

“A Study to Evaluate the Effectiveness of Structured Teaching Programme on Knowledge of Premenstrual Syndrome among Nursing Students in Selected Nursing Institute in Bangalore”

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Nursing Student's Perception and their Future Intentions

Abstract:-

Background: Premenstrual syndrome is the cyclic recurrence of a group of symptoms that appear during the luteal phase of the menstrual cycle (1-2 weeks prior to menses) and diminish significantly or disappear completely several days after the onset of menstruation. Premenstrual syndrome encompasses a wide variety of symptoms that are unique to and diagnostic of premenstrual syndrome. To be diagnosed with premenstrual syndrome, three conditions must be met: a woman's symptoms must correspond with the luteal phase and be absent during the follicular phase of the menstrual cycle; the symptoms should have some degree of monthly recurrence; and the symptoms must be severe enough to interfere with some aspect of life style. Daily records confirming the severity, impact, and timing of symptoms are essential in confirming the diagnosis and ruling out more chronic disorders.

Keywords: Perception, Future Intentions, nursing students.

I. INTRODUCTION

Many research started to study the premenstrual syndrome of women 19th century. The first person to name and describe the premenstrual syndrome was Robert T Frank. Some medical professionals believe that premenstrual syndrome might be a socially constricted disorder rather than a physical illness. The anthropologist at believe emolymartue argues that premenstrual syndrome is a cultural phenomenon that continuous to grow in a positive feedback loop also the studies on premenstrual syndrome in either 10 women that premenstrual syndrome is a detrimental to their work capabilities the depending up whether the need for women in the work force is strong.

II. OBJECTIVES

- To assess the pre existing knowledge regarding pre menstrual syndrome among nursing students.
- To evaluate the effectiveness of structured teaching programme regarding pre menstrual syndrome among nursing students.
- To determine the association of post test with selected demographic variable.

III. HYPOTHESIS

- **H₁:** There will be a significant difference in the knowledge scores regarding pre menstrual syndrome between pre test and post test among the nursing students.
- **H₂:** There will be a significant association between post test knowledge scores and selected demographic variables.

IV. METHODS

The methodology of the study involves research approach, the research design, and variables, setting of the study population, sample, sampling technique and sample size.

V. RESEARCH APPROACH

Experimental approach

VI. RESEARCH DESIGN

Pre experimental design (one group pre test post test design)

VII. VARIABLES UNDER STUDY

- **Dependent variable:** Knowledge level of II year nursing students about pre menstrual Syndrome
- **Independent variable:** Structured teaching program regarding pre menstrual syndrome
- **Co-variable/ attributive variable:** Demographic variables

VIII. SETTING OF THE STUDY

The study was planned to conduct in St. Mary's Institute of Nursing Bengaluru.

- **SAMPLE TECHNIQUE** Simple random sampling
- **SAMPLE SIZE** 30 samples were for the study

IX. RESULTS

The data was collected from the selected samples by using simple random sampling. Questionnaire was distributed to the selected samples to assess the existing knowledge of samples regarding pre menstrual syndrome. After one week structured teaching program was conducted for the same samples. After one week of structured teaching program post test was given to the samples by using the same questionnaire.

| Score | Percentage | Remarks |
|-------|------------|------------|
| 0-12 | ≤ 50% | Inadequate |
| 12-19 | 51-75% | Moderate |
| 19-25 | Above 75% | Adequate |

Table 1: Score distribution

The analysis and interpretation of data of this study are based on data collected through structured questionnaire for nursing students (N= 30). The results were computed using descriptive and inferential statistics.

| characteristics | Category | Respondents | |
|-------------------|----------|-------------|---------|
| | | number | percent |
| Age group (years) | 18-20 | 27 | 90% |
| | 21-23 | 3 | 10% |
| TOTAL | | 30 | 100% |

Table 2: Classification of Respondents by Age

The data from the above table 2 shows that majority of respondents 90% are in the Age group of 18-20 years, and 10% in the group of 21-23 years.

