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A PRE-EXPERIMENTAL STUDY TO ASSESS THE EFFECTIVENESS OF HEALTH EDUCATION ON PERCEPTION AND KNOWLEDGE REGARDING PSYCHOSOCIAL PREPAREDNESS FOR MENARCHE AMONG PRE-ADOLESCENT GIRLS FROM SELECTED SCHOOL OF RURAL AREA.

Nursing

Ms. Gauri Haribhau Kale (Raut) Assistant Professor At Maharshi Karve Stree Shikshan Samstha, Sitabai Nargundkar College Of Nursing For Women, Nagpur, India.

Mrs. Asha Khobragade Guide Professor Cum Vice Principal At Kasturba Nursing College, Sewagram.

ABSTRACT

Background Of The Study: The World Health Organization defines an adolescent as someone between the ages of 10 and 19 years old. Adolescence which marks the passage from childhood to adulthood is characterized by the child's growth and development. The child's physical psychological and biological growth takes place throughout this time. **Objective Of The Study:**Assess the existing perception and knowledge regarding psychosocial preparedness for menarche among pre-adolescent girls from selected school of rural area. To associate the pre-test perception and knowledge score regarding psychosocial preparedness for menarche among pre-adolescent girls from selected school of rural area. **Material And Method:** The study was conducted in different school of rural area. Quantitative research approach was used in this study. Non-probability Convenient Sampling Technique was used to collect 70 sample. **Result:** Regarding level of perception and knowledge regarding psychosocial preparedness for menarche. The subjects in pre-test were poor but after the implementation of health education post-test score were increased. **Conclusion :** The study has conducted with the help of need of study, background of study. 70 samples were taken for the study. Demographic variables were planned for collection of data and convenient sampling technique were used. Data was analyzed and finding revealed with the structured knowledge questionnaire and perception scale.

KEYWORDS

INTRODUCTION

Menarche means the first menstrual period in a female adolescent. Menarche typically occurs between the ages of 10 and 16with the average age of onset being 12.4 years. Teenage girls in particular require specific support systems for their reproductive health issues including the early menarche.

Menstruation is a phenomenon that only affects women. It has however always been surrounded by myths and taboos that keep women from participating in many facets of sociocultural life. The subject has always been taboo in India.

The difficulty of confronting the menstrual taboos and cultural stereotypes is made even more difficult by the lack of knowledge and awareness about puberty menstruation and reproductive health among females.

Background Of The Study

The World Health Organization defines an adolescent as someone between the ages of 10 and 19 years old. Adolescence which marks the passage from childhood to adulthood is characterized by the child's growth and development. The child's physical psychological and biological growth takes place throughout this time. It is acknowledged as a unique time in a girl's life cycle that needs special consideration.

The typical age at menarche which is between 12 and 13 is largely constant among populations. Unfortunately, the issue worsens for girls due to their lack of preparation for control of their periods as well as their shyness and embarrassment.

The crucial time for biological and behavioral changes is now. They are very anxious because they are not adequately informed about the bodily changes that occur during puberty.

Need For The Study

The school going pre-adolescent females had a variety of physical health issues including mental issues. periods are dirty and 71% of adolescent girls are unaware of their periods until they reach menarche. All teenage girl experiences change during her period. Teenage females experience physical and emotional discomfort because they don't understand menstruation. Girls in Indian society do not learn enough about the physiological changes that occur in their own bodies and about menstruation

During community posting the investigator found that pre-adolescent girls. In the rural area having a lot of problem regarding psychosocial preparedness for menarche and the pre-adolescent girls were not able to cope up with the situation. Therefore, the investigator felt with own experience the need to assess the effectiveness of health education on perception and knowledge regarding psychosocial preparedness and conduct the study to educate the pre-adolescent girls to help them face problem positively.

Objectives Of The Study

1. To assess the effectiveness of health education on perception and knowledge regarding psychosocial preparedness for menarche among pre-adolescent girls from selected school of rural area.
2. Assess the existing perception and knowledge regarding psychosocial preparedness for menarche among pre-adolescent girls from selected school of rural area.
3. To associate the pre-test perception and knowledge score regarding psychosocial preparedness for menarche among pre-adolescent girls from selected school of rural area.

