



Physiological and Sociological Challenges during Menarche in Adolescent Girls: A Comprehensive Review

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<p>Received 08/05/2025</p> <p>Accepted 15/05/2025</p> <p>Published 09/07/2025</p>	<p>Abstract</p> <p><i>Menstrual cycle is the highest mark of womanhood in a girl life. The journey of becoming a woman from a girl is defined by the process of menstrual cycle. The onset of menstrual cycle is known as Menarche. It is the most significant incident of a girl's life. Menarche brings about a lot of physical, mental, psychological modification in a girl. This report tries to find out the inevitable changes of the girl at their menarche. A cross-sectional study was conducted on 150 adolescent girls aged between 11 - 16 of class 8-10 from the district of South 24-Pargana of West Bengal. Data were collected in the form of close-ended questionnaire. The mean age of the girls to have their menarche is found to be 13.1. Mean weight and mean height of the girls are 43.75 kg and 153.12 cm respectively. The BMI index shows that 64% girls have normal body weight, 24.66% are underweight while 11.35% are overweight. The report also find out the impact of menarche on the physiological, psychological, psychosocial life of the adolescent girls. The state of menstrual health as in the amount and duration of menstrual bleeding viz. scanty mild blood flow, normal moderate blood flow, prolonged heavy blood flow, degree of pain viz. moderate, severe or no pain during dysmenorrhea or period cramps, need of sanitary napkins in those days, all these parameters are studied in this report. Effect of socioeconomic status, role of social barriers, taboos and stigmas, like prohibition of entering temples, restriction on foods during periods, that create guilt, frustration, anxiety and many more physiological problems, are addressed in this paper.</i></p> <p>Keywords: Adolescent, Dysmenorrhea, Menarche, Menstrual Bleeding, Social Barriers, Taboos</p>
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Introduction

The journey of womanhood of a girl is started by some inherent physiological changes

coupled with other psychological changes an event is known as menstrual cycle. The word "menses" derived from the Latin word which means "months". The event of menstrual cycle is characterized by shedding of uterine wall along with the rupture of unfertilized ovum. The onset of menstrual cycle is known as menarche, the most important event of a girl's life. Menarche brings about several physiological and psychological challenges. Many physiological changes as well as several gynecological issues like i) menorrhagia ii) hypo menorrhagia iii) Dysmenorrhoea iv) Hyper menorrhagia and diseases like i) infertility ii) pelvic tenderness iii) genital prolepses iv) reproductive tract infection happen during this time. Irregularities in menstrual bleeding cause many Premenstrual syndrome (PMS) and in severe case it can cause Premenstrual dysphoric disorder (PMDD). With this many difficulties like mood swings, anxiety, irritability may also happen. There are a lot of social problems that the girls had do face which are very regressive and backward. Even in this 21st-century there has many taboos, myths and social stigma around menstrual cycle. There are different societal restrictions like omitting regular bath, prohibition of entering temples, avoid certain foods during their periods in both Hindu and Muslim religion (Juyal et.al,2013). Many families even think it as a curse or beginning of disease. On the other hand, in many parts of the country it is also seen that the girls are being worshiped at their first menarche as the families, relatives and neighbourhoods celebrate their daughters upcoming journey of becoming a mother (Dharmalingam, 1994). Pubertal age of adolescent girls is a stage of physiological modification coupled with psychological and sociological intervention as physiological changes like growth, maturation is carried away with psychological effects like fatigue, anxiety, depression that sometimes leads to misbehaviour with their parents (Reena, 2015). Menstruation is still now observed by a large section of people as an unclean body activity. social incorporation makes the girl very reluctant and inconfident. Stress at this time is a very common thing. The emotional turbulence coupled with stress make the girls weak both mentally and physically. Policy maker and stakeholders of schools should step up and take initiatives to adopt good menstrual hygiene programme to educate both students and their parents. (Joshi et al., 2024). Knowledge of menstruation, puberty, reproductive health care, social issues, needs to be handled carefully. Schools, families, peers, Internet, are the main proponents that can help the girls at these crucial days. The girls should be celebrated not treated as a burden at their menstruation.

