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Women personal care products and rural market penetration: Rural health marketing implications

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Abstract---The market penetration of female-hygiene-products Indian rural women market is one of the lowest in the world. The National Family Health Survey 2015-16 report shows that the usage of feminine hygiene products among Indian women is 48.5% in rural India and 77.5% in urban India. In their 2016 survey conducted on adolescent girls in the rural parts of Bihar and Jharkhand, Nielson found that though 46% of the respondents had heard about feminine hygiene products, only 28% were using them regularly. Evidence suggests that there is a lack of resources, education, and awareness about personal hygiene in rural areas of the country, as well as personal inhibitions and social taboos associated with the purchase and use of hygiene products on the market. Hence, the need for the study was felt to understand the consumer behaviour of rural women towards feminine hygiene products. The independent variables measuring the behaviour are consumer awareness, attitude, and social influence, and the dependent variable is purchase intentions. The objective of the study is to understand the impact of consumers' awareness, attitudes, and social influence on the intentions to purchase hygiene products among women in rural areas, with reference to the villages in and around Coimbatore district. The data

was collected from 170 rural women residing in the study area. The results shed light on factors influencing rural women's purchase decisions relating to feminine hygiene products.

Keywords---consumer behavior, purchase intentions, rural women, feminine hygiene products.

Introduction

According to World Bank (2016), the female population in India has been reported at about 48 % (586.47 million) of the total populace. Of the 121 crore Indians, 83.3 crore reside in rural areas, of which about 48 % are women. There are over 355 million menstruating adult female and young woman in India. National Family Health Survey (NFHS) 2015-16 report shows that the usage of feminine hygiene products among Indian women is 48.5% in rural India and 77.5% in urban India. Various studies report that India has one of the lowest usages of feminine hygiene products in the world. Market penetration of feminine hygiene products among Indian women is extremely low-down at 10 – 11% of the overall market, whereas in Europe and the United States it is above average 73 – 92 %. Though understanding on menstrual hygiene in the city regions of India is increasing due to publicity campaigns, the awareness on menstrual cleanliness and use of hygiene products is practically lacking in rural provinces. Evidences show that in rural parts of the country there is lack of resources, education and awareness about personal hygiene; and personal inhibitions and social taboo associated with the purchase and usage of hygiene products available in the market. Hence the need for the study was felt to understand the consumer behaviour of rural women towards the feminine hygiene products.

Review of literature

There is a huge gap with respect to awareness, acceptance, and usage of feminine hygiene products in rural India (Goyal, 2016). Tarkiainen and Sundqvist (2005) in their study established that there is a considerable connection as amongst the attitude towards purchasing hygienic products and the intent to buy. Adequate awareness and positive perception associated with feminine hygiene products is required to induce women to use them (Chakravarty, 2016). Studies about feminine hygiene practice and the choice of products; socio-economic associations with the purchase behaviour etc. have been conducted in many countries. However, there is little literature on consumer behaviour towards feminine hygiene products, taking into account consumer perception variables such as attitude and awareness, coupled with social influence and purchase intentions-with respect to rural women in the present study area.

Consumer behaviour describes buying decision as the way of consumer make use of procured goods/services (McFatter, 2005). As it is described by Huang et al. (2004), 'attitude is a learned predisposition to respond to a condition in a favorable or unfavorable way'. Attitude is defined as a psychological path of assessing a particular entity with approval or disapproval (Eagly & Chaiken, 1993). Attitude is established across experiences may shift when new experiences

are acquired (Ajzen, 2001; Chen, 2007). The factors of attitude are frequently applied as a forecaster of customer's intents and behavior. An individual's attitudes towards products are influenced strongly by groups that they value and with which they associate.

