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Menstrual Distress and Attitudes towards Menstruation During the Menstrual Cycle in Different Age Groups

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Abstract

Background

Conceptualization of menstrual phenomena, menstrual distress and attitudes towards menstruation may vary among different age groups. While data about menstrual health among urban women are widely available but comparison of tribal and urban women concerning menstrual health, there are little data available.

Objectives

This study was done to assess the attitude towards menstruation and menstrual distress among women of different age groups of women.

Methods

A prospective study was done, women Scheduled Caste, Scheduled Tribe, other caste women of Indore and Dhar district of Madhya Pradesh, India.

Results

Results indicate that mean menstrual distress scores of different age groups and phases differs significantly. 14-25 years age group of women reported more menstrual distress than other age group of women. Women reported higher menstrual attitude in premenstrual phase. Trend analysis indicates menstrual distress and menstrual attitude increases from phase to phase.

Keywords: Menstrual Distress, Attitude, Menstruation and Phases.

Abbreviations : PM : Premenstrual, DM : During Menstruation, PO : Post Menstrual, IM : Inter Menstrual.

Introduction

Menstruation (Men-Stray-Shyhn) is a woman's monthly bleeding. When you menstruate, your body sheds the lining of the uterus (womb). Menstrual blood flows from the uterus through the small openings in the cervix and passes out of the body through the vagina.

Throughout much of history, menstrual bleeding was viewed as a supernatural event. The feeling that all blood, including the menstrual flow, carried some basic life principle led to two prevalent belief that contact with menstruating women or menstrual blood could have serious consequences – both evil and beneficial. The majority of these special powers, however, were evil. In early western cultures, menstruation was believed to render a women periodically dangerous, and nemerous and varied social restrictions were created to limit her contact with her husband and with members of her community (Whelan, E. 1975)

In the Hindu faith, menstruating women are traditionally considered ritually impure and given rules to follow. During menstruation, women are not allowed to enter the kitchen and temples, sleep in the day time, bathe, wear flowers, have sex, touch other male of females or talk loudly. (Aru, Bhartiya 2013) They may not mount a horse, ox, or elephant, nor may drive a vehicle. Woman themselves are seen as impure and polluted and are often isolated as untouchables, unable to return to their family, for the length of their period. (Guterman, M 2007)

Menstrual attitudes were studied in a group of 48 Indian women using the Menstrual Attitude Questionnaire, modified and adapted for indian background, Attitudinal factors of menstruation being a natural, bothersome & debilitating event were studied, as also denial of the event & healthy/unhealthy attitudes. High rating was seen in menstruation being perceived as a natural event & learnt as a debilitating one. Older women

considered menstruation as a natural event, relating premenstrual experiences to attitudes, it was observed that distressful symptoms correlated significantly with debilitating and unhealthy attitudes. Similarly, premenstrual well-being correlated highly with naturalness attitudes, thereby suggesting that the personal experiences are likely to influence the menstrual attitudes.

Attitude towards menstruation play an important role in the perception of menstrual distress. The influence of cultural and social factors was studied in a group of 48 Indian women using the Menstrual Attitude Questionnaire. Women over 25 years of age were significantly more likely to consider menstruation as being natural. The menstrual attitude of Indian women and American women compared.

Hoerster KD, Chrisler, Rose (2003) studied sixty seven Indian women students and 61 women students who were attending England University. They assessed information about their knowledge and levels of preparedness prior to menarche, and sources of their information about the menstrual cycle. They also completed the MAQ, MDQ and a test of knowledge about the menstrual cycle. American women scored significantly higher than Indian women on the knowledge test and they also reported that they had better preparation for menarche then Indian women did. Indian women scored significantly higher than American women on the attitude subscale.

Sapkota, D., Sharma, D., et al (2013) studied knowledge and practices regarding menstruation among school going adolescents of rural Nepal and they found that 36.1% reported about menstruation, where most common informant was mother (39.3%), Dysmenorroea was the commonest problem faced during menstruation (78.7%) followed by backpain and excessive blood loss.

Erbil, N., Felek, N., Karakashi, E (2015) studied the relationship between attitude towards menarche and current attitudes towards menstruation of women and found that of 400 samples, the study results showed that women living in Ordu, province than women living in Aydin province expressed positive attitudes towards menarche and the difference was found significant.

In order to develop positive attitudes towards menarche and a women's future years of menstrual cycles, it is very important that accurate and adequate information for young girls be provides before menarche.

