

Description of Menstrual Personal Hygiene Behavior Among Adolescent Girls

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ABSTRACT

Adolescent girls are vulnerable to reproductive health problems, one of which is reproductive tract infection (RTI). Data from the Surakarta Health Office in 2024 showed that Jebres District had the highest number of RTI cases (15 cases) among adolescents aged 11–15 years. Reproductive tract infections can be prevented by implementing proper personal hygiene practices during menstruation. A preliminary study at SMP Negeri 8 Surakarta City showed that 7 out of 10 female students had poor menstrual personal hygiene behavior. Objective: To identify the characteristics of menarcheal age and describe menstrual personal hygiene behavior among adolescent girls at SMP Negeri 8 Surakarta City. Methods: This was a quantitative descriptive study using purposive sampling. The population consisted of 372 female students, with a sample of 79 respondents. Results: The majority of respondents experienced menarche at 11 years of age, comprising 34 respondents (43.0%). The majority of adolescent girls had good menstrual personal hygiene behavior, comprising 77 respondents (97.5%). Conclusion: Most adolescent girls at SMP Negeri 8 Surakarta City demonstrated good menstrual personal hygiene behavior.

Keywords: Menstruation; Personal Hygiene; Adolescent Girls



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INTRODUCTION

Adolescence is a very important period in human development. The World Health Organization (WHO) defines adolescents as people aged 10–19 years. Regulation of the Minister of Health of the Republic of Indonesia No. 25 of 2014 states that adolescents are people aged 10–18 years (1). During this stage, adolescents have a high level of curiosity, enjoy adventure and challenges, and tend to take risks without first giving them thorough consideration. Changes experienced by adolescent girls during this period include the onset of menarche (the first menstruation), breast development, pubic hair growth, and widening of the pelvis (2).

Menarche (the first menstruation) occurs in girls generally between 12 and 16 years of age. A normal menstrual cycle usually ranges from 27 to 30 days, with an average of approximately 28 days. This means that menstruation occurs every 28 days after menarche until menstruation permanently stops or menopause occurs. Menstruation generally lasts between 2 and 7 days (3). Common problems during menstruation include reproductive tract infections (RTIs), irritation or rashes caused by unclean sanitary pads, abnormal vaginal

discharge, and unpleasant odor. In addition, many women experience abdominal cramps, fatigue, and digestive disturbances due to hormonal changes. Psychological changes, such as anxiety or embarrassment, may also affect mental well-being (4).

According to WHO data, the highest incidence of reproductive tract infections (RTIs) worldwide occurs among adolescents (35%–42%) and young adults (27%–33%). The prevalence of infections such as candidiasis ranges from 25% to 50%, bacterial vaginosis from 20% to 40%, and trichomoniasis from 5% to 15%. Research on women's reproductive health indicates that approximately 75% of women worldwide have experienced vaginal discharge at least once, and 45% of them have experienced it more than twice (5). Data on RTIs in Indonesia reach 90–100 cases per 100,000 population annually.

Research on personal hygiene showed that the majority of adolescents had poor personal hygiene behavior. The study involved 41 respondents, of whom 12 (29.3%) demonstrated good behavior, while 29 (70.7%) demonstrated poor behavior. The 12 respondents with good behavior changed sanitary pads regularly, within less than 4 hours, washed their hands before and after changing pads, cleaned the genital area from front to back, and maintained proper genital hygiene. Meanwhile, the 29 respondents with poor behavior rarely changed their underwear appropriately, did not wash their hands before and after changing sanitary pads, cleaned the genitals from back to front, and did not know how to properly care for their genital organs during menstruation (6).

A preliminary study conducted at SMP Negeri 8 Surakarta City among 10 adolescent girls who were interviewed found that 7 students changed their sanitary pads only when they were full, cleaned their genitals from back to front, and wore tight underwear during menstruation. Only 3 students changed their sanitary pads in less than 6 hours, cleaned their genitals from front to back, and did not wear tight underwear during menstruation.

Based on the background above, the researcher was interested in conducting a study entitled “Description of Menstrual Personal Hygiene Behavior among Adolescent Girls at SMP Negeri 8 Surakarta City.” This interest arose because information regarding adolescents' awareness of maintaining personal hygiene during menstruation remains limited. The objective of this study was to describe menstrual personal hygiene behavior among adolescent girls at SMP Negeri 8 Surakarta City.