Turner (1991) described societal influence as "the processes whereby people directly or indirectly influence the thoughts, feelings and actions of others". As it is stated by Social-Information-Processing-Theory (Salancik & Pfeffer 1978), social data comprises of remarks and comments done by individuals whose opinions a person believes appropriate. According to Theory of Reasoned Action, this is referred to as subjective norms- influences that impact purchase intentions (Ajzen & Fishbein, 1980). Customers' awareness and understanding enact substantial influence on a variety of types of active customers' behaviours (McEachern & Warnaby 2008).

In this context, Chartrand (2005) reports that customer's awareness (either consciously or unconsciously) go before the self-control, alteration, removal and alter in individual behaviours and judgments. Accordingly, actual behaviour of consumers can only be occurred over awareness. Intention is recognized as the motivation for people to engage in specific behaviours (Armitage and Conner, 2001). Dodds, Monroe, and Grewal (1991) define buying intent as "when a buyer is attempting to purchase a few products or services". As per Theory of Planned Behavior, cognition and affect leads to conation- a person's personal probability of executing some specific behaviour (Fishbein & Ajzen, 1975). According to Theory of Reasoned Action, attitude associates certainly with behavioural intent that is ultimately the precursor for the real behavior.

Theoretical frame

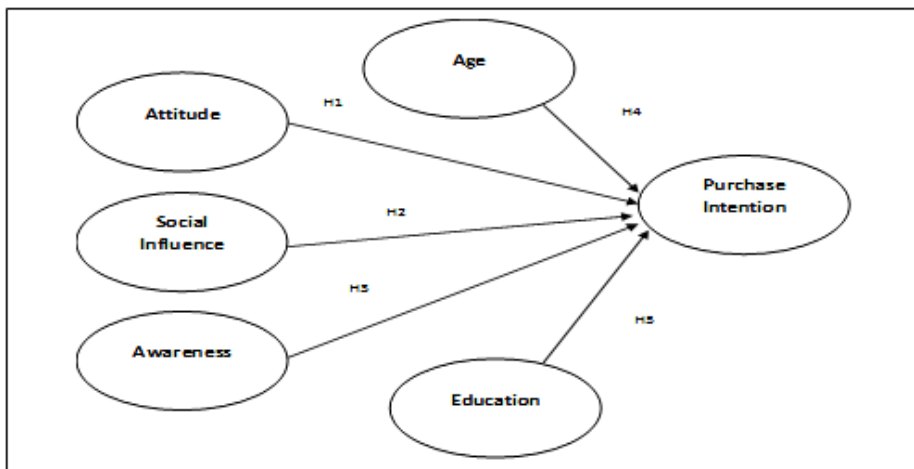


Figure 1. Theoretical frame

Research question

- Does any significant relationship exist between attitude, social influence, and awareness on intention to purchase hygiene products among women in rural areas?
- Is there a significant relationship between sociodemographic variables, age, and education and women's intention to purchase hygiene products in rural areas?

Research objectives & hypotheses

The main purpose of the research is to understand the influence of consumer attitude, awareness, and social influence on purchase intentions for feminine hygiene products. The constructs of consumer attitude, awareness, and social influence are treated as independent variables, and purchase intention is taken as the dependent variable. Accordingly, the following objectives have been framed for the purpose of the research:

- To analyze the association between a consumer's attitude and the intention to purchase hygiene products among women in rural areas
- To examine the relationship between social influence on a consumer's intention to purchase hygiene products among women in rural areas
- To investigate the relationship between consumer awareness and the intention to purchase hygiene products among rural women.
- To measure the association between age and the intention to purchase hygiene products,
- To measure the association between education and the intention to purchase hygiene products,

The researcher intends to test a series of hypotheses to assess the influence of the independent variables on the dependent variable as below:

Hypothesis based literature

Attitude and intention to purchase hygiene products

The Theory of Planned Behaviour (TPB) indicates that an individual's intention to express a particular behaviour (Ajzen, 1991). The higher the intention, the higher the tendency to behave. According to the TPB, attitude functions as an important contributing factor in determining behavioural intentions. The more favorable attitude a person has towards the behaviour, the more likely it will be in his/her intent to carry out the behaviour. Yagnik (2012), in this context, reports that 88% of women do not use menstrual hygiene products. As an alternative, they use and reuse cloth, sand, ash, husks, tree bark, polythene, or nothing at all. In a similar way, some other studies also reported that (Mahon & Fernandez's 2010) just about 7% of women use sanitary napkins, based on a random sample of 2579 urban and rural women. The rest of the sample used cloth, cotton wool, and ash. This report shows that some women have a favorable attitude towards hygiene, and some do not. Based on the theory of reasoned action, it is assumed that the greater the woman's intention to purchase the hygiene products, the resultant

manifestation of her favorable or unfavorable attitude will be. Based on such deliberation, it is hypothesized that:

H1: Consumer attitude will have a positive effect on the intention to purchase hygiene products among women in rural areas.

Social influence and hygiene products' purchase intention

The reference group is acting as a social pressure group, and its relevance in influencing consumer decision making is relevant to understanding their attitude towards purchase intention (Xihao & Yang, 2006; Penz & Hogg, 2011). Women consumers are usually exposed to all the suggestions and persuasions from their families, peer groups, and relatives. Family, peer groups, and relatives surrounded her, influencing her perception towards hygiene as well as the use and purchase of hygiene products. When studied specifically for women, a literature review suggests that the influence of reference group varies (Singh & Sarvanan, 2013). In the context of purchase intention, which depends on an individual's understanding of important beliefs of the individual with whom she agrees (Jim & Kang, 2011), This indicates that women listen to opinions coming from knowledgeable, experienced, and reliable sources. Based on such discussion, it is assumed that the reference group acts as a social pressure group on a woman's intention to purchase hygiene products. Based on such deliberation, it is hypothesized that:

H2: Social influence will have a positive effect on the intention to purchase hygiene products among women in rural areas.

Consumer awareness and hygiene products' purchase intention

Several research reports indicate that culture and the stereotypes existing in rural areas are preventing any discussion on menstrual topics that are still taboo in the community, particularly in South Asia. Accordingly, girls and women can have little awareness about their health and hygiene during menstrual periods, and there is anxiety about properly handling their menstrual health. As evidenced, many women in South Asia use clothes that are cleaned and reused to absorb menstrual flows (Mahon & Fernandes, 2010). Recently, the government of India has planned to promote sanitary napkins for teenage girls in rural zones (Garg et al., 2012). To encourage use, the Indian Tax Council announced a 12% tax reduction on sanitary napkins (Singh, 2018). Though such initiatives are well acknowledged, whether the women's community really has the interest in moving from traditional to modern hygienic ways is still lacking evidence. Awareness about health and hygiene and consciousness about these matters decides her intention to look at information as well as possible steps towards the purchase of hygiene products. This indicates that the degree of awareness a woman exhibits regarding her own health and hygiene is what compels her to engage in information seeking behaviour that will lead to her intention to purchase hygiene products. Based on such deliberation, it is hypothesised that:

H3: Consumer awareness will have a positive effect on the intention to purchase hygiene products among women in rural areas.

Age and hygiene products' purchase intention

The percentage of the world's teenagers' populace is growing more rapidly than that of other age groups. At present, 84% of the globe's teenagers live in the developing world (Singh et al., 2006). A review of the conventional literature emphasises the significance of users' age in the assessment of their behaviour (Harrison & Rainer, 1992; Hubona & Kennick, 1996). Studies on Indian teenage youngsters have shown a small percentage of girls only had information on menstruation before menarche, and among those who were aware, there was limited and inadequate information about menarche and related physical variations (Datta et al., 2012; Jogdand & Yerpude, 2011). This indicates the stressful stage of young girls in understanding and coping with menstruation and the search for sanitary pad options. Such facts about sanitary pad usage lead us to believe that the younger the woman, the more these aspects will be hidden, and due to shyness, the less likely they will be inclined to go shopping and purchase sanitary napkins in comparison to the matured woman. Based on such deliberation, it is hypothesised that:

H4: There is a significant relationship between the age of the respondents and their purchase intentions.