Review of Literature

Puri and Kapoor (2016) opined that there are several restrictions like avoidance of excretion, not wearing new clothes, not visiting guests are seen on rural and urban girls at their periods of which restriction from entering Pooja room is common for urban girls while for rural girls it is not entering the kitchen. Khanna (2019) reported that onset of menarche influences the pace of achieving educational excellence by different means. Negi et al. (2018) reported that physiological activities like dietary habit, physical movement have positive impact on menstrual health of adolescent girls. Kochar and Ghosh (2022) expressed that in later phase of menstrual cycle the degree of problems gets lower, also physiological and mental health and very much interrelated during menstruation. Pathak et.al (2014) pointed out that menarcheal age of Indian women experience a secular degradation as it is related with several factors like habitat, geographic region, linguistic groups, educational achievement, caste, wealth etc. Betsu et.al (2024) find out there is a healthy impact of menstrual hygiene programme like menstrual awareness, both of the

girl herself as well as from the family members, menstrual education on school going adolescent girls as it influences their academics as well as physical and mental perceptions. Padmapooja et al. (2023) expressed that early menarche, prior to 11, can bring about a lot of physiological health concerns like risk of heart problem, MHM issues, reproductive health concern of adolescent girls. Gokhale (2015) reported the influence of summation of physiological, psychological, biological factors on menstrual girls for example: greater protein and fat intake in peripubertal stage initiates early menarche while absence of biological father initiates early puberty. Sommer et al. (2015) reflects on the insecurities and uncomfortableness of adolescent girls at their menarche that results in low self-esteem, in confident in studies. Ibitoye et al. (2017) find out some concerned issues like early marriage, STDs, early pregnancy etc. can be brought about by early menstrual problems in low and middle-income countries. Sinha and Modi (2014) reported there is healthy needs of menstrual health and hygiene related knowledge specially for the girls who are not aware about their menarche and find it difficult to cope up with once it started as they show anxiousness, irritation, under confidence etc. Watts et al. (2020) said menarche brings about physiological as well as Socio cultural challenges like social stigma, stereotyped attitudes, myths that affects the girls. Behera et al. (2015) reported adolescent girls feel uncomfortable about discussing menstrual cycle with others except with their peers. lack of knowledge on hygiene and financial constraints force them to use old torn clothes instead of sanitary napkins. For these challenges there are needs of relevent curriculum, counselling, menstrual pad vending machines. Banerjee and Pramanik (2024) reported the different reason of having early menarche of adolescent bengali girls like excess screen time and lack of physical activities like walking, outdoor playing, bicycle riding. Bhalerao et al. (2024) reported about the different psychological challenges of adolescent girls at their menarche specially at the first day of periods like mood swings, guilt, anxiety, hopelessness etc. Chawla (1994) pointed out on the tradition of glorification and celebration of menstrual cycle in Indian culture. In South India menarche of a girl celebrated and rituals of kicking Ashoka tree applying her 'Shakti' to make it bloom. Menstruating goddess is believed in many parts of India following the closing of temples for some days. Menstruation is also celebrated as the mark of potential fertility, the red blood and considered as sacred as that of the sindur. Leslie (1996) talked about the unfortunate malpractices on Indian women, male are always regarded as superpower and the patriarchal mindset are well established in society. The myths centred around are women carries inborn sexuality and they are not sacred, wicked and threatening. Joshy et al. (2019) reported women in remote villages of Himalayas suffers taboo like detachment from family members and be placed in cowshed so that they can't meet anyone, women also forced to defecate in open and cannot use common toilet during menstrual days. Kosińska et al. (2019) found that socioeconomic status affects the age of attaining menarche like habitat, no. of family members, parental education, fathers' occupation, females BMI. Out of all these, fathers' occupation is most significant amongst these factors also lack of engagement among women in jobs only talks about patriarchal setting in society. Sumedha et al. (2025) find out lack of balanced diet and inappropriate lifestyle affect the occurrence of menarche. Mishra et al. (2017) reported girls from affluent family background are more privileged than the girls from low socioeconomic status in maintaining good menstrual hygiene and thereby they face less gynecological issues at their menarche. Thakur et al. (2014) said that societal taboos, myths, stereotyped beliefs and lack of proper knowledge about menstruations of adolescent girls forces them to perform many unscientific activities during

periods. Biswas et al. (2013) reported about the influence of gender at the menarche age of adolescent girls. Rooms sharing with male member initiates early menarche than with female members. Dambhare et al. (2012) identified the common events of menstrual girls to be skipping schools which basically happened due to period cramps and other Premenstrual symptoms. Girls who actively participate in sports tend to have much earlier menarche. Ghattargi (2005) focuses on the physiological challenges, impact of nutrition intake and taboos and stigmas of the society at the menarche of adolescent girls. In Vedic texts, the sin of killing a Brahmana, the murderer of that is considered to be fall within the bondage of the monthly menstrual flow of girls as they take the guilt of Indira's Slaying over Vritra's (Chawla, 1992). There is importance of promoting and mainstreaming menstrual health management programme in schools of South Asia (UNICEF AND WATER AID, 2017). There is importance of WASH management on adolescent girls sociological and physiological world. (UNICEF and SHARE consortium 2016).