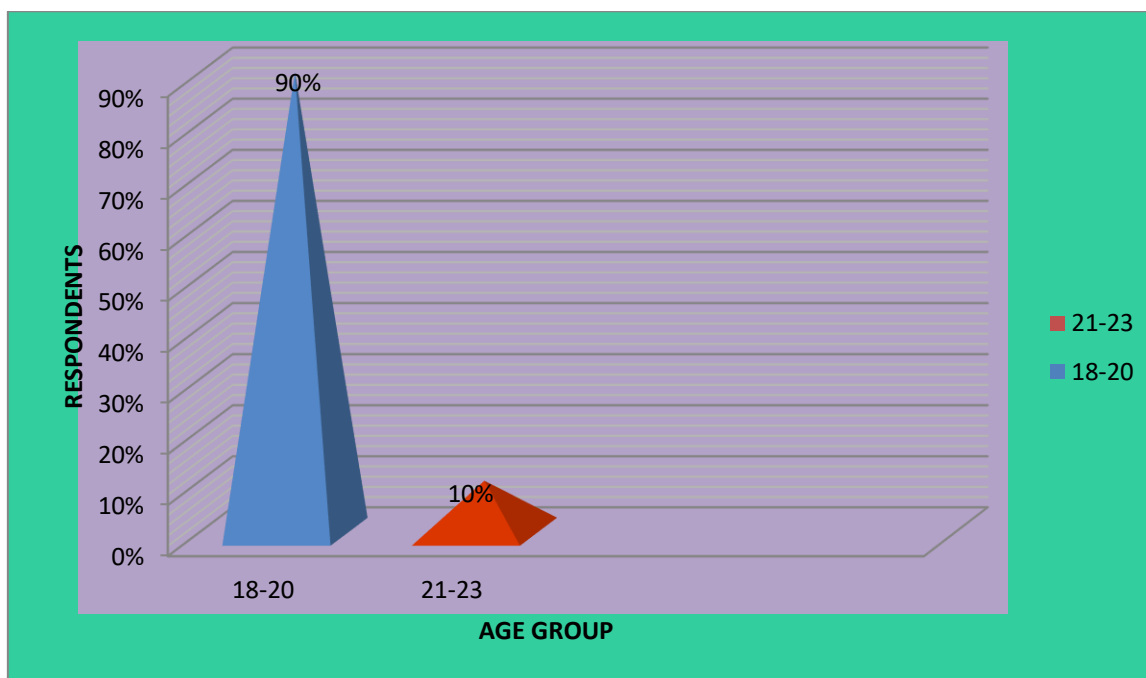


Fig 1: Classification of respondents by age

| characteristics | category | Respondents | |
|-----------------|----------|-------------|---------|
| | | number | Percent |
| sex | BSc | 27 | 90% |
| | GNM | 3 | 10% |
| TOTAL | | 30 | 100% |

N=30

Table 3: Classification of Respondents by Course of Nursing

The data from the above table 3 shows that majority of the respondents 90% were BSc and 10% were GNM. This shows that the number of students are more than GNM students.

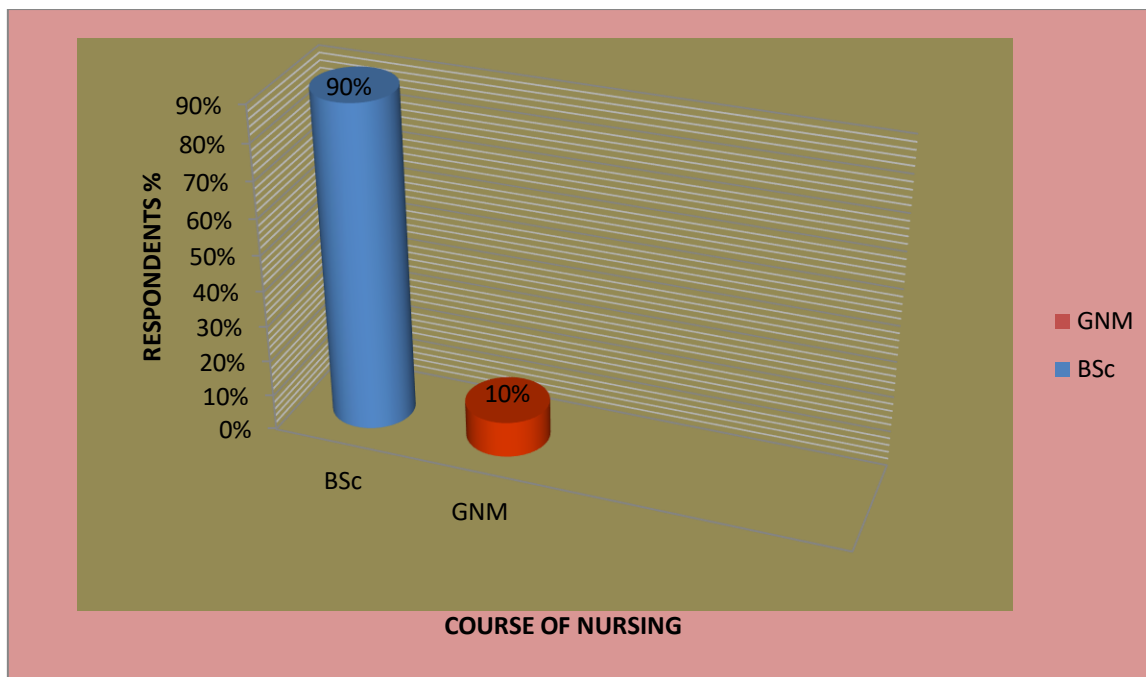


Fig 2: Classification of respondents by course of nursing

| characteristics | category | Respondents | |
|-----------------|-----------|-------------|---------|
| | | number | Percent |
| Religion | Hindu | 15 | 50% |
| | Muslim | 0 | 50% |
| | Christian | 15 | |
| TOTAL | | 30 | 100% |

Table 4: Classification of Respondents by Religion

The data from the above table 4, we can observe that 50% of the students are belongs to Hindu’s and 50% are belongs to Christian and there is no Muslim.