Assumption

Pre-adolescent girls in community may have inadequate perception and knowledge regarding psychosocial preparedness for menarche.

Health education may improve perception and knowledge regarding psychosocial preparedness for menarche.

Hypothesis

H_0: There is no significant difference between the pre-test and post-test perception and knowledge score regarding psychosocial preparedness for menarche among preadolescent girls which measured by structured knowledge questionnaire at $p<0.05$ level of significance.

H_1: There is significant difference between pre-test and post-test perception and knowledge Score regarding psychosocial preparedness for menarche among the pre-adolescent girls which measured by structured knowledge questionnaire at $p<0.05$ level of significance.

Limitations

1. The study is limited to preadolescent girls.
2. The study is limited to the rural school.
3. The study is limited to the 70 samples.
4. The study period is limited to 18 months.

Inclusion Criteria

1. Study Subjects present at the time of data collection. (Age 9 to 14 yrs.)
2. Those who are willing to participate in the study.
3. Those who can read and write Marathi or English

Exclusion Criteria

1. Those who attended educational program regarding menarche.
2. Those who are attending mass education regarding perception and psychosocial preparedness for menarche.

Review Of Literature

1. Review of literature related to knowledge regarding perception of menarche.
2. Review of literature related to perception and knowledge regarding psychosocial preparedness for menarche.
3. Review of literature related to effectiveness of health education regarding psychosocial preparedness for menarche.

RESULT

Section A: Distribution of subjects with regards to demographic variables.

Section B: Assessment of level of pre-test and post-test knowledge and perception regarding psychosocial preparedness for menarche among subjects from selected school of rural area.

Section C: Assessment of effectiveness of health education on knowledge and perception regarding psychosocial preparedness for menarche among subjects from selected school of rural area.

Section D: Association of pre-test knowledge and perception score regarding psychosocial preparedness for menarche among subjects from selected school of rural area and their demographic variables.

Assessment with level of knowledge score (n=70)

Level of knowledge	Score Range	Level of Knowledge Score	
		Pre-Test	Post-Test
Poor	0-5	9 (12.86%)	0 (0%)
Average	6-10	58 (82.86%)	0 (0%)
Good	11-15	3 (4.29%)	6 (8.57%)
Very Good	16-20	0 (0%)	64 (91.43%)
Minimum score		5	14
Maximum score		11	19
Mean knowledge score		8.04±1.53	17.15±1.26
Mean % Knowledge Score		40.21±7.68	85.78±6.34

Majority 12.86% of pre-adolescent girls in pre-test had poor level of knowledge score, 82.86% in pre-test had average, 8.57% in post-test had good and 91.43% of pre-adolescent girls in post-test had very good level of knowledge score.

Minimum knowledge score in pre-test was 5 and in post-test it was 14 and maximum knowledge score in pre-test was 11 and in pos- test it was 19.

Mean knowledge score was in pre-test was 8.04±1.53 and in post-test it was 17.15±1.26 and mean percentage of knowledge score in pre-test was 40.21±7.68 and in post-test it was 85.78±6.34.

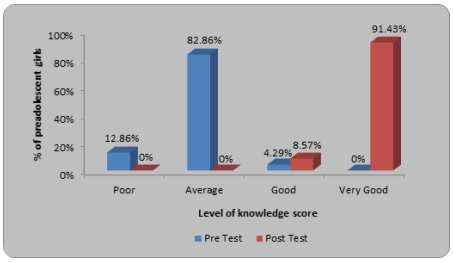
Assessment with level of perception score (n=70)

Level of perception	Score Range	Level of Perception Score	
		Pre-Test	Post-Test
Strongly Disagree	0-20%	0 (0%)	0(0%)
Disagree	21-40%	35 (50%)	0(0%)
Neutral	41-60%	35 (50%)	29 (41.43%)
Agree	61-80%	0 (0%)	40 (57.14%)
Strongly Agree	81-100%	0 (0%)	1 (1.43%)
Minimum score		19	29
Maximum score		30	49
Mean perception score		22.12±3.27	30.71±3.10
Mean % Perception Score		44.25±6.54	61.42±6.21