Education and hygiene products: purchase intention

An increasing volume of research literature has provided first-hand evidence concerning the advantages of education on health outcomes, where level of education acts as a proxy for awareness and knowledge pertaining to the area of study. It is reported in this context that compulsory schooling laws or the enablement of universal education have had a high impact on health outcomes, especially in hygiene aspects (Gune 2015; Keats, 2018; Lleras-Muney, 2005), in addition to the formation of schools or colleges (Currie & Moretti, 2003; Breierova & Duflo, 2004). Nonetheless, in comparison with urban areas, rural areas are not that exposed to modern learning and are still under the clutches of stereotypes and myths related to health and hygiene. It is argued in this context that more research is needed to explore the connection between education and the purchase intention of sanitary napkins among girls and women in rural areas. Based on such deliberation, it is hypothesised that:

H6: There is a significant association between the educational level of the respondents and their purchase intentions.

Methodology

Research Design

A descriptive study design is one in which the major objective is to measure a sample at one explicit point in time without making any conclusions or causal statements. This research is fact-finding research. One time, the researcher went to the field and collected the information based on the standardized questionnaire. Henceforth, the research observes a descriptive cross-sectional type of design under a quantitative approach.

Sampling

The women residing in the rural villages in and around Coimbatore district constitute the population for the study. This research used a purposive sampling technique to gather 384 valid survey questionnaires. Purposive sampling method was used to generate a sample that can be relatively assumed to be representative of the populace.

Measurements

Accordingly, consumer attitude was assessed using the 5-point scale taken from Shih and Fang (2004); purchase intentions were assessed using the 5-point scale developed by Van der Heijden et al. (2003); consumer awareness was assessed applying the 7-point scale developed by Rousseau and Venter (1995); and social influence was assessed applying the 7-point scale developed by Bearden, Netemeyer, and Teel (1989).

Reliability

Table 1
Statistics on Reliability

Constructs	Cronbach's Alpha	N of Items
Consumer Attitude	.871	3
Social Influence	.919	11
Consumer Awareness	.937	22
Purchase intention	.759	4

The reliability of scales was calculated using Cronbach's alpha. (Nunnally 1978, p. 245) is regularly connected with the assertion that instruments employed in fundamental research should have a reliability of .70 or better. The results showed that there is very good reliability for the scales being employed as the Cronbach's Alpha values are above the threshold level. All the instruments satisfied the stipulated reliability value to be used as researcher instruments for this study.

Analysis and Results

Results

Demographic Data

The demographic profiles of the respondents have been examined first. The reviews of reactions indicate that the majority (58.8 %) are married women. The majority of the respondents (25.9 %) possess a Masters' degree, followed by 24.7 % possessing a Bachelor's degree. However, 20% of the respondents were illiterate. 41.2% of respondents are between the ages of 20 and 30 years old, while 31.8% are between the ages of 31 and 40.

Testing Hypotheses

To examine the suppositions outlined for the research, the relationship among the independent variables and the dependent variables has been established. The regression analysis of causal paths among the independent variables and dependent variables shows that all the variables substantially predict purchase intentions.

Attitude on purchase intention

Table 2
Model Summary

Model	R	R Square	Adjusted R Square	SE
1	.770 ^a	.593	.591	2.73567

Predictors: (Constant), Human resources competence

Table 1 shows that the R square value is 0.593 ($R^2 = 0.593$), which means 59.3% of the purchase intention can be described by attitude, while the rest is affected by other factors that are not included in this research. Moreover, $R = 0.770$, which signifies there is a considerable positive association among the attitude and purchase intention.