Objectives of the Study

1. To identify the impact of physiological changes of the adolescent girls during their menarche.
2. To identify the impact of sociological changes of the adolescent girls during their menarche.
3. To examine the interrelationship between physiological and sociological challenges experienced by adolescent girls during menarche.

Hypotheses

1. There would have significance differences of physiological changes on the adolescent girls during their menarche.
2. There would have significance differences of sociological changes on the adolescent girls during their menarche.
3. There would have significance differences on the interrelationship between physiological and sociological changes on the adolescent girls during their menarche.

Research Questions

1. Is there any impact of physiological changes of adolescent girls during their menarche?
2. Is there any impact of sociological changes of adolescent girls during their menarche?
3. How do physiological and sociological challenges interact to influence the wellbeing of adolescent girls during menarche?

Methodology of the Study

A cross-sectional study has been performed on 150 adolescent girls of class 8- 10 from the district South 24-Parganas of West Bengal aged between 11-16 years to evaluate the physical changes during the onset of menstrual cycle.

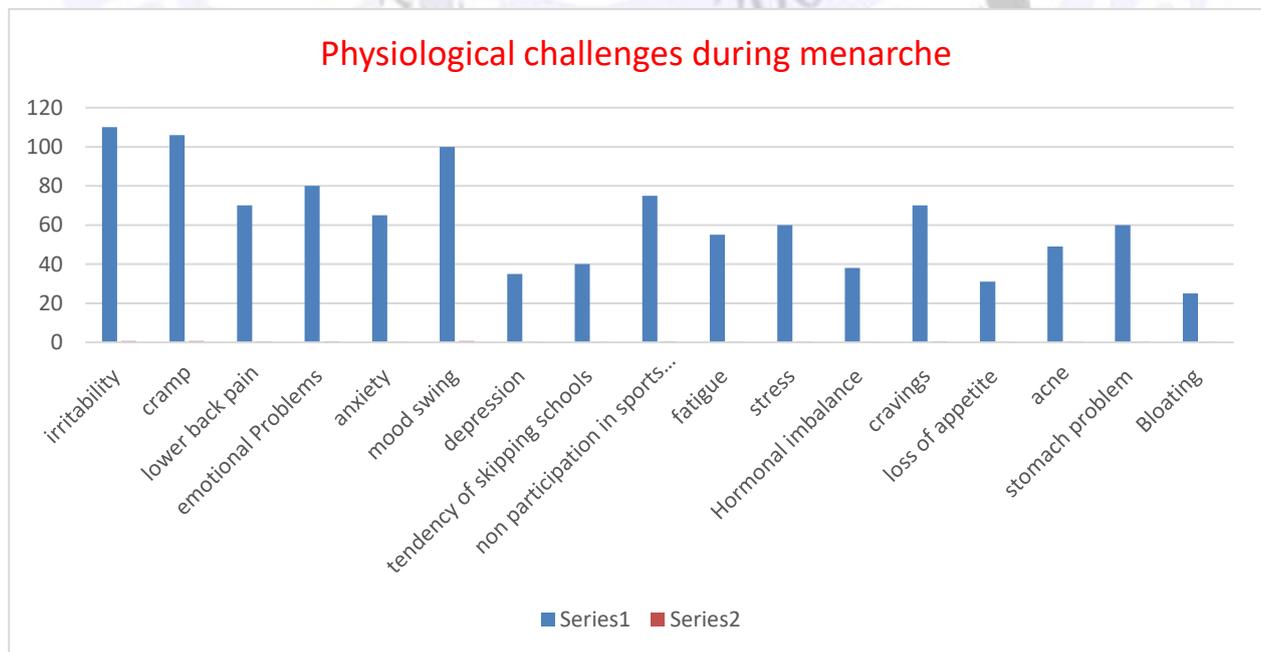
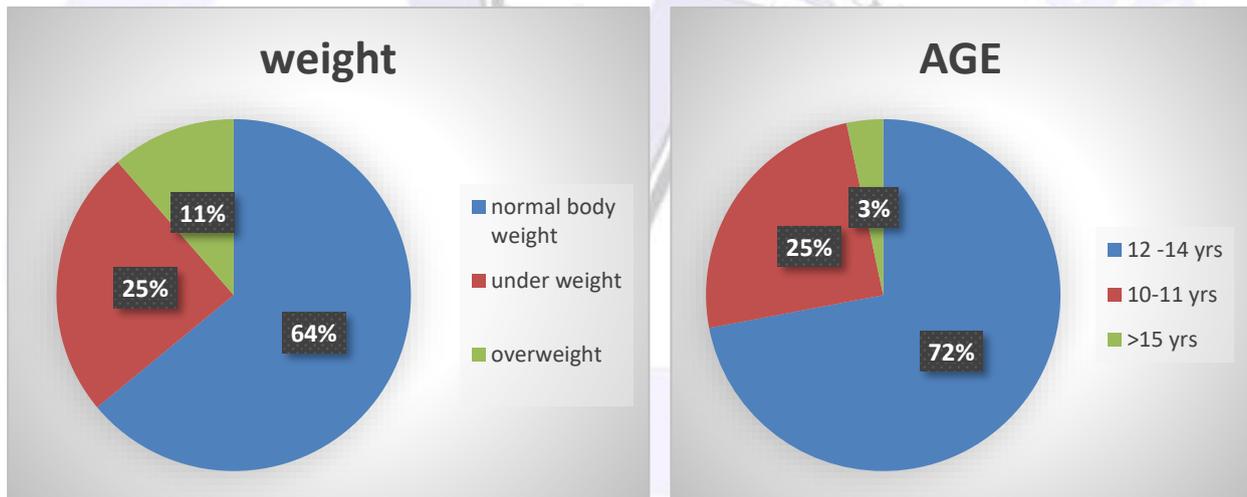
The information are collected by the closed-ended questionnaire, interviews and by google forms. The data were collected only from those girls who along with her parents had full consent and were willing to participate in the study. The data given by each girl were collected separately and the confidentiality of the data were maintained.