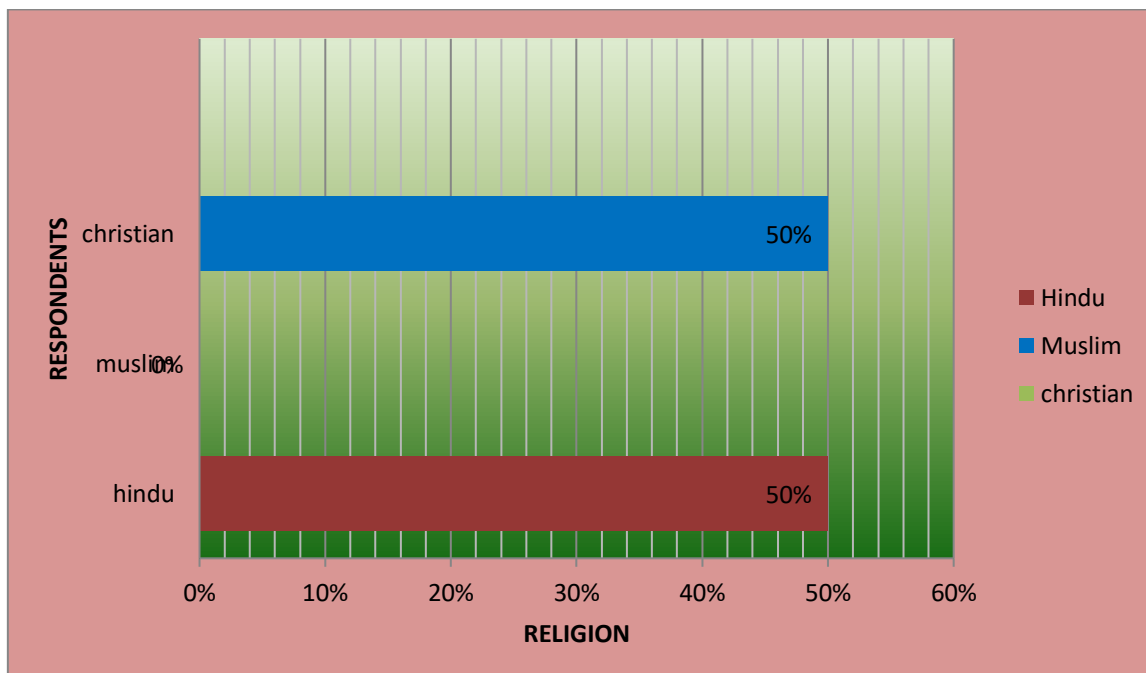


Fig. 3: Classification of respondents by religion

| characteristics | category | Respondents | |
|-----------------|----------------|-------------|---------|
| | | number | Percent |
| Type of Family | Nuclear Family | 28 | 93.33% |
| | Joint Family | 2 | 6.66% |
| TOTAL | | 30 | 100% |

Table 5: Classification of Respondent by type of family

The data from the above table 5 reveals that majority of respondents 93.33% were living in nuclear family and 6.66% were living in joint family.

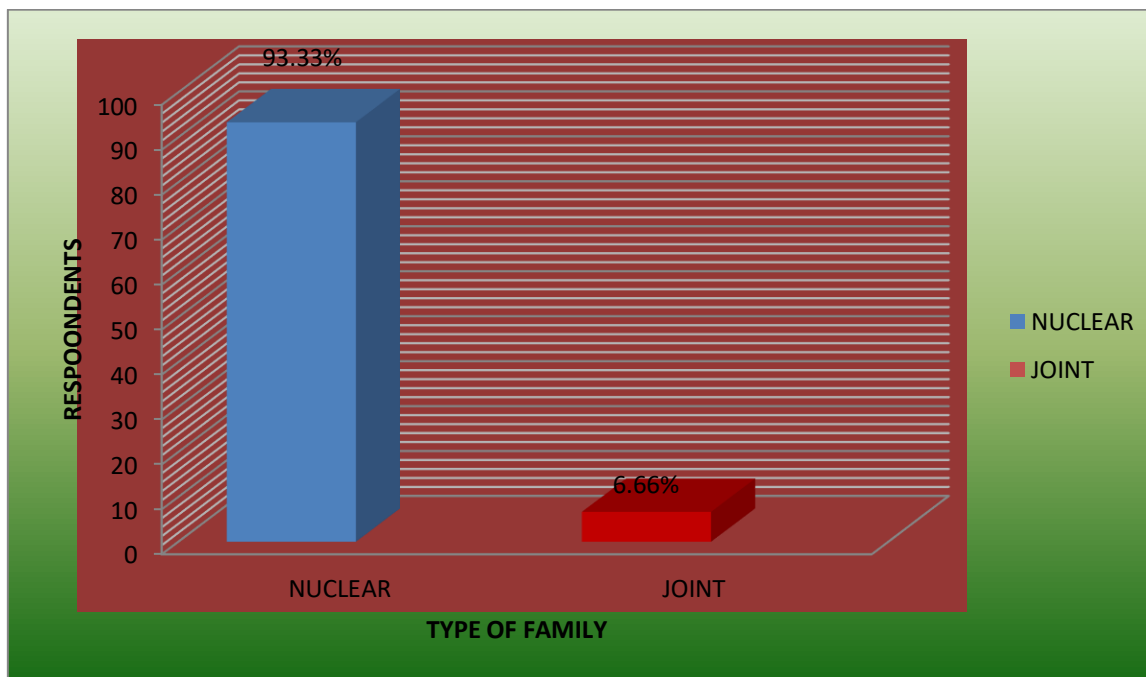


Fig 4: Classification of respondents by type of family

| characteristics | category | Respondents | |
|-----------------------------|-------------|-------------|---------|
| | | number | Percent |
| Educational level of mother | Illiterate | 1 | 3.33% |
| | Primary | 7 | 23.3% |
| | High school | 17 | 56.66% |
| | Graduate | 5 | 16.66% |
| TOTAL | | 30 | 100% |

Table 6: Classification of respondents by educational level of mother

The data from the above table 6 shows that mother of respondents 56.66% were completed high school certificate, 23.33% were primary school, 16.66% were graduate and 3.33% were illiterate.

