



A STUDY TO ASSESS THE EFFECTIVENESS OF VIDEO ASSISTED TEACHING ON KNOWLEDGE REGARDING MENSTRUAL HEALTH AMONG THE ADOLESCENT GIRLS IN SELECTED AREAS OF DADRA AND NAGAR HAVELI

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Abstract : Background: Adolescence is a transitional phase of growth and development between childhood and adulthood. The world health organization (WHO) defines an adolescent as any person between ages 10 & 19. Adolescence in girls has been recognized as a special period in their life cycle that requires specific and special attention. During this stage of life, a youth undergoes rapid changes in body structure, mediated by the sex hormones. Menstruation and its practices are still clouded by taboos and sociocultural restrictions resulting in adolescent girls remaining ignorant of the scientific facts and hygienic health practices. As a result, incorrect and unhealthy behaviour during their menstruation are still observed.

Reproductive tract infection, which has become a silent epidemic that devastates women's life, is closely interrelated with poor menstrual hygiene. Globally, at least 500 million women and girls lack proper access to menstrual hygiene facilities. So, Correct knowledge and proper menstrual hygienic practices can protect the women from this suffering. Unhygienic practices and social taboos followed during menstruation are issues need to be addressed at all levels.

Aim: The aim of the study was to assess the effectiveness of video assisted teaching on menstrual health among adolescent girls.

Methodology: In this study, pre-experimental research design was used. For total 60 adolescent girls who met the sampling criteria were selected with convenient sampling technique from the selected area of DNH. The data were collected using interview method from knowledge questionnaire and attitude scale.

Results: The result revealed that a significant difference in the knowledge post-test score (27.15) is higher than the pre-test score (6.72) of adolescent girls after administering of video assisted teaching as measured by 't' test (37.76) which was highly significant at 0.00001 level of significance. There is a significant association between

socio-demographic variables that is Age, Educational status, Mother Educational qualification, Area of resident, Family income, any previous knowledge and if yes, Source of information with knowledge score at 0.05 level of significant.

Conclusion: The study proved that video assisted teaching programme is an effective teaching strategy in improving the knowledge of adolescent girls related to menstrual health. Hence, there is a need to create awareness about menstrual health among adolescent girls in community.

INTRODUCTION

Adolescence, is a transitional phase of growth and development between childhood and adulthood. The world health organization (WHO) defines an adolescent as any person between ages 10 & 19. Adolescence in girls has been recognized as a special period in their life cycle that requires specific and special attention.

In India, as per Census 2011, adolescent population (10-19) is 253.2 million. As per the census 2011, in Dadra and Nagar Haveli the adolescent population as (10-19 year) is 68 and that of the youth (15-24) is 77. ^[2] In Daman and Diu the adolescent population of (10-19) is 44 and that of the youth (15-24) is 65.

Adolescence is a phase from childhood to adulthood. During this stage of life, a youth undergoes rapid changes in body structure, mediated by the sex hormones. Menstruation occurs periodically throughout the child bearing years, except during pregnancy and lactation. Menarche often comes with anxiety, fear, confusion and depression. On the other hand, it is celebrated in some cultures and gifts are given to the young girl. Early onset of menarche has been the risk factor for breast cancer and other diseases. Menstruation and its practices are still clouded by taboos and socio-cultural restrictions resulting in adolescent girls remaining ignorant of the scientific facts and hygienic health practices, which sometimes result in adverse health outcomes. Menstrual health is an important part of life cycle approach to women's health, so it is important for all adolescent girls that they should get a loud and clear messages and services on this issue.

NEED OF THE STUDY

Today's adolescents (24%) are tomorrow's adults who are the strength of the Nation.

As Reproductive tract infection, which has become a silent epidemic that devastates women's life, is closely interrelated with poor menstrual hygiene. Globally, at least 500 million women and girls lack proper access to menstrual hygiene facilities. So, Correct knowledge and proper menstrual hygienic practices can protect the women from this suffering.

As per NFHS-5 survey results, Menstruation even as of 2020, is considered a taboo and only a few talks about it openly. As a result, most young women and adolescent girls fail to adopt proper menstrual hygiene. It is also a fact that most of them do not have access to sanitary napkins or knowledge about the methods of using them. As the Previous studies also indicate lack of knowledge about menstrual health is always being a common issue. So, it is necessary to create an awareness about it. Children, adolescents, and adults around the world lack awareness, knowledge, and understanding of menstrual health. The knowledge they do have is often tinged with misconceptions.

Hence, there is need for education and to create awareness for adolescent girls regarding pubertal changes, menarche and menstrual hygiene etc.

RESEARCH METHODOLOGY

Research methods are the techniques researchers use to structure a study and to gather and analyse information relevant to the research question.

A Pre-Experimental research study is been carried out on the 60 samples of adolescent girls between the age group of 10-19 years girls at Dadra and Nagar Haveli. As per the convenient sampling the girls were being selected and explained about the protocol and the purpose of the study and were requested to complete the structured knowledge questionnaires, as pre-test then a video assisted teaching on menstrual health was provided and a post-test was taken.