Girls at their menarche faces some inherent challenges of menstrual bleeding like the irregularities in menstrual flow, inconsistency in the duration and amount of bleeding,

Dysmenorrhea or period cramps, behavioral changes. Awareness of menstrual hygiene during menarche is very important at this stage.

Result and Discussion

From the collected data about the adolescent girls at their menarche some important insights are found regarding their menstrual bleeding - **Age:** Mean age of the menarche among the girls is found to be 13.1 years. The sample provides 108 girls out of 150 (72%) had their first menarche between 12 – 14 years. 37 girls (24.66%) had it between 10 – 11 years and 5 girls (3.33%) had it after 15 years. **Weight:** Mean Weight at the menarche is found to be 43.75kg. The mean height at this time is 153.12 cm. The BMI index is very important for the adolescent girls. In this study the BMI index shows girls have different results as 96 out of 150 girls (64%) have normal body weight, 37 (24.66%) are underweight and 17 (11.35%) are found overweight. **Behavioral change:** The behavioural changes at this stage is very common. The findings revealed several behavioral or physiological changes happen at the onset of menstrual cycle adolescents’ girls.



Some physical events of menstrual health during their menstrual days are following:

Menstrual irregularities (Table 1)

The Table below shows different types menstrual cycle among the 150 girls. 105 (70%) girls have regular cycle where 25 (37.5%) experiences irregularities. The frequency of cycles also seen as 5 girls (3.33 %) have their cycle within 24 days, 98 (65.33%) girls have their cycle within 24-35days. 38 girls (28.66 %) have it within 35-45days and 9 (6%) have it after 45days or so.

Parameter	Regular	Irregular	<24days	24-35 days	35-45 days	>45days
No. of girls	105	25	5	98	38	9
Percentage	70%	37.5%	3.33%	65.33%	28.66%	6%

Duration and Amount of flow (Table 2)

Menstrual blood loss is reported as, 5 (3.33%) girls have scanty blood flow that lasts nearly about 2days. 39 (26%) and 85 (56.6 %) girls have their menstrual flow for 2-4 days and 4-7days respectively. 21 (14%) girls are reported to have prolonged menstrual blood flow. 35 girls (23.33 %) girls face mild blood flow and use 1-3 pads daily, 87 girls (58%) face moderate blood flow and use 4-5 pads daily while 10 (6.66 %) face heavy blood flow and use 6-7 pads daily on an average.

Duration of flow		Amount of flow	
No of girls	Percentage	Mild	Percentage
5(0-2 days)	3.33%	35	23.33%
39(2-4 days)	26%	Moderate	Percentage
85(4-7 days)	56.6 %	87	58%
21 (>7days)	14 %	Heavy	Percentage
		10	6.66%

Dysmenorrhea (Table 3)

Periods cramps or Dysmenorrhea is a common feature of the menstrual girls and range of pain or cramp varies. In this survey 79 (52.66%) girls are found having Mild to moderate Dysmenorrhea, 26 (17.33%) girls are found having severe Dysmenorrhea while 45 (30%) girls reported having no pain.