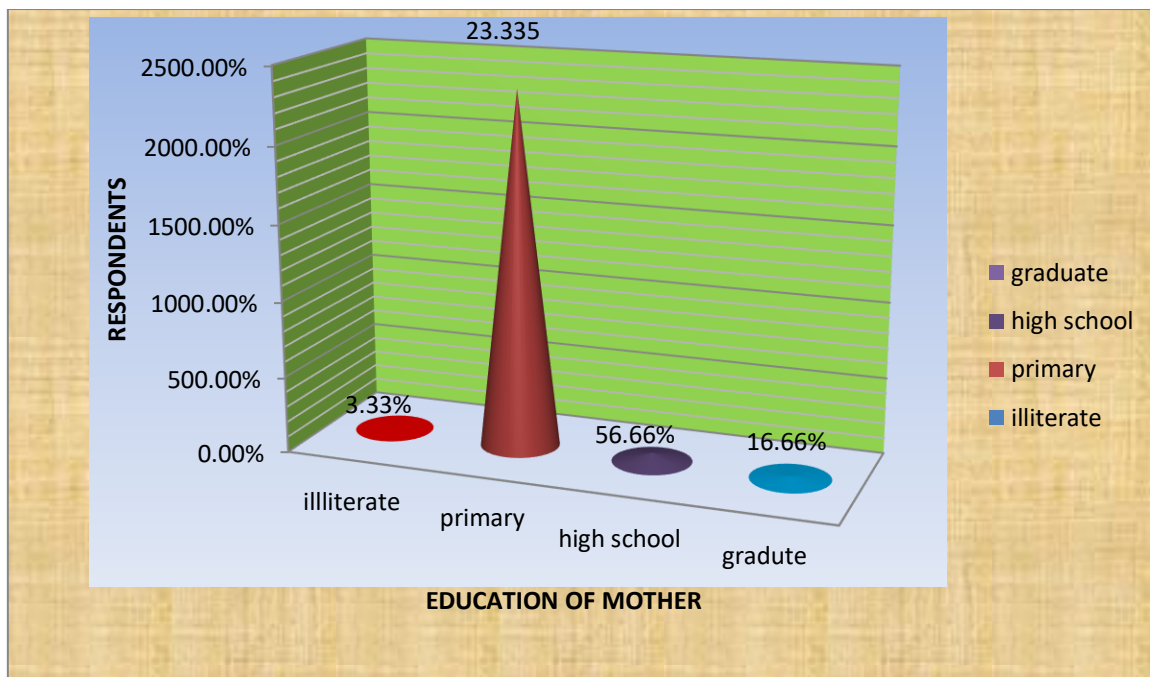


Fig. 5: Classification of respondents by education of mother

| characteristics | category | Respondents | |
|-----------------|-------------|-------------|---------|
| | | number | Percent |
| Family Income | 5000-10000 | 21 | 70% |
| | 10000-15000 | 5 | 16.66% |
| | 15000-20000 | 1 | 3.33% |
| | 20000-25000 | 3 | 10% |
| TOTAL | | 30 | 100% |

Table 7: Classification of respondents by Family income

The data from the above table 5.6 shows that 70% of students are 5000-10000, 16.66% are in 10000-15000, 10% are in 20000-25000 and 3.33% are in 15000- 20000 of family income.

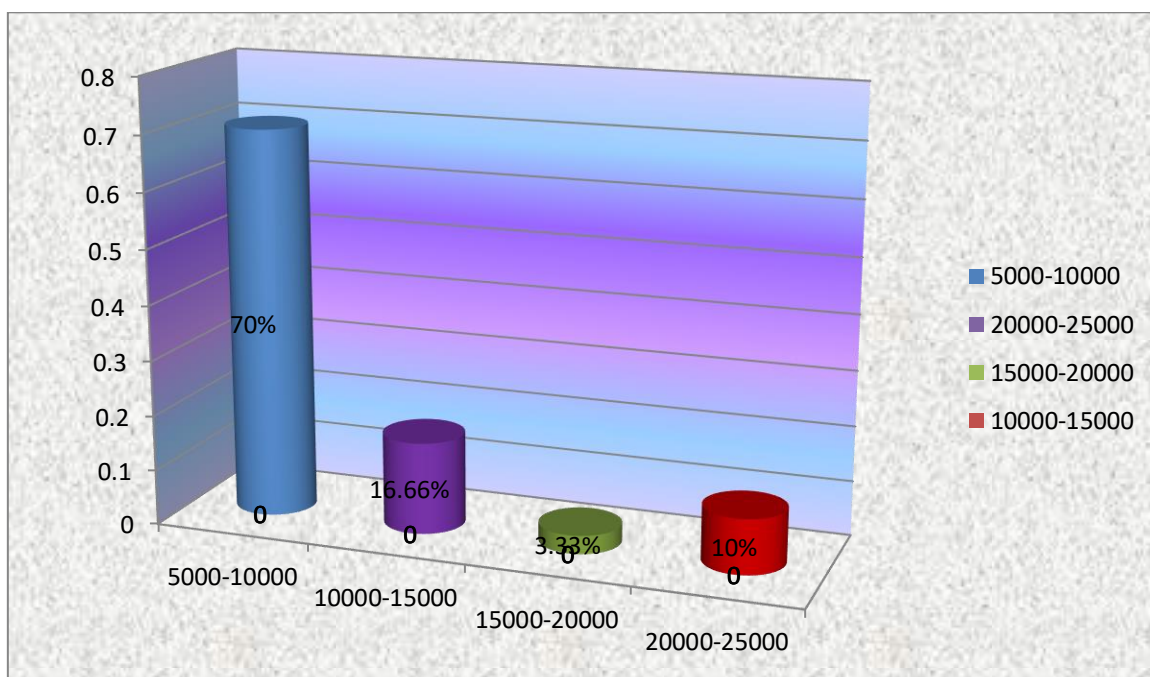


Fig. 6: Classification of respondents by family income

| characteristics | category | Respondents | |
|--------------------|----------|-------------|---------|
| | | number | Percent |
| Number of siblings | 1 | 14 | 46.66% |
| | 2 | 11 | 36.66% |
| | 3 | 4 | 13.33% |
| | 4 | 1 | 3.33% |
| TOTAL | | 30 | 100% |

Table 8: Classification of Respondents by number of siblings

The data from the above table 8, it is evident that majority of respondents had only one sibling that is 46.66%, followed by 2 siblings that is 36.66%, 3 siblings that is

13.33% and 4 siblings 3.33%. This shows that most of the families were opted for 2 children.