Borker, Samal, Bhat (2014) studied knowledge attitudes and practices regarding menstrual hygiene among rural women in Kerala, aged between 15-50 years most (76%) ladies have a positive attitudes towards menstrual hygiene.

Methods

Objectives

To find out the menstrual distress and attitudes towards menstruation among different age group of women of Madhya Pradesh.

Hypothesis

There is no significant difference between menstrual distress, attitudes towards menstruation and different age groups, phases of menstrual cycle.

Sample

Of 200 Samples, 67 scheduled caste and 66 scheduled tribe, 67 other caste women included in the study, 62 (31%) women excluded from this study, 10 (5%) women for hysterectomy, 30 (15%) due to irregular menses, 6 (3%) due to pregnancy and 6 (3%) approaching menopause, as well as those who reported use of oral contraceptive 10 (5%) were excluded. Thus the final sample was comprised of 138, of which 46 scheduled caste and 46 scheduled tribe 46 belong to other caste from Indore and Dhar district of Madhya Pradesh. Women were between the ages of 14-45 years mean age was 25.57.

The sample comprised 138 regular menstruating women who belonged to scheduled caste, scheduled tribe, other caste from Indore and Dhar District of Madhya Pradesh.

Menstrual Cycle Characteristics

	Mean	SD
Age at menarche	13.91	1.49
Length of Menstrual cycle	29.15	5.01
Days of Menstruation	4.10	1.16

Tests

Background Information Questionnaire

Column A : Subjects information about their name, age, caste, marital status, address, number of children, education, occupation.

Column B : with regard to subjects menstrual cycle history, i.e., age at menarche, length of menstrual cycle, duration of menstruation, previous date of menses etc.

Menstrual Distress

In order to measure menstrual distress of the women, the menstrual distress questionnaire (MDQ) constructed by Moos (1968, 1997, 1985). There are two forms of the MDQ. Form T is suitable for repeated assessment of women's reaction over time. As the MDQ was in English, it was translated into Hindi.

MDQ consists 47 symptoms in 8 subscales :

1. Pain
2. Water retention
3. Autonomic reaction
4. Negative affect
5. Behaviour change
6. Impaired concentration
7. Arousal
8. Control

The five point scale on the MDQ are none, present mild, present moderate, present strong, present severe There is no fixed time for filling up the MDQ, but normally women taken 10-15 minutes including the time for instructions. Higher scores reflects worse syptomatologies.

Attitude towards Menstruation

Attitude of the women towards menstruation was measured by administering Menstrual Attitude Questionnaire (MAQ) developed by Brooks Gunn and Ruble (1980), MAQ contains 33 statements in 5 subscales –

1. Menstruation as debilitating event
2. Menstruation as bothersome event
3. Positive
4. Predictable
5. Denial

As the Test was in English, it was translated into Hindi. Each item is rated on a 7 point scale (disagree strongly 1 to agree strongly 7) Higher Scores indicate more negative attitudes.

Data Collection

Menstrual distress, attitude towards menstruation were measured by administering the tools. Every sample administered in four phases of the menstrual cycle viz., premenstrual, during menstruation, post menstruation and inter-menstruation phases.

Results and Discussion

Phases of the menstrual cycle, age groups and menstrual distress, attitudes towards menstruation variable compared with the help of trend analysis and level of significance tested by t-test.

Table - 1
Comparison of Age and different Phases on Menstrual Distress

Source of Variance	Sum of Square	df	Mean Square	F-Value
Age	14876.24	2	7438.12	5.19*
Error (a)	193540.79	135	1433.64	
Phases	88000.80	3	29333.60	107.94*
Age …. phases	2769.32	6	461.55	1.70
Total	1424109.33	8265		

* P < 0.05

From Table-I, it can be observed that mean menstrual distress scores of different age groups and phases differs significantly. Thus null hypothesis is rejected. In order to know which age group and phase mean menstrual distress score is significantly from others, the data were further analysed through t-test. The results are given in Table-II.

Table-II
Age Group Wise Mean, SD and t-values for Menstrual Distress

Age Group	Mean	SD	Age Group		
			14-24	25-34	35-45
14-24 Yr.	58.83	31.17	0	-19.57	-6.61
25-34 Yr.	35.80	32.49	19.57	0	12.88*
35-45 Yr.	51.07	32.14	6.60	-12.87	0

Table-II indicates that over all analysis indicate that 14-24 years age group of women reported more menstrual distress than other age group of women. Because adolescent girls do not understand that these changes are part of the general course of natural events and they do not easily adjust with menstrual cycle, and hormonal fluctuation often are reduced in anoulatory cycles, it is reasonable to assess whether perimenstrual symptoms vary with age. Similarly Moos (1968), Woods et al, (1982) found that younger women reported more menstrual distress then older women.