Pain	No pain	Mild to Moderate	Severe
No. Of girls	45	79	26
Percentage	30%	52.66%	17.33%

Awareness of menstrual hygiene (Table 4)

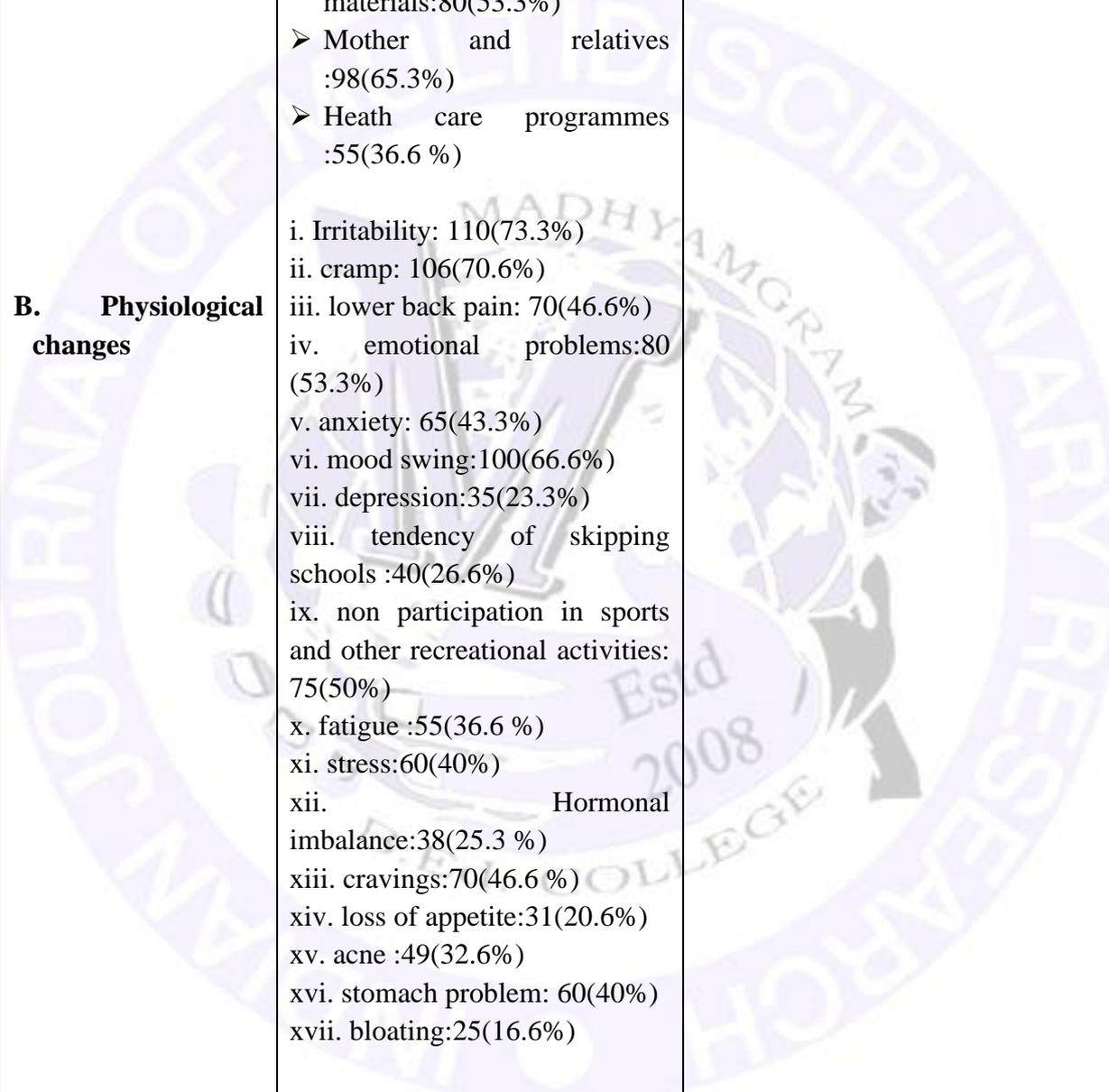
Peer group	Online content	Text books and other printed materials	Mother and relatives	Health care programmes
85	90	80	98	55

Sources of information

From the above table it is shown that the maintenance of reproductive hygiene specially during the menstrual cycle are known by most of the girls. The sources of information are i) peer group discussions (56.6%) ii) online content (60%) iii) text books and other printed materials (53.3%) iv) mother and relatives (65.3%) v) health care programmes (36.6%) etc. It is observed that peer groups, mother and relatives and online content from internet provides bulk of knowledge. (Table 4) Multiple responses were received by the girls so the data of sources of information have overlapped.