Ethical Consideration was approved by ethical committee of Directorate of Medical and Health Services, DNH.

STATISTIC ANALYSIS

The data were analysed by using Descriptive statistic to determine mean and percentage. Chi square test used to find out the association between Knowledge score and selected demographic variables.

RESULT

1. The description of demographical variables of an adolescent girl are explained in frequency and percentage distribution of the demographic variables.

Sr.no.	Socio-demographic Data	Frequency	Percentage	
1.	Age (in years)	10 – 14 years	40	66.67
		15 – 19 years	20	33.33
2.	Educational status	6 th -8 th std	33	55.00
		9 th – 10 th std	17	28.33
		11 th – 12 th std	7	11.67
		Diploma	0	0.00
		Graduation	3	5.00
3.	Type of family.	Nuclear	20	33.33
		Joint	39	65.00
		Other	1	1.67
4.	Mother educational qualification	No formal education	9	15.00
		Primary	29	48.33
		Secondary	13	21.67
		Higher secondary	8	13.33
		Graduate	1	1.67
5.	Occupation of Mother	Housewife	36	60.00
		Employed	24	40.00

6.	Religion	Hindu	60	100.00
		Muslim	0	0.00
		Christian	0	0.00
		Other, Specify.....	0	0.00
7.	Area of resident	Rural	19	31.67
		Urban	17	28.33
		Semi- urban	24	40.00
8.	Family Income....	Less than 20,000 Rs	23	38.33
		20,000 - 40,000 Rs	28	46.67
		40,000 – 60,000 Rs	4	6.67
		More than 60,000 Rs	5	8.33
9.	Any Previous Knowledge regarding menstrual hygiene	Yes	26	43.33
		No	34	56.67
10.	If Yes, Source of information	NA	34	56.67
		Relative	10	16.67
		Media	1	1.67
		Peer Group	0	0.00
		Friend	0	0.00
		School	7	11.67
		Health worker	8	13.33
❖ MENSTRUAL HISTORY				
11.	Age at menarche	8 – 9 years	3	5.00
		10 – 12 years	35	58.33
		13 – 15 years	21	35.00
		Above 15 years	1	1.67
12.	Duration of Periods in days	3 – 5 days	44	73.33
		6 – 8 days	16	26.67
13.	Any problem faced during menstruation, (Pain abdomen, Vomiting, Headache, muscle cramps)	Yes	34	56.67
		No	26	43.33
14.	What did you use during periods?	Cloth pads	14	23.33
		Sanitary pads	46	76.67
15.	How many times you change the pad in a day?	2 - 3 times	54	90.00
		4 – 5 times	6	10.00
		6 – 7 times	0	0.00

16.	Did you have a regular cycle?	Yes	32	53.33
		No	28	46.67

Table:1: Frequency and percentage wise distribution to assess the effectiveness of video assisted teaching on knowledge regarding menstrual health among adolescent girls in selected areas according to their demographic data.

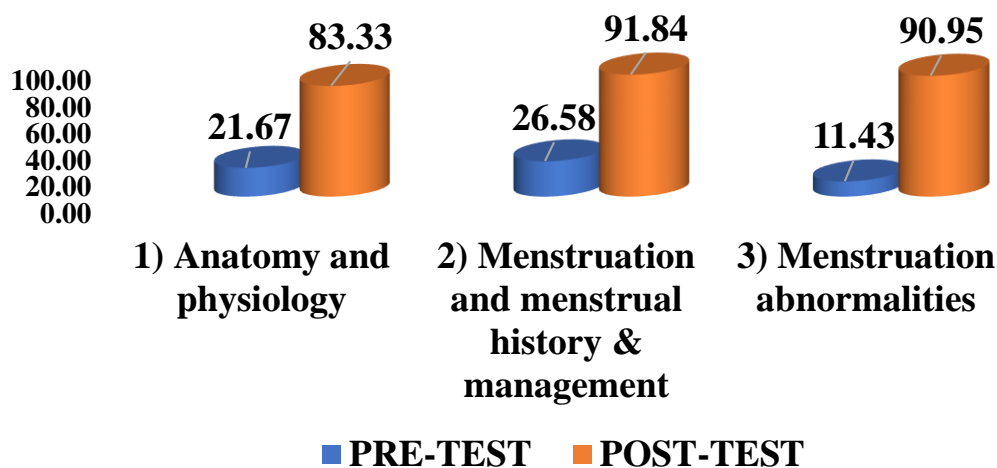
- Distribution to assess the pre-test and post-test knowledge score regarding menstrual health among adolescent girls in selected area.

Content of Knowledge questionnaire	Maximum Score	Pre-test Score			Post-test Score			Difference in mean %
		Mean	SD	Mean%	Mean	SD	Mean%	
Anatomy and physiology	4	0.87	1.049	21.67	3.33	0.914	83.33	61.66
Menstruation and menstrual history & management	19	5.05	3.285	26.58	17.45	2.094	91.84	65.26
Menstruation abnormalities	7	0.80	1.054	11.43	6.37	1.088	90.95	79.52
Overall	30	6.72	4.59	22.4	27.15	3.83	90.5	68.1

Table no.2: Area wise Mean, SD, Mean % to assess the pre-test and post-test knowledge score regarding menstrual health among adolescent girls selected area of Dadra and Nagar Haveli.