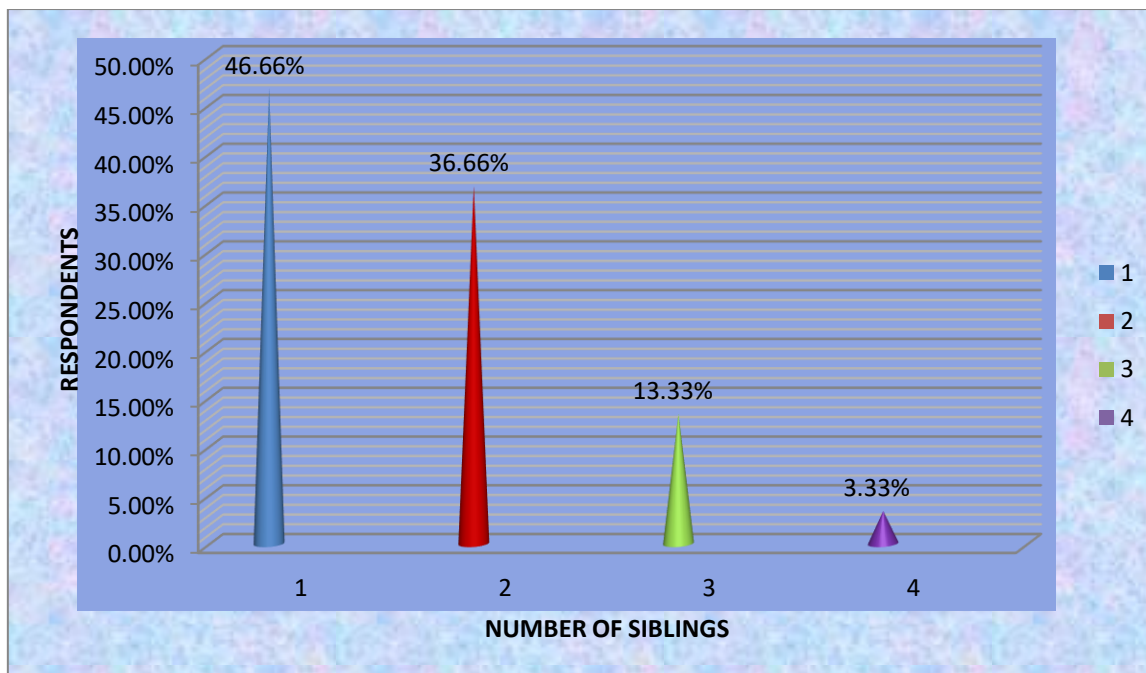


Fig 5.7 Classification of respondents by number of siblings

| characteristics | category | Respondents | |
|-------------------------|----------|-------------|---------|
| | | number | Percent |
| Exposure of information | yes | 28 | 93.3% |
| | no | 2 | 6.7% |
| TOTAL | | 30 | 100% |

Table 9: Classification of respondents by exposure of information on PMS

The data from the above table 9 shows that majority of them 93.3% of the respondents felt that they had earlier information on premenstrual syndrome, which was a good

sign. Only 6.7% of the respondents said that they did not have any prior exposure to information on premenstrual syndrome.

