilities to improve their reproductive health.

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