The above table shows that the mean of pre-test is 6.72, which is increased to 27.15 after post-test. The SD in pre-test and post-test are 4.59 and 3.83 respectively. Difference in mean percentage of pre-test and post-test score (68.1%) reveals that there was an increase in knowledge related to menstrual health among adolescent girls after administration of video-assisted teaching.

Area wise Mean Percentage Knowledge



3. Paired “t”-test was used to assess the effectiveness of video assisted teaching on knowledge regarding menstrual health among adolescent girls in selected area.

Content of knowledge questionnaire	Pre-test		Post-test		Mean difference	“t” value	p- value
	Mean	SD	Mean	SD			
Anatomy and physiology	0.867	1.049	3.33	0.914	2.463	16.314	0.00001 P<0.001*** (HS)
Menstruation and menstrual history & management	5.05	3.28	17.45	2.094	12.4	31.390	0.00001 P<0.001*** (HS)
Menstruation abnormalities	0.800	1.054	6.37	1.088	5.57	35.563	0.00001 P<0.001*** (HS)
Overall	6.72	4.59	27.15	3.83	20.43	37.758	0.00001 P<0.001*** (HS)

*-P<0.05, Significant and **-P<0.01 and ***-P<0.001, Highly Significant.

The obtained ‘t’ value is (37.758 > 1.671) therefore t-value is found to be higher than the table value. Hence, there is a significant difference between pre-test and post-test level of knowledge on menstrual health among adolescent’s girls. This supports that the video assisted teaching was effective in increasing the knowledge level of adolescent girls regarding menstrual health.

4. Association between the level of knowledge in pre-test and selected Demographic data.

Demographic variables	Inadequate		Moderate		X ² (df)	p-value (N/NS)
	F	%	F	%		
Age (in years):						
10 – 14 years	38	63.33	2	3.33	11.76	0.001
15 – 19 years	12	20	8	13.33	(df=1)	S
Educational status:						
6 th -8 th std	33	55	0	0	18.010 (df=3)	0.000 S
9 th – 10 th std	10	16.67	7	11.67		
11 th – 12 th std	4	6.67	3	5		
Graduation	3	5	0	0		
Type of family:						
Nuclear	16	26.67	4	6.67	0.406	0.816
Joint	33	55	6	10	(df=2)	NS
Extended	1	1.67	0	0		
Mother educational qualification:						
No formal education	9	15	0	0	32.585 (df=4)	0.000 S
Primary	29	48.33	0	0		
Secondary	10	16.67	3	5		
Higher secondary	2	3.33	6	10		
Graduate	0	0	1	1.67		
Occupation of mother:						
Homemaker	29	48.33	7	11.67	0.500	0.480
Employed	21	35	3	5	(df=1)	NS
Religion:						
Hindu	50	83.33	10	16.67	Constant	-
Area of resident:						
Rural	15	25	4	6.67	9.310	0.010
Urban	11	18.33	6	10	(df=2)	S
Semi urban	24	40	0	0		

Family income:						
Less than 20,000	22	36.67	1	1.67	9.502 (df=3)	0.023 S
20,000-40,000	23	38.33	5	8.33		
40,000-60,000	3	5	1	1.67		
More than 60,000	2	3.33	3	5		
Any, previous knowledge:						
Yes	17	28.33	9	15	10.643 (df=1)	0.001 S
No	33	55	1	1.67		
If yes, source of information:						
Relative	31	51.67	1	1.67	24.545 (df=4)	0.000 S
Media	4	6.67	6	10		
Friends	0	0	1	1.67		
School	7	11.67	2	3.33		
Healthcare worker	8	13.33	0	0		

The above table shows the association between the knowledge with Age, Educational status, Mother Educational qualification, Area of resident, Family income, any, previous knowledge, if yes, Source of information, the adolescent girls regarding menstrual health and No association was found with any other variables, in pre-test and selected demographic data.

DISCUSSION

Menstrual health is an important part of life cycle approach to women's health, so it is important for all adolescent girls that they should get a loud and clear messages and services on this issue. The aim of the study was to assess the effectiveness of Video assisted teaching on knowledge regarding menstrual health among the adolescent girls. As the result of this study shows that the mean score of pre-test knowledge was 6.72 which was increased to 27.15 in post-test. This shows that video assisted teaching was effective and the knowledge on menstrual health is increased among adolescent girls in post-test. This study is supported by the previous study that shows the effectiveness of video assisted teaching that increased the level of knowledge.

CONCLUSION

The study concludes that there was a significant knowledge gain in adolescent girls regarding menstrual health after video assisted teaching intervention. Hence, there is a need to create an awareness about menstrual health among adolescent girls in community.

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