Analysis and interpretation of the physical changes of the adolescents girls during menarche

A. Menstrual health		Duration	Frequency
❖ Menstrual irregularities	Regular ➤ Frequency: 105 ➤ Percentage: 70% Irregular ➤ Frequency: 25 ➤ Percentage: 37.5 %	➤ <24days ➤ 24-35days ➤ 35-45days ➤ >45days	➤ 5(3.33%) ➤ 98(65.33%) ➤ 38(28.66 %) ➤ 9(6%)
❖ Menstrual bleeding	Duration i. Nature: scanty ➤ Frequency: 5 ➤ Percentage: 3.33% ➤ No of days: 0-2days ii. Nature: normal ➤ Frequency: 39 ➤ Percentage: 26% ➤ No of days: 2-4days iii. Nature: normal ➤ Frequency: 85 ➤ Percentage: 56.6 % ➤ No of days: 4-7days iv. Nature: prolonged ➤ Frequency: 21 ➤ Percentage: 14 % ➤ No of days: >7days	Amount i. Mild ➤ Frequency: 35 ➤ Percentage: 23.33% ➤ No. Of pads: 1-3pads daily ii. Moderate ➤ Frequency: 87 ➤ Percentage: 58% ➤ No. Of pads: 4-5pads daily iii. Heavy ➤ Frequency: 10 ➤ Percentage: 6.66% ➤ No. Of pads: 6-7pads daily	
❖ Dysmenorrhea	Degree of pain/cramp i. No pain ➤ Frequency: 45 ➤ Percentage: 30% ii. Mild to moderate ➤ Frequency: 79 ➤ Percentage: 52.66 %		

<p>❖ Menstrual hygiene awareness</p> <p>B. Physiological changes</p>	<p>iii. Severe</p> <ul style="list-style-type: none"> ➤ Frequency: 26 ➤ Percentage: 17.33 % <p>Source</p> <ul style="list-style-type: none"> ➤ Peer group :85(56.6%) ➤ Online content:90(60%) ➤ Text books and other printed materials:80(53.3%) ➤ Mother and relatives :98(65.3%) ➤ Heath care programmes :55(36.6 %) <p>i. Irritability: 110(73.3%)</p> <p>ii. cramp: 106(70.6%)</p> <p>iii. lower back pain: 70(46.6%)</p> <p>iv. emotional problems:80 (53.3%)</p> <p>v. anxiety: 65(43.3%)</p> <p>vi. mood swing:100(66.6%)</p> <p>vii. depression:35(23.3%)</p> <p>viii. tendency of skipping schools :40(26.6%)</p> <p>ix. non participation in sports and other recreational activities: 75(50%)</p> <p>x. fatigue :55(36.6 %)</p> <p>xi. stress:60(40%)</p> <p>xii. Hormonal imbalance:38(25.3 %)</p> <p>xiii. cravings:70(46.6 %)</p> <p>xiv. loss of appetite:31(20.6%)</p> <p>xv. acne :49(32.6%)</p> <p>xvi. stomach problem: 60(40%)</p> <p>xvii. bloating:25(16.6%)</p>	
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Social changes

At the onset of menstrual cycle in the adolescent girls, several social changes as well as changes in the mental perceptions are seen. Effects of social stigma and taboos are also very evident on the menstrual girls.

Result

There are many psychosocial problems exists in the society. The study finds several aspects of different social changes on the adolescent girls.

Analysis and interpretation of the social changes of the adolescents girls during menarche

A. Psycho-social challenges

Emotional changes like feeling of guilt, concern, anxiousness, shock, frustration are very common among the adolescent girls. Beside this the very prominent problem of having separate girls toilet specially in the schools is a cause of concern particularly in rural India. (Table 1)

Parameters	Frequency	Percentage
Guilt	72	48%
Inadequate sanitary products	52	34.6%
Lack of appropriate Girls toilet in school	60	40%
Stigma and taboos	45	30%
Restricted access	41	27.3%

72 (48%) girls see it as guilt as they think that the physical changes of the body may be alien things and society may put remarks on them and for that sense of shyness and nonparticipation nature arises among them. 52 (34.6%) girls feel depressed during the menstrual days as they are unable to collect necessary sanitary napkins or pads due to economic constraints. 60 (40%) girls found it difficult during periods because of lack of girls toilets in school which restrict them to change pads in needs. 45 (30%) girls face stigma and taboos from their houses and neighbourhood that create negative impact on their minds. 41 (27.3%) girls have limited access during this time as they are restricted from entering temples, kitchen etc. Multiple responses were received by the girls so the data of sources of information have overlapped.

