PREPARING GIRLS FOR MENARCHE

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Introduction
Adolescence is regarded as a unique phase of human development. Among adolescent girls menarche is an important landmark in the process of growth and maturation. Though menstruation is a natural and normal physiological process for all healthy adult women, as ever it has been surrounded by secrecy and myths in many societies.

Rakesh (1988) as cited by Mandal in 1994, reported that parents, especially the mothers do not educate their daughters about various aspects of menstruation such as age of its onset, its duration and healthy practices during menstruation. The girls are not motivated to take the event lightly. So, the inadequate knowledge, misconception and wrong ideas lead to undue fear, anxiety and undesirable attitudes in the minds of adolescent girls. The studies recommend a planned educational programme to enlighten young adolescent girls for healthy practices on attaining menarche.

James (1997), in a study on menstrual hygiene, reported that adolescent schoolgirls generally hadn't adequate knowledge of menstrual hygiene. Thus the present study was undertaken to identify the learning needs of pre-adolescent girls with a view to develop and evaluate a planned teaching programme on menstrual hygiene. It will help them to improve their self-care ability and follow healthy and hygienic menstrual practices.

Objectives of the study
1. To identify the learning needs of pre-adolescent girls about menstrual hygiene in terms of knowledge scores.
2. To validate a planned teaching programme on menstrual hygiene developed on basis of learning needs.
3. To determine the effectiveness of a planned teaching programme on menstrual hygiene in terms of gain in knowledge scores.
4. To determine the association between the pre-test level of knowledge of pre-adolescent girls and selected variables such as (i) educational status of the mother (ii) socio-economic status (iii) exposure to mass media.

Research Methodology
The study was based on Orem's self-care deficit theory and the nursing process. The study was conducted in two phases. The phase I aimed at identifying the learning needs of the pre-adolescent girls, using a survey approach. In 2nd phase teaching programme was planned on "menstrual hygiene", developed and evaluated. The quasi-experimental pre-test, post-test control group design was used to evaluate the planned teaching programme.

Convenient sampling technique was used for the selection of schools for both phases of the study. For the phase I, all the pre-adolescent girls from the population, fulfilling the sampling criteria and those who were present on the day of data collection were selected as the subjects. The sample size was 49. In phase II, 32 pre-adolescent girls from a selected school constituted the experimental group and an equal number of pre-adolescent girls from another selected school constituted the control group.

The data collection instrument developed and utilized was a structured knowledge questionnaire. Submitting it to seven experts ensured content validity of the tool. There was 100% agreement among the experts on the items in the knowledge questionnaire. The reliability of the tool was computed using split-half method. It was 0.97.

In phase I, the knowledge questionnaire was administered to 49 pre-adolescent girls to determine the learning needs. In phase II, the planned teaching programme on "menstrual hygiene" was developed. After obtaining consent from the girls for participation in the study, the pre-test was administered to both experimental and control group on day one, using a struc-
tured knowledge questionnaire. The PTP on 'menstrual hygiene' was conducted for the experimental group in two sessions of 30 minutes each on the same day. The post-test was conducted after eight days of teaching for both experimental and control groups.

Description of the planned teaching programme:
The draft of PTP and the visual aids along with the criteria check-list submitted to seven experts for establishing the content validity. There was 100 percent agreement on the content of PTP and visual aids among the experts. The content of the PTP was organized into 4 areas, viz.:
- female reproductive system
- menstrual cycle
- menstrual practices
- management of pain during menstruation

Major findings of the study:
1. Learning need assessment (Phase I)
The total mean percentage scores secured by pre-adolescent girls on menstrual hygiene was 23.6 percent, the mean percentage scores of different areas ranged from 23.13 percent to 31.20 percent. Among the four areas of menstrual hygiene, the lowest was in the area of 'female reproductive system'. In all areas the respondents scored less than 35 percent. This showed that the knowledge level of all subjects was inadequate in all areas of menstrual hygiene.

2. The characteristics of the sample
A majority of the mothers of the 49 subjects (in phase-I) had only school education, i.e. 51.03 percent, while 49.73 percent of the mothers of subjects in experimental group in phase-II had school education. The data regarding socio-economic status revealed that 46.87 percent of the subjects in the experimental group belonged to middle socio-economic group. Data regarding exposure to mass media revealed that there were no subjects having high exposure to mass media.

3. Association between the pre-test knowledge level of pre-adolescent girls with selected variables:
It shows that there is no significant association between pre-test knowledge scores and selected variables. It indicates that the knowledge level of pre-adolescent girls regarding menstrual hygiene is independent of the socio-economic status, educational status of the mother and exposure to mass media.

4. Comparison between the pre-test knowledge scores of experimental and control group.
Initially both experimental and control group did not differ in their level of knowledge, \( t(62) = 1.6698, p > 0.05 \). This showed that both the groups were drawn from the same population with respect to their knowledge regarding menstrual hygiene.

5. Effectiveness of the planned teaching programme in terms of knowledge gain
A Comparison between the pre-test and post-test knowledge scores of experimental group.

- Highest actual mean percentage score (81.25%) was in the area of management of pain during menstruation. Maximum modified gain was obtained in the same area i.e., 1.0
- The mean post-test knowledge score of experimental group was 23.84, which was apparently higher than the mean pre-test score, 5.5.

3. The 't' value was computed to examine whether the difference between pre-test and post-test means were significant. The result shows that the post-test mean knowledge score of the experimental group was significantly higher than the mean pre-test knowledge scores.

Discussion
The pre-adolescent girls had knowledge deficit in all four areas of menstrual hygiene. The students had a mean below 35 in all four areas. This showed that there was a need to aware the students regarding menstrual hygiene.

The PTP was found to be an effective teaching strategy. This was evident through the findings of the post-test mean knowledge scores of experimental group, which was significantly higher than that of the pre-test scores, and that of the post-test scores of the control group. These findings were consistent with the findings of Mary (1998), Aggarwal (1996) and Mandal (1994).

Implications:
The findings of this study have implications for nursing education, practice, administration and re-
There is a need for the health personnel to take an active part in preparing the pre-adolescent girls for menarche. Health education programmes on menstrual hygiene for adolescent girls help in maintaining healthy practices during menstruation.

Studies show that the failure to adequately educate girls about their own anatomy and physiology has serious implications. These responses also support the need for the menstrual education as a long-term, continuous process, beginning well before menarche. If the girls are prepared even before menarche, they will develop a positive attitude to cope up with physical and psychological changes. Further, this will enable them to develop a healthy attitude towards menstruation and thus adopt hygienic practices during menstruation.

References:

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