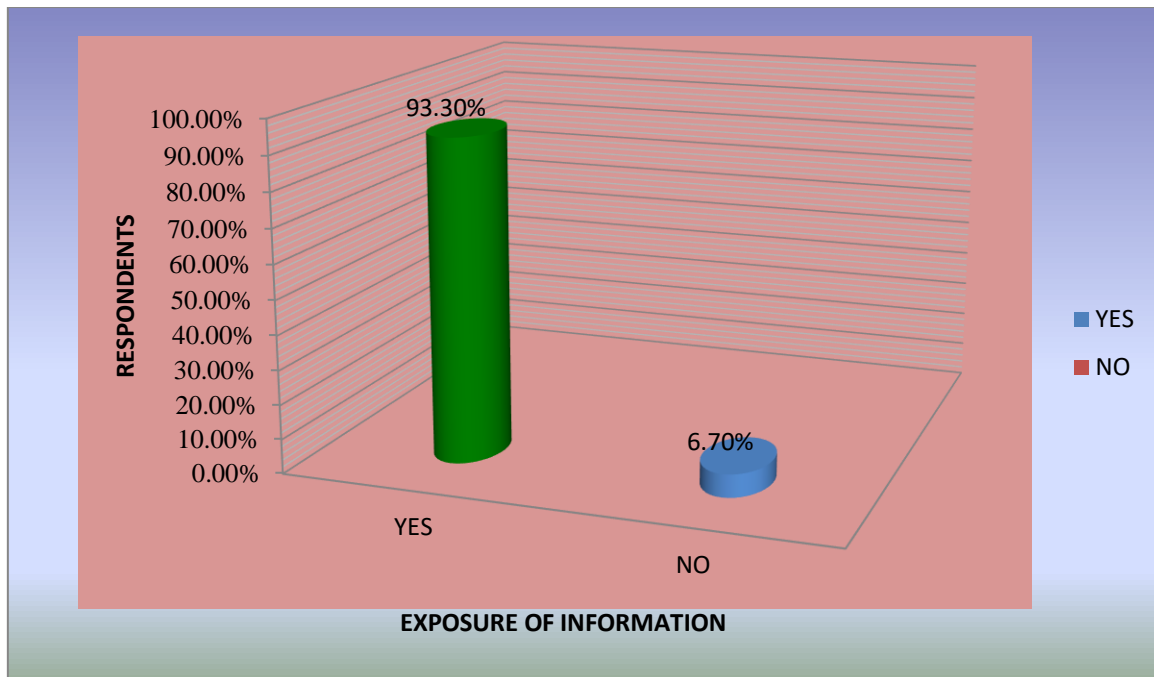


Fig. 8: Classification of respondents by exposure of information

| characteristics | Category | Respondents | |
|-----------------------|-----------------------------|-------------|---------|
| | | Number | Percent |
| Source of Information | Books/printed materials | 17 | 56.66% |
| | Mass/Media/Radio/Television | 7 | 23.33% |
| | Relatives/Neighbours/Peers | 5 | 16.66% |
| | Healthcare/Personal | 1 | 3.33% |
| TOTAL | | 30 | 100% |

Table 10: Classification of Respondents by Source of Information

The data from the above table-5.8 shows that majority of them 56.66% were got information from books or printed materials, 23.33% from mass media and 16.66% from relatives. Only 3.33% said that they got information on premenstrual syndrome from the health professionals.

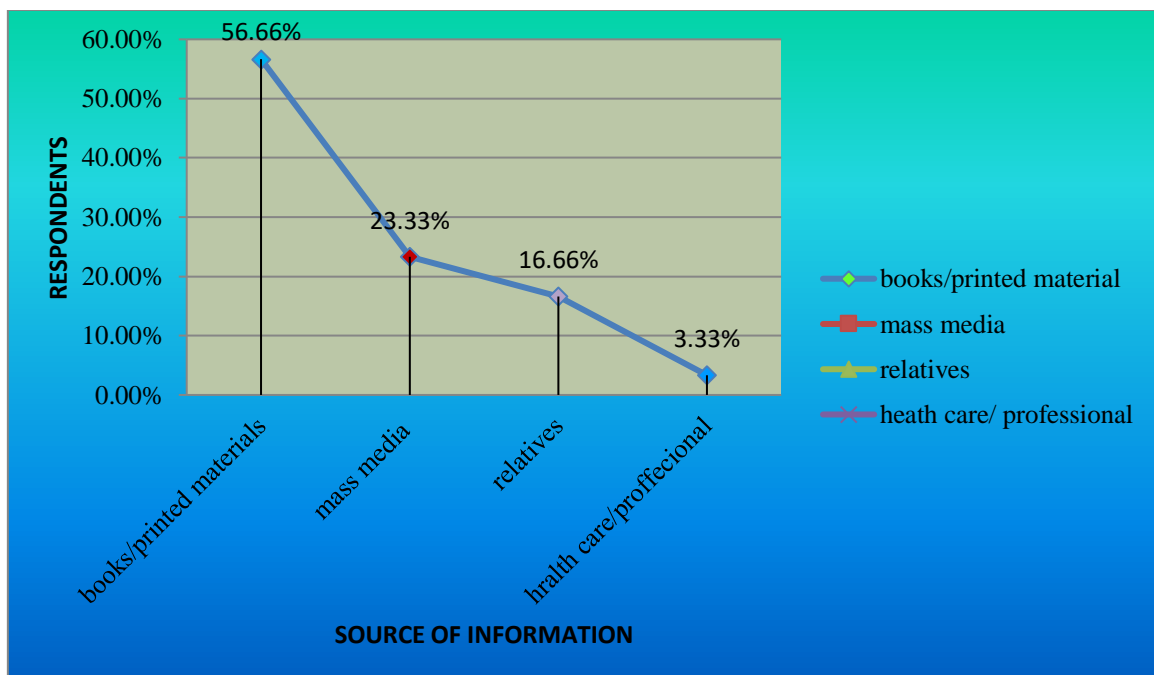


Fig. 9: Classification of respondents by source of information Overall and aspect wise knowledge scores of respondents

| Knowledge level | Category | Respondents | |
|-----------------|----------|-------------|-------------|
| | | Number | Percent |
| Inadequate | ≤ 50% | 29 | 96.7% |
| Moderate | 51-75% | 1 | 3.3% |
| Adequate | >75% | 0 | 0% |
| Total | | 30 | 100% |

Table 11: Classification of respondent on pre test knowledge level

This above table 11 indicates that the classification of respondents knowledge by pre test knowledge scores. The results showed that none of them had adequate knowledge,

3.3% had moderate knowledge and 96.7% had inadequate knowledge.