Table 3
ANOVA

Model	Sum of Squares	Df	Means Square	F	Sig.
Regression	6.112	1	7.334	31.562	.001 ^b
Residual	68.313	384	.312		
Total	69.356	383			

Dependent variable: Purchase intention

Predictors: (Constant), Attitude

Table 3 displays the ANOVA result whereby the F Value is 31.562 with the significance level at 0.001 level. The result reveals that there is a significant association among attitude and purchase intention.

Table 4
Coefficients

Model	Unstandardized Coefficient B	Standardize Coefficient Beta	t	Sig.
Constant	3.441		11.2	.000
Attitude	.532	.521	7.332	.000

Dependent Variable: Purchase intention

Table 4 suggests the coefficient level confirms that the score in beta is 0.532 for attitude, which is a robust, positive, and significant correlation ($\beta = 0.532$, $p < 0.01$) among attitude and purchase intention. Consequently, the outcome is

positively significant in attitude and purchase intention. In conclusion, it has demonstrated the first hypothesis (H1) which states that attitude will have an effect on purchase intention.

Social influence on purchase intention

Table 5
Model Summary

Model	R	R Square	Adjusted Square	R SE
1	.739 ^a	.546	.540	2.33213

Predictors: (Constant): Social influence

The R square value was 0. 546 (R2 = 0. 546), according to Table 5. Which means that 54.6% of purchase intention is predicted by the encouragement of social influence. There is a noteworthy association among social influence and purchase intention.

Table 6
ANOVA

Model	Sum of Squares	Df	Means Square	F	Sig.
Regression	11.334	1	12.221	53.326	.000 ^b
Residual	51.223	384	.211		
Total	61.227	383			

Dependent variable: Purchase intention
Predictors: (Constant), Social influence

Table 6 indicates that the F Value is 53.326, which is significant at 0.000 levels. Continued by the df, whereby df represents the number of independent variables, which is 1, which is the effect of social influence. The result indicated that there is a substantial association among social influence and purchase intention (F = 53.326, p 0.01).

Table 7
Coefficients of social

Model	Unstandardized Coefficient		Standardized Coefficient	t	Sig.
	B	SE	Beta		
Constant				7.2	.00
Social influence	1.96	.199	.532	3	.00
	.541	.132		7.59	0

Dependent Variable: Purchase intention

Table 7 shows the coefficient levels for social influence, which has a beta score of 0.522, indicating a strong, positive, and significant co-relationship (= 0.522, p

0.01) among social influence and purchase intention. Therefore, the outcome is positive and noteworthy in terms of social influence and purchase intention. In conclusion, it has proven the second hypothesis (H2), that social influence will have an influence on purchase intention.

Consumer awareness on purchase intention

Table 8
Model Summary

Model	R	R Square	Adjusted Square	R SE
1	.743 ^a	.552	.550	2.88901

Predictors: (Constant) Awareness

Table 8 indicates the R square value of 0.552 ($R^2 = 0.552$). As the R square value describes, 55.2% of the purchase intention is predicted by consumer awareness. Moreover, as noticed from the summary model table, $R = 0.743$, suggesting there is a strong positive association among the two factors.

Table 9
ANOVA

Model	Sum of Squares	Df	Means Square	F	Sig.
Regression	11.116	1	10.116	50.392	.000 ^b
Residual	52.212	384	.202		
Total	53.331	383			

Dependent variable: Purchase intention

Predictors: (Constant) Consumer awareness

Table 9 indicates that the F Value is 50.392, with a significance level of 0.000. Continued by the df, whereby the df indicates the number of independent variables is 1, which is consumer awareness. The outcomes indicated that there is a significant association between consumer awareness and purchase intention ($F = 50.392$, $p < 0.01$).