METHODS

The research design used in this study was quantitative descriptive. The study examined menstrual personal hygiene behavior among adolescent girls at SMP Negeri 8 Surakarta City. The population consisted of all female students in grades 7–9 at SMP Negeri 8 Surakarta City, totaling 372 students. A sample is a portion taken from the overall population. The sample in this study consisted of female students at SMP Negeri 8 Surakarta City. The number of respondents in this study was 79. The sampling technique used was purposive sampling, in which the targeted sample group had specified criteria. The sample size was determined using the Slovin formula.

$$\text{The formula was: } n = \frac{N}{1+N(d)^2}$$

Description:

N: Population size d: Significance level (0.1)

n: Sample size

Primary data are data collected directly by the researcher from data sources using instruments such as questionnaires, interviews, observations, and documentation. Primary data were obtained from interviews and questionnaires administered to respondents at SMP Negeri 8 Surakarta City. Secondary data are data obtained indirectly or from other sources, such as books and journals containing research on menstrual personal hygiene behavior. Secondary data were obtained from the Surakarta City Health Office and the Ministry of Education and Culture (Kemendikbud), consisting of RTI data and student data.

The data collection technique used to obtain primary data was interviewing respondents and administering questionnaires to female students at SMP Negeri 8 Surakarta City. The data were analyzed using univariate analysis. Univariate analysis aims to explain or describe the characteristics of each research variable. In this study, frequency distributions were generated for the characteristics of adolescent girls based on menarcheal age and menstrual personal hygiene behavior among adolescent girls at SMP Negeri 8 Surakarta City. The research ethics applied in this study included informed consent, anonymity, confidentiality, veracity, justice, and beneficence.

RESULTS

Table 1. Frequency Distribution of Menarcheal Age among Female Students at SMP Negeri 8 Surakarta City

No.	Category	Frequency (f)	Percentage (%)
1.	9 years	7	8.9
2.	10 years	4	5.1
3.	11 years	34	43.0
4.	12 years	25	31.6
5.	13 years	9	11.4
	Total	79	100.00

Source: Primary Data, 2025

Table 1 shows that the majority of respondents experienced menarche at 11 years of age, totaling 34 respondents (43.0%). Thus, the largest proportion of respondents had their first menstruation at 11 years of age, totaling 34 respondents (43.0%).

Table 2. Frequency Distribution of Menstrual Personal Hygiene Behavior among Adolescent Girls at SMP Negeri 8 Surakarta City

No.	Category	Frequency (f)	Percentage (%)
1.	Good	77	97.5
2.	Poor	2	2.5
	Total	79	100.00

Source: Primary Data, 2025

Table 2 shows that most adolescent girls at SMP Negeri 8 Surakarta City had good menstrual personal hygiene behavior, totaling 77 respondents (97.5%).

DISCUSSION

Respondent Characteristics Based on Menarcheal Age among Female Students at SMP Negeri 8 Surakarta City

The results showed that the frequency distribution of menarcheal age among female students at SMP Negeri 8 Surakarta City was highest at 11 years of age, with 34 respondents (43.0%). This finding is consistent with research conducted by Kholifah (2024), which showed that the majority of respondents experienced menarche at 11 years of age, totaling 35 respondents (43.75%).

Menarche (the first menstruation) is the culmination of a series of primary and secondary changes indicating reproductive maturity, experienced by adolescent girls as they enter early adulthood. The age at menarche varies among adolescent girls. Menarche generally occurs between 12 and 15 years of age during puberty. Menarche occurring before 12 years of age is referred to as early menarche, whereas menarche between 12 and 15 years of age is considered normal (7). The results of this study indicate that the majority of respondents experienced menarche at 11 years of age, which can be categorized as early menarche.

Several factors may cause early menarche, including genetics, nutritional status, lifestyle, dietary intake, physical activity, socioeconomic status, and exposure to pornographic media. Lifestyle and nutritional status are external factors that influence the occurrence of early menarche. Dietary patterns reflect an individual's lifestyle and how food intake is fulfilled. Convenient foods such as instant noodles contain high levels of calories, fat, sugar, and sodium, while being low in fiber, vitamins, and minerals. This may affect adolescent nutritional status, in which overweight and obesity can influence the timing of puberty in girls and accelerate menarche (8). Interviews conducted by the researcher with respondents showed that the majority had unhealthy lifestyles, such as consuming junk food and engaging in insufficient physical activity.

Several factors influence early menarche, including health, body weight, and nutritional status (9). Early menarche can have significant effects on adolescent reproductive and psychological health. Adolescents experiencing early menarche are more vulnerable to reproductive health problems such as endometriosis and menstrual disorders, including irregular cycles, severe menstrual pain, and excessive bleeding. In addition to physical effects, early menarche can affect mental health, causing stress and anxiety because adolescents are often not emotionally prepared for these physical changes. The effects of early menarche are not limited to adolescence but may continue into adulthood, increasing the risk of cardiovascular disease, type 2 diabetes, and breast cancer (10).

