

Effectiveness of Education Session on Knowledge about Premenstrual Syndrome

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Abstract

Quasi-Experimental study was carried out to evaluate the effectiveness of educational session on premenstrual syndrome among reproductive age women in selected rural areas, Tirupati, Andhra Pradesh. Data was collected from 50 women living in Peruru Village, Tirupati. Significance findings in the pretest revealed that a majority (84%) has inadequate knowledge and (10%) has moderate knowledge and (6%) had adequate knowledge on various aspects of PMS. After providing education significant knowledge was gained which reveals 82% of women gained adequate knowledge while 14% of women gained moderate knowledge and 4% of women gained inadequate knowledge on PMS. The t-value is 28.706, which is statistically significant at 0.01 levels. The conclusion suggests that the education when imparted to women on premenstrual syndrome can bring improvement in their knowledge and lead to the adoption of preventive practices against premenstrual syndrome.

Keywords: Premenstrual Syndrome; Educational Session; Reproductive Age Women.

Introduction

Premenstrual syndrome is one of the most common disorders in women at reproductive age that could significantly interfere with activities of daily life. PMS is a set of physical and psychological symptoms that arises about a week to 10 days before menstruation. Premenstrual symptoms usually relieve of ease once menstruation starts. But they may continue for the few days of the period and it will be relieved and appear in the next cycle [1].

Singh Harinader [2] study reported appearance of marked behavioral changes like depression, aggression, irritability, and mood swings etc., during PMS. These behavioral changes affect some females to such an extent that they act uncharacteristically and commit minor and major crimes which can turn to unlawful activity. Maximum behavioral symptoms

were noticed on females within the age group of 35-45 years. Daltan [3] suggested more incidence of PMS in women >30 years of age in comparison to younger women.

For many women the signs and symptoms of premenstrual syndrome are uncomfortable and unwelcome part of their monthly cycle, many of the women do not notice it as a disorder. The precise cause is not known, but theories suggest that hormone imbalance with changes in endocrine levels, abnormal prostaglandin metabolism, thyroid function and aldosterone secretion as possibilities. External stress and the dietary habits may also play a vital role in it.

About 85% of child bearing women experience premenstrual syndrome during their lifetime. About 40% of the women experience much intensified symptoms. But the prevalence of premenstrual symptoms vary from 1 to 90% due to variation in sample size and varying criteria to assess symptoms (Monica Malhotra, 2003) [4].

Janice E Daughtary, M.D; [5] conducted a study on premenstrual syndrome and their associated socio-demographic variables in fertile woman between ages 15 and 45 years. The results were about 6.1% had severe premenstrual symptoms, (72.2%) have dysfunction and the most common symptoms were feeling of irritability and restlessness (72%) anxiety (67%) discomfort or pain (66.6%) and he concluded that the prevalence is very high and is increasing day by day.

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Premenstrual syndrome may affect 30-40% of the female population and has been implication in the work absenteeism, criminal behavior, marital discord and billions of dollars worth a business less. Now-a-days the problem of premenstrual syndrome is an increasing entity. It disturbs the women socially, psychologically and family relations tend to become risky, so there is a need to create awareness about premenstrual syndrome among women and evaluate the effectiveness of educational session on PMS.

Objectives of the Study

- ☞ To evaluate the effectiveness of educational session regarding premenstrual syndrome.
- ☞ To find out association between post test knowledge with selected demographic variables.

Methodology

The research design adopted for the study to achieve the objectives by the study was pre experimental, one group pretest, and post test design. Multi stage probability method of sampling was adopted to select the study sample. The study was conducted in Peruru Village, Tirupati Rural which is situated in Rural Tirupati at a distance of about 20 km from the College of Nursing, SVIMS and SVIMS University, Tirupati, A.P. The sample comprised of

50 reproductive aged women who fulfill the inclusive criteria, living in Peruru Village, Tirupati. The research topic was approved by research Committee College of nursing. The sample of this study includes all women in the age group from 15-45 years living in Peruru, Tirupati rural who fulfill the criteria. Formal permission was obtained from the village Surpamch and Village Secretary, Peruru Village, Tirupati for conducting the study.

Data was collected with structured interview scheduled which was developed with extensive review of literature and it consists of 33 items of multiple choice questions with a score of right answer 0 wrong answer 1. Educational session was developed and validated with experts. Mothers were made to sit comfortably and Pre test knowledge was measured by interview schedule, educational session was organized on PMS in groups of 10 in 5 sessions after giving education on PMS and management. After implementation of educational session employing the same tool for pre test, data was collected after seven days.

Results

Data collected from 50 samples was analyzed and presented. Majority (46%) of the women are in the age group of 20 to 30 years, educated (88%). Most (46%) of them were home makers and half of them are living in joint families.

Table 1: Mean, standard deviation and 't' value of pre test and post test knowledge score on premenstrual syndrome

Knowledge	Mean	S.D.	't' value	
Pre test	14.84	9.259	28.706	0.01 level of significance
Post test	43.9	7.744		

P<0.01

Table 1 represents pre test mean score 14.84 and S.D. 9.259, the post test mean 43.9 and S.D. 7.744, the paired 't' test value 28.706 shows that there was a significant improvement in the knowledge of women

on premenstrual syndrome at P<0.01 level. The major difference in mean was due to effectiveness of education session.

Table 2: Area wise association between pre test and post test knowledge scores of women on premenstrual syndrome

S. No.	Knowledge variables	Pre test		Post test		't' value	Inference
		Mean	S.D.	Mean	S.D.		
1.	Concept pf PMS	2.9	1.99	5.86	0.56	10.82	S
	Signs & Symptoms	6.08	5.30	24.06	5.3	22.411	S
2.	Symptoms	5.78	5.61	13.98	2.88	10.84	S
3	Management	14.84	9.25	43.90	7.74	28.70	S

The table 2 represents pretest and post test knowledge on sub session premenstrual syndrome. Knowledge regarding concept of PMS was 2.9. It was increased to 5.86 which was significant (t value)

knowledge and signs symptoms was 6.8 before education session. It was increased to 24.06 after an education which was significant (t value 22.41). In the sub domain of management of PMS pre test mean

score was 14.84. Which was increased significantly (43.90) after educational session (t value 28.70).

Significant Association was found between education (Chi-square value 34.756 significant at 1%), marital status (Chi-square 16.935, significant at 1%) and post test knowledge of mothers.

Discussion

Pre test knowledge on PMS was found to be inadequate. These findings of the study correlate with findings of Horester K.D. et al., (2003) [5], who stated that Indian women has leaser scores of knowledge on preparedness to menarche and menstruation compared to the American Women. The findings of the study correlates with the findings of Janita P.C. Chav [6] et al., conducted a similar study on effects of educational program on adolescents with premenstrual syndrome at secondary schools in Hongkong. The study results were there was a significant increase in post test knowledge scores of experimental group whereas there was no significant difference found in post test knowledge scores of the control group. Habib F et al., also reported significant improvement or subject knowledge regarding PMS after educational session [P=0.000]. This included definition, time and symptoms a PMS [7].

Conclusion

Premenstrual syndrome is not just a bio-medical disease. It has socio-cultural and economic

implications.

Educational session on premenstrual syndrome was found to be affective in increasing the knowledge of the women on identification of symptoms and management of symptoms their by women can improved their quality of life.

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