Table 10
Coefficients

Model	Unstandardized Coefficients		Standardize Coefficients	t	Sig.
	B	SE	Beta		
Constant	1.06	.201		7.03	.000
Consumer awareness	.396	.096	.409	7.78	.000

Dependent Variable: Purchase intention

Table 10 suggests a coefficient level for consumer awareness with a beta number of 0.396, indicating a strong and positive co-relation ($= 0.396$, $p < 0.01$) among consumer awareness and purchase intention. Thus, the outcomes have proven

the fifth hypothesis (H5) that there is a significant relationship among consumer awareness and purchase intention.

Age on purchase intention

Table 11
ANOVA age on purchase intention

Model	Sum of Squares	Df	Means Square	F	Sig.
Regression	13.672	1	12.002	48.880	.000 ^b
Residual	58.402	384	.234		
Total	59.589	383			

Dependent variable: Purchase intention

Predictors: (Constant) age

Table 11 indicates that the F value is 48.880 with a significance level of 0.000. Continued by the df, whereby df represents the number of independent variables, which is 1, which is age. The outcomes have revealed that here is a substantial association among age and purchase intention ($F = 48.880$, $p < 0.01$).

Table 12
Coefficients of age on purchase intention

Model	Unstandardized Coefficients		Standardize Coefficients	t	Sig.
	B	SE	Beta		
Constant	1.65	.222		6.11	.000
Age	.492	.031	.458	6.19	.000

Dependent Variable: Purchase intention

Table 12 shows the coefficient level, which has a beta number of 0.338 for age, indicating that there is a strong and positive co-relationship ($\beta = 0.338$, $p < 0.01$) between age and purchase intention. Therefore, the outcomes have proven the fifth hypothesis (H5): there is a noteworthy association between age and purchase intention.

Education on purchase intention

Table 13
ANOVA

Model	Sum of Squares	Df	Means Square	F	Sig.
Regression	12.227	1	11.116	49.992	.000 ^b
Residual	58.337	384	.124		
Total	61.421	383			

Dependent variable: Purchase intention

Predictors: (Constant) Education

Table 13 indicates that the F value is 49.992, which is significant at the 0.001 level. Continued by the df whereby df represents the number of independent variables, which is 1, which is education. The outcomes have suggested that there is a substantial association among education and purchase intention ($F = 49.992$, $p < 0.01$).

Table 14
Coefficients

Model	Unstandardized Coefficients		Standardize Coefficients	t	Sig.
	B	SE	Beta		
Constant	1.65	.222		8.32	.000
Education	.403	.031	.419	8.78	.000

Dependent Variable: Purchase intention

Table 14 specifies the coefficient level for education, which has a beta number of 0.403, indicating a strong and positive co-relationship ($= 0.403$, $p 0.01$) between education and purchase intention. Therefore, the outcomes have demonstrated the fifth hypothesis (H5): there is an important association among education and purchase intention.

Discussion

The research outcome evidently suggests that there is a direct and positive association with all the factors considered in this research. Attitude has a substantial effect on purchase intention with a predictive probability of 49.1%, social influence with a predictive probability of 54.6%, and consumer awareness with a predictive probability of 55.2%. In addition to that, socio-demographic variables like age ($t = 6.11$, $p < 0.01$) and education ($t = 8.32$, $p < 0.01$) have shown a significant association with the intention to purchase hygiene products among women in rural areas. The study also indicates that there is significant variation among the age groups as well as education groups in their attitude towards hygiene products and their intention to purchase them.

It is our common notion that rural areas are still under the shadows of taboos and stereotypes related to hygiene and the use of hygiene products. Menstruation and menstrual practices are still facing challenges from several social, ethnic, and sacred limitations, which are a major obstacle in the path of menstrual hygiene management. However, the current findings challenge the traditional perception of rural women towards hygiene management by providing a strong probability result of their intention to purchase sanitary napkins. The positive association between attitude and purchase intention clearly indicates that rural women in the selected sample area have a better interest in moving towards menstrual hygiene management as well as buying the menstrual hygiene products. The study observations are in line with past studies which indicate a close association between attitude and purchase intention (Gracia & de Magistris, 2007; Morwitz et al., 2007).