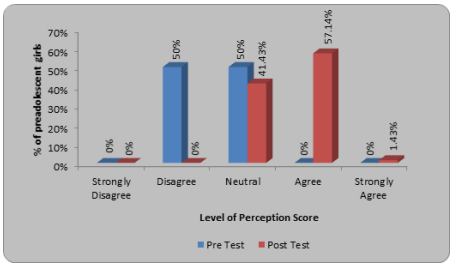
Majority 50% of pre-adolescent girls in pre-test disagreed about perception score, 50% in pre-test and 41.43% in pos-test were neutral and 57.14% of preadolescent girls in post-test were agreed about perception score.

Minimum perception score in pre-test was 19 and in post-test it was 29 and maximum perception score in pre-test was 30 and in post-test it was 49.

Mean perception score was in pre-test was 22.12±3.27 and in post-test it was 30.71±3.10 and mean percentage of perception score in pre-test was 44.25±6.54 and in post-test it was 61.42±6.21.



Assessment with level of knowledge score



Assessment with level of perception score

DISCUSSION

The finding of the study was discussed with reference to the objective state as below. The present study was undertaken as, "A pre-experimental study to assess the effectiveness of health education on perception and knowledge regarding psychosocial preparedness for menarche among pre-adolescent girls from selected school of rural area".

Post-test level knowledge regarding psychosocial preparedness for menarche the level of knowledge score was divided under following poor, average, good, very good. Majority 8.57% of the subjects had good level of knowledge score, 91.43% of the subjects had very good level of knowledge score.

In pre-test and post-test of perception score regarding psychosocial preparedness for menarche. Majority 50% of pre-adolescent girls in pre-test disagreed about perception score, 50% in pre-test and 41.43% in post-test were neutral and 57.14% of preadolescent girls in post-test were agreed about perception score. it was statistically interpreted that the health education perception and knowledge regarding psychosocial preparedness for menarche among pre-adolescent girls selected in rural area was effective

CONCLUSION

In this we used different types of variables, in this independent variable is knowledge regarding psychosocial preparedness for menarche among pre-adolescent girls. The main objective of conducting this study is to assess the pre- test, post -test knowledge and to evaluate the effectiveness of health education on perception and knowledge regarding psychosocial preparedness for menarche among pre-adolescent girls from selected school of rural area. For this research study, Quantitative research approach is used. Pre-test Post-test research design is adopted whereas Nonprobability convenient sampling technique used. The study is conducted on the sample size of 70 girls of selected school of rural area as well as structured questionnaire and perception scale is prepared for data collection.

The study concluded that Majority 12.86% of pre-adolescent girls in pre-test had poor level of knowledge score, 82.86% in pre-test had average, 8.57% in post-test had good and 91.43% of pre-adolescent girls in post-test had very good level of knowledge score.

Majority 50% of pre-adolescent girls in pre-test disagreed about perception score, 50% in pre-test and 41.43% in pos-test were neutral and 57.14% of preadolescent girls in post-test were agreed about perception score.

Recommendations

1. Formal education programmes should be conducted in all Primary health canter, Sub centres, Anganwadi, etc. regarding psychosocial preparedness for menarche
2. The study can be replicated on large subjects and on various settings, so that finding can be generalized to a large papulation

3. Such study can be carried out using teaching strategies like video assisted teaching, computer-assisted instruction on psychosocial preparedness for menarche.
4. Experimental studies can be carried on effectiveness of structure teaching on perception and knowledge regarding psychosocial preparedness for menarche.

Compliance With Ethical Standards

1. Permission was obtained from the institutional ethics committee.
2. Prior permission was to obtained from school (principal).
3. Informed written consent was obtained from the parent.
4. Confidentiality and anonymity were maintained.

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