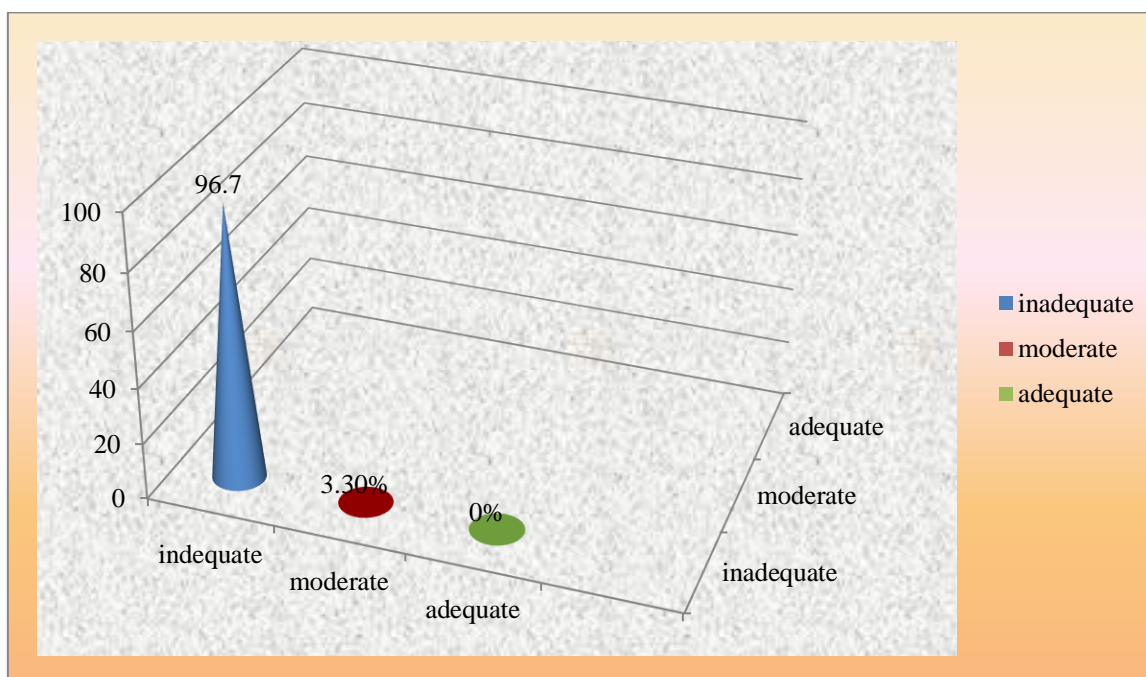


Fig 10: Classification of respondents by pre test knowledge

| SL NO | Knowledge Aspects | Statement | Max. Score | Respondents Knowledge | | | |
|----------|---|-----------|------------|-----------------------|-----|----------|--------|
| | | | | Mean | SD | Mean (%) | SD (%) |
| I | Introduction and Definition | 4 | 4 | 1.07 | .7 | 26.8% | 17.5% |
| II | Incidence and Etiology | 4 | 4 | 1.53 | .8 | 38.3% | 20% |
| III | Risk factors and Clinical Manifestation | 5 | 5 | 1.5 | .8 | 30% | 16% |
| IV | Diagnosis and Medical Management | 6 | 6 | 1.733 | 1.1 | 28.9% | 18.3% |
| | Pharmacological and Nursing Management | 6 | 6 | 1.33 | .8 | 22.2% | 13.3% |
| combined | | 25 | 25 | 7.2 | 4.2 | 146.2 | 85.1 |

Table 12: Aspect wise Pre test Mean Knowledge scores of Respondents on Premenstrual syndrome

Table 12 reveals that the aspect wise pre test knowledge of Respondents regarding premenstrual syndrome. The highest mean % was seen in the aspect of by incidence and etiology 38.3% followed by diagnosis and management 28.9% Introduction and definition with 26.8, pharmacological management and nursing management 22.2% and the lowest mean % was seen in the aspect of risk factors and clinical manifestation with mean % of 30%.

| Knowledge level | Category | Respondents | |
|-----------------|----------|-------------|-------------|
| | | Number | Percent |
| Inadequate | ≤ 50% | 0 | 0% |
| Moderate | 51-75% | 14 | 46.7% |
| Adequate | >75% | 16 | 53.3% |
| Total | | 30 | 100% |

Table 13: Classification of respondent on post test knowledge level on premenstrual syndrome

This above table 13 indicates that the classification of respondent’s post test knowledge scores levels. The result showed that in the post test 53.3% of respondents are

adequate knowledge, 46.7% of the respondents had moderate knowledge.