The study results also indicate that there is a direct association among social influence and a woman's intent to purchase hygiene products in rural areas. This positive result shows rural women's interest in getting information about menstrual hygiene management from their reference group, viz., family members, relatives, or peer groups, about the availability of such products in the shops and making an effort to get them for effective menstrual hygiene management. The study findings are in line with past studies (Bickart & Schindler, 2001; Venkatesh et al., 2003; Mokgosa & Mohube, 2007). The belief that people are prejudiced by the choices, behaviours, and also trust of significant others has been abridged in manifold terms like social influence, social proof, peer pressure, bandwagon effects, conformity, and herding (Cialdini & Goldstein, 2004). In order to improve product acceptance, marketing and promotion activities must consider not only the direct target but also the significant others around her.

The study's findings also show that rural women consumers' intentions to purchase sanitary napkins are influenced by their product awareness. In this context, Mown and Minor (2001) state that consumer intention to purchase the products, involves a series of information-handling results from identifying problems, exploring for solutions, assessing options, and making judgments. Awareness about the products and solutions is facilitated by electronic and non-electronic media in addition to the reference group. Because rural women consumers who are unfamiliar with sanitary napkin products generally do not have enough information to form an opinion about such products as well as their availability from nearby shops. Women in rural areas are facilitated largely by group-wise communication from the referral groups since there is less accessibility to electronic and related media-based awareness. The findings of the current research are in line with other observations from the west (Gracia & de Magistris 2007; Morwitz et al., 2007; Tarkiainen & Sundqvist 2005), and may be replicated in Asian countries.

Current research considered two socio-demographic factors in relation to the dependent variable, purchase intention. The first factor was the age of the rural woman in its relationship with the intention to purchase hygiene products. The older the woman, the more purchasing experience they have than the younger one. But in rural areas, the older women have various ways in which they cope with the menstruation period, mostly in a conventional manner. While the younger ones, due to their greater exposure to peer groups, schools, and college environments, are a little more aware and specific about hygienic practices, and hence look at modern ways and products to cope with the menstruation period. This indicates that though social influence on their purchasing decisions is there, they are in the transition period from conventional to modern coping patterns and products. It is also mentioned that the younger generation is easily influenced by modern hygiene practices in comparison with the older generation.

The study findings report that age and education factors are closely related to their intention to adopt better means of hygiene management practices. Nowadays, schools and colleges are organizing several health and hygiene programmes for young adolescent girls. Offering information about reasons for poor healthiness and selections accessible will go a long way concerning encouraging a transformation in people's attitude and behaviour

which will be augmenting advantageous health-seeking behaviour. Educational institutions, rural education, rural extension programs with informal education through self-help groups have a major role in information dissemination as well as orientating young girls towards the availability of hygiene products in retail shops. Their purchase intention is thus influenced by the knowledge they gained from school and college-based programmes about various hygiene products and brands. Thus, it is inferred that better education of youngsters has better hygiene practices that will be adopted into leading purchase intentions of hygiene products.

Implications Implications for Practice

The findings of the study indicate that attitudes towards menstrual hygiene are favorable in the study sample. The socio-demographic observations further support the observation that young rural women are a little more aware of hygiene and hygienic products in comparison with the older generation. This result may be due to the increasing level of school and college education related to health and hygiene programmes in rural areas. The major factors influencing rural women's purchase intention of hygiene products were their conventional attitude, which was further supported by the normative belief factor and social influence, which revolved around taboo myths. Traditional ways of coping can be changed with the use of clean and hygienic sanitary napkins products available in the rural market if challenges of taboos and stereotypes related to menstruation can be addressed through proper information dissemination through public campaigns and integrated marketing communications. One of the important aspects for companies engaged in sanitary napkin production is to make available adequate information, learning opportunities, and an empowering environment to deal with menstruation-related issues as well as proper dissemination of their products in rural areas.