Table-III
Phase Wise Mean, SD and t-values for Menstrual Distress

Phases	Mean	SD	t-values for phases			
			PM	DM	PO	IM
PM	48.57	33.13	0	-5.37	-22.13	-28.73
DM	42.41	27.30	5.37*	0	-17.40	-24.32
PO	24.67	26.50	22.13*	17.40*	0	-7.01
IM	18.24	18.12	28.73*	24.32*	7.0*	0

* P < 0.05 df = 90

Table-III indicates that phases differs significantly with relation to menstrual distress and premenstrual mean score for menstrual distress higher than other phases of the cycle. Similarly, Gruba, Rohrbaugh (1975), Parlee (1982) found that significantly phase effect on menstrual distress. Women experienced more distress in the few days before menstruation, it is only because of pressure from society to do so. Images are conjured up of distraught (and very gullible) women, either victim of their own biology or social pressure, taboo and prejudice. It may be the cause of higher menstrual distress in premenstrual phase.

Table-IV
Comparison of Age and Different Phases on Menstrual Distress

Source of Variance	Sum of Square	df	Mean Square	F-Value
Linear	80578	1	80578	296.50*
Quadratic	8.13	1	8.13	0.02
Error	110064	40	271.76	

* P < 0.05

From Table-IV, it can be observed that linear trend (f = 296.50 (1,40) P<0.05) is highly significant, it indicates that linear trend for menstrual distress is increased from phase to phase. The trend of the overall phases means is essentially linear and that there is no significant curvature.

Table-V
ANOVA for Different Age Groups and Menstrual Cycle Phase on Menstrual Attitude

Source of Variance	Sum of Square	df	Mean Square	F-Value
Age	15612.33	2	7806.16	2.15
Error (a)	489053.64	135	3622.62	
Phases	8256.78	3	2752.26	9.10*
Age X phases	3940.15	6	656.69	2.7
Error (b)	122546.58	405	302.58	
Total	14079834.74	69977		

* P < 0.05

Mean changes in phases on menstrual attitude are presented in table-IV. Phases significantly different on menstrual attitude. Thus the null hypothesis is rejected in order to know which phase mean menstrual attitude score is significantly different from others, the data were further analysed through t-test. The results are given in table VI.

Table-VI
Phase Wise Mean, SD and t-values for Menstrual Attitudes

Phases	Mean	SD	t-values for Phases			
			PM	DM	PO	IM
PM	122.57	36.94	0	-2.80	-6.41	-9.60
DM	118.98	38.54	2.80*	0	-3.54	-6.70
PO	114.43	37.09	6.41*	3.54*	0	-3.18
IM	110.38	37.1	9.60*	6.70*	3.18*	0

* P < 0.05 df = 90

Further analysis indicates that women reported higher menstrual attitude in premenstrual phase, in comparison to other phases of the cycle. Similarly, Brooks Gunn and Ruble (1982 a,b) found that post menarched Girls reported significantly more symptoms and higher menstrual attitude in premenstrual and menstrual phase than the remaining days of the cycle. In para-menstrual (premenstrual and menstrual) women reported more menstrual distress (symptoms) and previous studies indicates that significant relationship between menstrual distress and attitudes, it may be the came of higher menstrual attitude in para-menstrual.

Table-VII
Trend Analysis for Menstrual Attitude

Source of Variance	Sum of Square	df	Mean Square	F-Value
Linear	11676	1	11676	38.58*
Quadratic	7.19	1	7.19	0.02
Error	122546.58	405	302.58	

* P < 0.05

Trend analysis for menstrual attitude is presented in table-VII. It indicates that trend for menstrual attitudes is an essentially linear not quadratic. It reveals that menstrual attitude increases from phase to phase.

Conclusion

Present paper indicated that there is a relationship between age and menstrual distress. If at all, there is any one conclusion that could be drawn from this investigation is that higher menstrual distress and menstrual attitude in premenstrual phase in compare to other phases of the cycle, it also indicates that linear trend for menstrual distress, menstrual attitude are increased from phase to phase. 14-24 years age group of women reported more menstrual distress than other group of women.

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