B. Social barriers: Taboos and Stigmas

There are still many taboos and stigmas in Indian society as adolescent girls face many social barriers during their menstrual days in their families and neighbourhoods. In this study it is witnessed that there are several challenges faced by the adolescent girls at their menstruation. (Table 2)

Parameters	Frequency	Percentage
Prohibition of worshipping and restriction from visiting holy temples	32	21.5%
restricted or no allowance to the kitchen	46	30.6%
Restriction from welcoming guest	26	17.33 %
Restriction from wearing new clothes	35	23.33%
Dietary restriction		
▪ Restriction on pickles	18	12%
▪ Restriction on sour foods	15	10%
▪ Restriction on sweet items	10	6.66%
▪ Restriction on hot food items	8	5.3%
▪ Restriction on cold food items	5	3.3%
Restriction on bath		
▪ Daily	29	19.33%
▪ Alternate days	9	6%
▪ Once in 2-3days	3	2%
▪ Once in a week	2	1.3%
beginning of disease	15	10%
curse	5	3.33%

Out of 150 girls 32 (21.5%) girls face restriction of going to the temples and worshipping during menstrual days by their families. 46(30.6%) girls reported they have no access to the kitchen during their periods. 26 (17.33%) girls have restriction to welcome guests. 35 (23.33%) girls have restriction from wearing new clothes during their periods. 56(37.3%) girls experiences dietary restriction during periods, 43 (28.6%) girls face restriction about taking regular bath at this time. 15(10%) girls reported that their family members, relatives and neighbourhood accuse them for having periods as they think it is the beginning of new disease and 5(3.33%) of them says family members recognise it as a curse.

C. Mental perception

Differences in the mentality among the girls are seen at the onset of menstrual cycle. The girls have different perceptions about their first menarche. (Table 3)

Parameters	Frequency	Percentage
Not prepared	69	46%
Normal physiological event	81	54%
Cleansing of body impurities	79	53%
Risky events	27	18%
Dirty	15	10%

69 (46%) girls are not prepared at their first menarche, 81 (54%) girls consider it as normal physiological event, 79 (53%) girls recognised it as the cleansing of their body impurities, 27 (18%) girls find it a risky or life threatening and 15 (10%) girls find it dirty. Multiple responses

were received by the girls so the data of sources of information have overlapped.

Interrelationship between physiological and sociological challenges experienced by adolescent girls during menarche

Menstrual cycle is the most important event of a girl's life. The journey of a girl to a woman is established by this event. Menstrual cycle begins at an age of 12 -13 on an average. The rupture of the unfertilized ovum along with the uterine wall in the form of blood during the periods is known as menstrual bleeding. There are 4 stages of menstrual cycle: Menstruation (period), Follicular phase (pre ovulation), Ovulation and Luteal phase (post ovulation). Several changes happen at different stages of menstrual cycle. The onset of menstrual cycle is known as Menarche. Adolescent girls face a lot of challenges during their first menarche. There are several physiological, psychological, social challenges that the girls had to deal with at this time. For example:

A. Mood swings

Mood swings is an inevitable event at menarche, girls have frequent mood swings while they are at their periods.

Reason

Fluctuation of oestrogen and progesterone hormone cause the disbalance of neurotransmitters like Serotonin that regulate the mood.

Effects of mood swings on physiological and social aspects

Mood swings can be associated with other Premenstrual syndrome (PMS) or Premenstrual dysphoric disorder (PMDD) in severe case. The effect of this kind of mood swings causes physical difficulties like irritability, depression, fatigue, bloating, lack of appetite as well as harm the social life like detach from her social circle, cutting down communication from others, became irritated or sometimes annoying, wanting to skip schools and tuitions, become emotional and so on. These activities makes it difficult for the girls to adjust herself within the society and it also troubles others.

B. Anxiety and stress:

Anxiety and stress are synonyms of the same condition during menarche. Both the conditions happen inseparably.

Reason

Mood swing, menstrual bleeding at different pace, probability of sudden outcomes of menstrual bleeding, period cramps are the reason of anxiety and stress.

Effects of stress and anxiety on physiological and social aspects

Both anxiety and stress cause physiological impact like serious headache, fatigue, PMS also can initiate due to stress and anxiety. Emotional Problems, lack of concentration and distraction from studies happen due to Stress and anxiety at menarche that creates vulnerability in girls and leads to thoughts of social unacceptability.