Based on the research results, it is stressed that marketers should make use of electronic as well as non-electronic media campaigns in order to disseminate information regarding hygiene products, especially to rural women, through college-oriented and school-oriented product campaigns. One of the most pressing issues confronting rural female consumers is product availability. Lack of awareness is also related to a lack of awareness about the availability. Marketing and sales people should focus on making available hygiene products in every nook and corner of rural areas. In addition to their own efforts, the marketing force can seek the support of the local NGOs that would provide information regarding the use of sanitary napkins and their advantages. Sponsoring training and development programmes in rural areas may assist non-governmental organisations (NGOs) in supporting proper information dissemination. This research suggests to marketers that the appropriate media for advertising and rural woman-oriented promotional strategies identified in this research are those identified in this research. Changes in the advertisement campaigns in urban as well as rural areas need to be segregated to tackle better promotion of hygiene products in the rural market. This will allow the business community to remain competitive in the rural hygiene products market by increasing purchase intent with appropriate changes aimed at the rural women's community.

Theoretical Implications

This particular research followed the theory of reasoned action to conceptualize and theories the issues pertaining to rural women's hygiene product purchase intention. The theory of reasons for action consists of consumer attitude, social influence, and its influence on purchase intention. The attitude towards purchasing hygiene products is influenced by a woman's understanding of health and hygiene. Stereotypes and taboos influence rural women's belief systems about menstruation and hygiene. Nevertheless, such a belief system may be altered with the support of proper knowledge and information dissemination either at the village level through health campaigns or through schools and colleges. The current study thus sounds upon marketers to integrate the educational components into advertising and product promotion campaigns that have an impact on understanding teen-age girls' physiology of menstruation and changes of puberty and their implications on appropriate individual and menstrual hygiene practices. Such an effort would not only market the sanitary napkin products, but also take out traditions, misunderstandings, and dogmas regarding menstruation and menstrual cleanliness in rural areas. Product awareness and usage must be well communicated to rural girls and women in order for them to think differently and develop a better attitude toward the intention of using sanitary napkins. The attitude and social influence thus influence whether a person has a low or high intention to purchase sanitary products. The study empirically observes the application of the theory of reasoned action in this research.

Conclusion

Market penetration to rural areas is identified as one of the major challenges for hygiene product companies, particularly in rural India. Effective market communication strategies can help companies overcome this challenge. Myths, misapprehensions, and wrong beliefs concerning menstruation and menstrual hygiene may be eliminated, not only supporting the hygiene products companies to penetrate the rural market but also diminishing the chance of having reproductive tract infections and their complications among rural women. This particular research was conducted to test the application of the theory of reasoned action in the area of rural women's hygiene product purchase intention. The study's findings, which focused on attitudinal and normative belief dimensions, show that rural women's attitudes and the reference group around them influence purchase intention. The study also indicates that awareness is one factor that contributes to proper understanding of menstrual health and hygiene as well as the products available in the rural market. Raising awareness through formal education among young girls and through adult education for the older generation will enhance the eradication of myths and misconceptions related to menstrual health and hygiene, and it will also promote a better understanding of the menstrual hygiene products available in the rural market. Purchase intention is thus related to proper awareness, which is the by-product of belief and attitude. Henceforward, efforts are required to enhance awareness, strengthen attitudes and influence purchase intentions, thereby creating a positive menstrual hygiene management system in the rural parts of the country. There is a good scope for further research in the present field of study. The study

can be conducted with a larger sample size and a wider geographic coverage. Comparisons between states and regions can be made to get further insights. Inclusion of other relevant variables such as socio-economic influences, cultural factors, product attributes, usage preferences, etc. can add further dimensions to the study and enhance the scope considerably. A proper behavioural change can be bought into through effective integrated marketing communication and rural-oriented product dissemination strategies, which will provide better reachability for hygiene products among rural women.

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