In comparison with these findings, the present study again demonstrates a decline in the age of menarche toward younger ages among girls, with the earliest age being 10 years and the most common age being 11 years. In the researcher's opinion, menarche among adolescent girls may be influenced by several factors that cause variation in menarcheal age. This view is supported by research by Rois et al. (11) and Alam et al. (12), which states that menarche may be influenced by nutritional status, genetics, physical activity, and exposure to pornography. Menarcheal age may vary among individuals and according to residential area (Laili et al., 2022).

Most adolescent girls at SMP Negeri 8 Surakarta City in this study experienced early menarche (at 11 years of age), which was influenced by unhealthy lifestyles such as consuming junk food and insufficient physical activity. These two factors increase the risk of

obesity, which in turn may accelerate the age of first menstruation. Early menarche may have long-term health consequences, increasing the risk of reproductive problems, psychological disorders, and chronic diseases in adulthood. Overall, these findings emphasize that external factors, particularly lifestyle, play a significant role in determining menarcheal age.

Description of Menstrual Personal Hygiene Behavior among Adolescent Girls at SMP Negeri 8 Surakarta City

The results showed that the frequency distribution of menstrual personal hygiene behavior among adolescent girls at SMP Negeri 8 Surakarta City was predominantly good, with 77 respondents (97.5%) demonstrating good behavior. This is consistent with research conducted by Daulay et al. (13) on personal hygiene behavior among adolescent girls, which showed that the majority of respondents had good personal hygiene behavior during menstruation, totaling 35 respondents (58.3%).

Menstrual personal hygiene refers to activities undertaken to maintain health and cleanliness of the genital organs during menstruation, with the aims of improving health status, correcting inadequate personal hygiene practices, preventing health problems, increasing self-confidence, and maintaining cleanliness and comfort (14). Menstrual personal hygiene includes several indicators, including maintaining genital cleanliness by washing hands with clean water, wearing clothing that absorbs sweat, changing underwear at least twice a day to control excessive vaginal moisture, frequently changing sanitary pads when blood clots are present and after urination and defecation, and not using a sanitary pad for more than 6 hours (15).

During menstruation, many factors influence personal hygiene. One of these factors is knowledge about the vagina. Proper genital cleansing practices include routinely cleaning sweat and other secretions from around the genital area using clean water or, when appropriate, warm water and soap, particularly after defecation or urination. Washing from front (vagina) to back (anus) is the correct method of cleaning the female genital area. After cleaning, the area should be dried using a clean, dry towel (16). Research by Laswini and Nancy (17) states that the higher a person's level of knowledge regarding personal hygiene during menstruation, the better their personal hygiene practices during menstruation, and vice versa. Insufficient knowledge may be caused by inadequate access to information, including information obtained indirectly through electronic media and the internet. This is consistent with interviews conducted by the researcher, which showed that most respondents had knowledge about personal hygiene. Most respondents reported obtaining information about personal hygiene from health education, their surrounding environment, and electronic media such as TikTok, Instagram, and other social media.

Adolescents' experiences with menstruation can influence their menstrual hygiene behavior, which was categorized as good in this study. The characteristics of the respondents showed that most experienced menarche at 11 years of age. Experience and habits influence menstrual hygiene behavior among adolescent girls (18). In addition, parents, particularly mothers, have the greatest influence on menstrual hygiene behavior because daughters learn from and follow established habits within the family. This is consistent with interviews conducted by the researcher, in which most respondents stated that they learned habits for maintaining genital hygiene during menstruation from their mothers.

The good menstrual personal hygiene behavior observed among the majority of respondents was influenced by several factors, namely knowledge, experience, and family

support. Adequate knowledge obtained from various information sources, particularly electronic media, was positively associated with the hygiene practices applied. In addition, adolescents' experiences in dealing with menstruation and the habits taught and supported by their families also contributed to the formation of positive hygiene behavior.

CONCLUSION

Based on the description above, the following conclusions can be drawn: The majority of female students at SMP Negeri 8 Surakarta City experienced menarche at 11 years of age, which is categorized as early menarche. Most adolescent girls at SMP Negeri 8 Surakarta City demonstrated good menstrual personal hygiene behavior.