C. Depression

Depression at menarche is very common. Adolescents girls feel frustrated and don't like anything at times. Everything seems to her unacceptable.

Reason

The main reason for depression at this stage is difficulties in concentration, period cramps, stress, anxiety etc. Depression can cause due to severe PMDD that might be associated with irregularities of hypothalamic-pituitary-adrenal (HPA) axis.

Effects of depression on physiological and social aspects

Depression can cause many behavioral problems like sleep disorder, forgetfulness, irritation, intense mood swings, change in appetite, bloating etc. Depression may lead to psychological problems, like anxiety, emptiness, helplessness that affects the social circle of the girl.

D. Dysmenorrhea

Period cramp or Dysmenorrhea is a common feature during menarche. All the Adolescent girls at their menstruation face dysmenorrhea but the degree of pain depends.

Reason

Dysmenorrhea happens due to several physiological problems as: The disbalance in the level of prostaglandins (PGs) cause the uterus to reform its shape that creates severe pain during menarche. endometriosis, uterine fibroids, or pelvic inflammation also cause dysmenorrhea.

Effects of dysmenorrhea on physiological and social aspects

Moderate to acute or severe cramps or pain happen during menarche. Fatigue, headache, stomach problem, diarrhea, nausea, vomiting, bloating and many other physiological problems arise due to dysmenorrhea along with social problems like inefficiency of adaptability, tendency of skipping schools, sleep disorder, lifestyle harassment.

E. Bloating

Production of gas during periods is known as Bloating. In this condition girls feel pressure and tightness in belly region.

Reason

Bloating generally happens due to the effects of oestrogen and progesterone disbalance that cause water and salt retention leading to extreme gas formation and uneasiness. Prostaglandins (PGs) can also cause bloating.

Effects of bloating on physiological and social aspects

Bloating cause pain and discomfort in belly region. Constipation can also occur due to this. Profound gas formation hampers digestion and daily routine. Feeling of fullness, tightness also happens. Acute gas formation during periods hampers social life also as, life style becomes affected due to this, lack of participation in social gatherings are avoided by the girls due to uncomfortable situations.

F. Menstrual bleeding

Menstrual bleeding at periods is the main features of adolescents girls. The first bleeding starts at the menarche. Menstrual bleeding can be of different types: i. Hypo menorrhagia (very low amount of bleeding, <30ml during menstrual cycle) ii. Hyper menorrhagia (excessive bleeding, >90ml during menstrual cycle) iii. Phantom or Ghost period (all the symptoms of normal periods are there except actual bleeding)

Reason

Menstrual bleeding happens due to unfertilized ovum along with the rupture of uterine wall during menstrual cycle.

Effects of menstrual bleeding on physiological and social aspects

Menstrual bleeding causes several physical difficulties like severe abdominal pain, cramps, tiredness. Hyper menorrhagia or severe blood loss cause anemia, tiredness, respiratory problems also. For Menstrual bleeding adolescent girls have to face several social challenges like lack of concentration in studies, tendency of skipping school, sickness and tiredness that cause them to lag behind. Apart from these, there are many sociological challenges that are faced by the adolescent girls at their menarche. Some of the girls that are not aware of their first periods and face incorporation both from the families as well as from the surroundings. They are not informed by their mother priorly about their first periods as mother and family members think it as a nondiscussniable matter and a very private one that the girls should deal herself. Also, the idealistic society is far behind as the patriarchal mindset still prevalent in the society that includes factors like social prohibition. Taboos and stigmas are a serious challenge for these girls, along with false myths, stereotyped beliefs, restricted mindset that do nothing but harm the girls by lowering their self esteem, confidence, making them feel isolated, invoking sense of guilts and frustration and many such problems.

Conclusion

Menarche is the evidence of womanhood in girls. Menarche brings in a lot of physiological, sociological and psychological challenges that the girl must get away with. There is always a fight with herself and the surroundings of the adolescent girls at their menarche, the struggle start with period cramps and end in prohibition of entering temples and a lot of absurd taboos. These issues need to be addressed. The young adolescent girls find it very difficult to cope up with menarche. They even face a lot of criticism that creates sense of guilt, frustration, anxiety. Long term effects of these physiological problems can mentally disrupt the young minds, make her unconfident, inconsistent in studies. Physical difficulties also intricately associated with the psychological aspects. Severe menstrual cramp, many premenstrual syndrome (PMS), sometimes Premenstrual dysphoric disorder (PMDD) creates huge problem for the girl. These various problems need to be sorted out and the world surrounding the girl should help her to get through this rather not making her isolated.

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