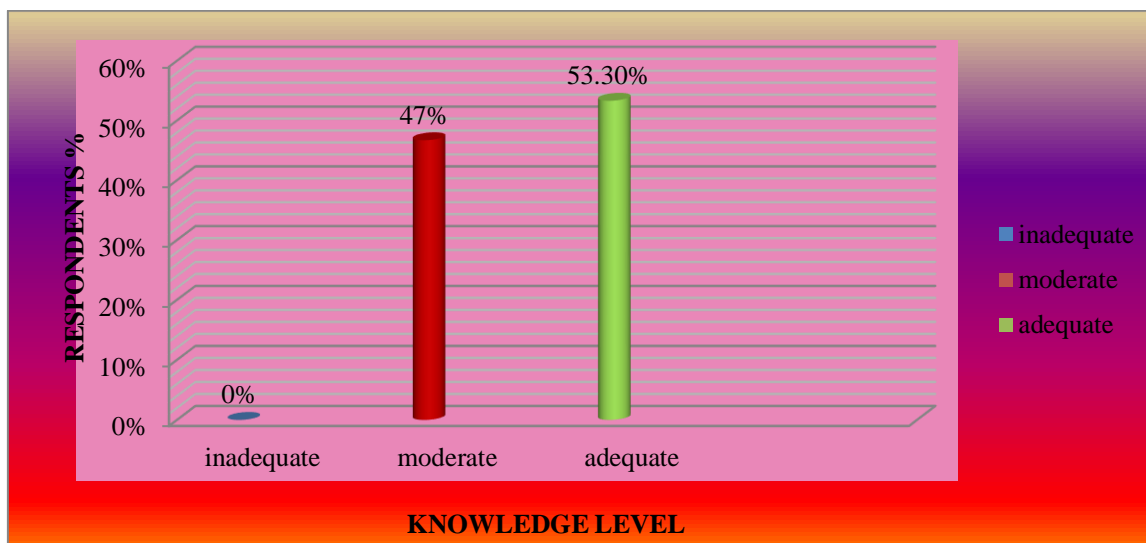


Fig.11: Classification of respondents by post test knowledge

| SL NO | Knowledge Aspects | Statement | Max. Score | Respondents Knowledge | | | |
|----------|---|-----------|------------|-----------------------|-----|----------|--------|
| | | | | Mean | SD | Mean (%) | SD (%) |
| I | Introduction and Definition | 4 | 4 | 2.4 | 1 | 60% | 25% |
| II | Incidence and Etiology | 4 | 4 | 2.133 | 1.1 | 53.3% | 27.5% |
| III | Risk factors and Clinical Manifestation | 5 | 5 | 4.9 | 1.4 | 98% | 28% |
| IV | Diagnosis and medical management | 6 | 6 | 4.7 | 1.1 | 78.3% | 18.3% |
| | Pharmacological and Nursing Management | 6 | 6 | 5.0 | 1 | 83.3% | 16.7% |
| combined | | 25 | 25 | 19.1 | 5.6 | 372.9 | 115.5 |

Table 14: CLASSIFICATION OF RESPONDENTS ON POST TEST KNOWLEDGE LEVEL ON PREMENSTRUAL SYNDROME

Table 5.13 reveals that the aspect wise post test knowledge of respondents regarding premenstrual syndrome. The highest means % was seen in the aspects of risk factors and clinical manifestation 98%, followed by pharmacological management ad nursing management 83.3% followed by diagnosis and medical management 78.3% followed by introduction and definition 60% and the lowest Score Mean % was with incidence and etiology 53.3%..

X. CONCLUSION

This chapter presents conclusions drawn, implications and recommendations. The aim of the study was to assess the knowledge among nursing students regarding premenstrual syndrome and to conduct STP based on knowledge of students. The STP contains definition, incidence and etiology, risk factors and clinical manifestations, diagnosis and medical management, pharmacological and nursing management which helps the students to enhance their knowledge regarding premenstrual syndrome.

The following conclusions were drawn on the basis of the finding of the study.

- The knowledge scores among most students were inadequate and moderate.

- The STP for students helps them to learn more about premenstrual syndrome.
- There was significant impact between the gain in post test knowledge scores with selected demographic variables except course of nursing.

The study paved the path to enhance the knowledge of nursing students on premenstrual syndrome.

REFERENCES

[1.] Mayo Joseph L, An introduction to premenstrual syndrome, 1997: (cited march 2013): available from: <http://www.jeffreywarber.com/hc%20pages/PMS.html>.

[2.] Well sphere, Premenstrual syndrome/ introduction, copy right:2008 sep 8 {cited 2013 march 21}; available from: <http://www.wellsphere.com/wellguide.s?articleId=295&searchString=Pms>.

[3.] Astor A, Andreoli A, Company A: Minerva psychiatry. 1994 Dec; 35(4) : 243- 53, article in Italian {cited 2013 April 2}; available from : <http://www.hse.ie/eng/health/az/P/Premenstrual-syndrome/Introduction.html>.

[4.] .Limosi F, Ades J .Encephal 2001 nov-dec; 27(6): 501-8. Article in French {cited 2013 April 2}; available from: URL;

- http://www.rightdiagnosis.com/medical/premenstrual_syndrome.htm.
- [5.] Polit Denise F, Beck Cheeryl tatano. Nursing research. Principles and methods. 7th edition. Philadelphia: Lippincott willims & wilkins.2004:P_{p-48-56,88-11}.
- [6.] Talbot A Loura. Principle and practices of nursing research. Ist edition, St Louis: Missouri; Mosby. 1995. P_{p-75,318, 367}.
- [7.] N M Bakhshani, Prevalence and severity of premenstrual syndrome among Iran university students, copy right 2009 April [cited by 2013 June 13]. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/19402278>.
- [8.] J V J oshi, Prevalence of premenstrual symptoms: premenstrual symptoms analysis, copy right 2010 Jan, {cited by 2013 June 6}. Available from: <http://www.jmidlifehealth.org/article.asp?issn=0976-7800;year=2010;volume=1;issue=1;spage=30;epage=34;aulast=Joshi;type=3>.
- [9.] D B Schatz, Premenstrual dysphonic disorder in east Asia: a review of the literature, copy right 2012[cited by 2013 may 6] available from : <http://www.ncbi.nlm.nih.gov/pubmed/23094468>.
- [10.] L M Lopez, Oral contraceptives containing drospirenone for premenstrual syndrome, 2008 Jan 23[cited by 2013 April 7] Available from: <http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD006586.pub4/abstract>.
- [11.] Marvan Luisa, Premenstrual symptamatology, somatization and physical anhedonia, copy right 1999 march [cited by 2013 June 6]. Available from: <http://www.psychosomaticmedicine.org/content/61/2/163.full>.
- [12.] Filho Roha, Essential fatty acids for premenstrual syndrome and their effect on prolactin and total cholesterol levels: a randomized, double blind, placebo- controlled study, copy right :2011 jan 17[cited by 2013 may 10]. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/21241460>.
- [13.] A M Whelan, Herbs, vitamins and minerals in the treatment of premenstrual syndrome: a systematic review, copy right 2011 july[cited by:2013 may 19]. Available from: <http://www.crd.york.ac.uk/CRDWeb/ShowRecord.aspx?ID=12010001003>.
- [14.] Bussel Gaynor, A phased dietary and life style approach for the treatment for premenstrual syndrome copy right :2013[cited by 2013 june 6]. Available from: <http://www.emeraldinsight.com/journals.htm?articleid=17083998>.