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REFERENCES

1. Fadilasani. Pengetahuan Tentang Menstruasi Membentuk Sikap Positif Personal Hygiene Remaja Putri. *WOMB Midwifery Journal* 2(1):16–22. 2023. doi:10.54832/Wombmidj.V2i1.119
2. Hako S, Kadir L, Ahmad ZF. Perilaku Personal Hygiene Remaja Putri Saat Menstruasi Di SMKN 1 Bulango Selatan Kabupaten Bone Bolango Tahun 2022. *Madu: Jurnal Kesehatan* 11(1):34. 2022. doi:10.31314/Mjk.11.1.34-45
3. Laila. Hubungan Pengetahuan Dan Sikap Dengan Perilaku Personal Hygiene Saat Menstruasi Pada Remaja Putri Di SMA N 4 Batanghari. *Nucl. Phys.* 13(1):104–16. 2023.
4. Efni N, Fatmawati TY. Edukasi Manajemen Kesehatan Remaja Saat Menstruasi Di SMP N 5 Kota Jambi. *Jurnal Abdimas Kesehatan (JAK)* 3(2):215. 2021. doi:10.36565/Jak.V3i2.236
5. Laswini IW, Nancy A. Pengetahuan, Sikap, Dan Sumber Informasi Dengan Perilaku Personal Hygiene Saat Menstruasi Pada Remaja Putri. *SIMFISIS Jurnal Kebidanan Indonesia* 2(1):228–36. 2022. doi:10.53801/Sjki.V2i1.55
6. Kholifah M. Faktor-Faktor Yang Berhubungan Dengan Kejadian Menarche Dini Pada Remaja Putri Di SMP Negeri 1 Winong. *Nutrition Research and Development Journal* 4(01):32–49. 2024.
7. Karisma DAC, Rusmariana A. Hubungan Pola Asuh Orang Tua Dengan Kemandirian Personal Hygiene Anak Usia Prasekolah Di TK Islam Futuhiyyah Doro. *Seminar Nasional Penelitian Dan Pengabdian Kepada Masyarakat* 5:196–203. 2023.
8. Lubis AM. Faktor-Faktor Yang Memengaruhi Usia Menarche Di Negara Berkembang Dan Negara Maju. Padang: Universitas Andalas. 2023.
9. Ambali DDW, Allo LB, Roeng D. Hubungan Pengetahuan Dengan Kesiapan Dalam Menghadapi Menstruasi Pertama Pada Siswa Kelas V Dan VI Di SDN 1 Denfina Kab. Toraja Utara Tahun 2021. *Jurnal Ilmiah Kesehatan Fromotif*. 2021.
10. Hae Sang L. Why Should We Be Concerned About Early Menarche? *Clinical and Experimental Pediatrics* 64(1):26–27. 2021.
11. Rois A, et al. Factors Related to Incidence of Menarche Praecox [Faktor Yang Berhubungan Dengan Kejadian Menarche Prekoks]. *Proceeding of Community Development* 2:200. 2019.

12. Alam S, et al. Hubungan Status Gizi Dengan Usia Menarche Pada Remaja Putri. *Jurnal Ilmu Kesehatan Masyarakat* 10(03):200–207. 2021.
13. Daulay M, Sari S, Rahmadhani M, Sari SK. Hubungan Pengetahuan Menstruasi Dengan Perilaku Personal Hygiene Saat Menstruasi Remaja Putri Smk Multikarya Medan. *J Kedokt STM (Sains Dan Teknol Med)* 5(2):152–56. 2022.
14. Alfi Natasya R, Hasanah O, Misrawati. Gambaran Perilaku Personal Hygiene Pada Remaja Saat Menstruasi Di Masa New Normal Di Kota Pekabaru. *Jurnal Kesehatan Ilmiah Indonesia (Indonesian Health Scientific Journal)* 7(2):61–72. 2022. doi:10.51933/Health.V7i2.824.
15. Anisah. Sistem Informasi Kuesioner Materi Pembelajaran SMP Swasta Generasi Bangsa Martubung Menggunakan Skala Likert. *Jurnal JUREKSI (Jurnal Rekayasa Sistem)* 2(2):604–16. 2024.
16. Rahmatika. Hubungan Pengetahuan Dengan Perilaku Personal Hygiene Saat Menstruasi Mahasiswi STIKES Muhammadiyah Cirebon Tahun 2022. *Jurnal Dunia Kesmas* 11(4):20–27. 2022.
17. Laili U, et al. Pendampingan Orang Tua Terhadap Tingkat Kecemasan Remaja Menghadapi Menarche. 8:0–3. 2022.
18. Rezkiani. Tingkat Pengetahuan Terhadap Pubertas Pada Perubahan Fisik Remaja Putri. *JUARA: Jurnal Keolahragaan* 2(2):17–23. 2022.