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A Study to Assess the Effectiveness of Jacobson Progressive Muscle Relaxation Execrcise on Premenstrual Syndrome Among Adolescent Girls in Selected Higher Secondary School, Silvassa, Dadra Nagar Haveli

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ABSTRACT:

INTRODUCTION: Women are smart and savvy. Striving to live up to their potentials, they are curious about the world they live in and want to make a difference. But adolescent is a period they struggle with the issues of menstruation.

OBJECTIVE: To evaluate the effectiveness of Jacobson Progressive Muscle Relaxation Exercise on Premenstrual Syndrome among adolescent girls.

DESIGN: A quantitative approach using quasi experimental pre-test post-test design with control group. **PARTICIPANTS:** 100 adolescent girls with moderate to severe premenstrual syndrome was selected using Non probability purposive sampling technique in Government Higher Secondary School at Silvassa. **INTERVENTION:** Jacobson Progressive Muscle Relaxation Exercise was given for a period of 15-20 minutes once a day for 28 days.

TOOL: self administered modified Stainer and Wilkins PMS diagnostic criteria were used to assess the level of PMS.

RESULTS: Analysis using Paired't' test found significant.

CONCLUSION: The findings of the study revealed that Jacobson Progressive Muscle Relaxation Exercise helps in decreasing premenstrual syndrome among adolescent girls.

Keywords: Jacobson Muscle Relaxation Excersicess, Premenstrual Syndrome

INTRODUCTION:

Menstruation is a normal physiological cycle common to all females in the reproductive age group. The initiation of menstruation takes place during the early adolescence period. Nearly all women of child bearing age have some premenstrual symptoms, but those between their late 16s and early 40s are most likely to experience Premenstrual syndrome (PMS).



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The term Premenstrual syndrome was first coined by Greene and Daltonin 1953. It has been defined as "the cyclic recurrence in the luteal phase of the menstrual cycle of a combination of distressing physical, psychological, and behavioural changes of sufficient severity to result in deterioration of interpersonal relationships and or interference with normal activities.

The physical symptoms of premenstrual syndrome includes breast engorgement, breast tenderness, abdominal bloating, constipation or diarrhea, acne, headache, fluid retention, weight gain, clumsiness, nausea and vomiting, heart palpitation, appetite change, fatigue, muscle aches. The psychological and behavioural symptoms of premenstrual syndrome are depression, anxiety, panic attack, insomnia, irritability, outbursts of anger, hostility, food craving (salt and sugar), mood swings, inability to concentrate, memory loss, withdrawal from other people, confusion, lethargy and fatigue.

These symptoms are present during the last week of the luteal phase and remit within the first few days of menses and are absent during the week following menses. Women may begin to experience premenstrual syndrome symptoms at any timeduring their reproductive years.

STATEMENT OF THE PROBLEM

"A STUDY TO ASSESS THE EFFECTIVENESS OF JACOBSON PROGRESSIVE MUSCLE RELAXATION EXECRCISE ON PREMENSTRUAL SYNDROME AMONG ADOLESCENT GIRLS IN SELECTED HIGHER SECONDARY SCHOOL , SILVASSA, DADRA NAGAR HAVELI."

OBJECTIVES

- 1. To assess the pretest and posttest level of premenstrual syndrome among adolescent girls in control and experimental group.
- 2. To determine the effectiveness of Jacobson muscle relaxation therapy on premenstrual syndrome among adolescent girls in experimental group.
- 3. To find out the association between the level of premenstrual syndrome among adolescent girls with the selected demographic variables in control and experimental group.

HYPOTHESES

- **H1:** The mean posttest score of premenstrual syndrome is significantly lesser than the mean pretest score of premenstrual syndrome among adolescent girls in experimental group.
- H2: The mean posttest score of premenstrual syndrome is significantly lesser in experimental group than the mean posttest score of premenstrual syndrome among adolescent girls in control and experimental group.
- **H3:** There is a significant association between the level of premenstrual syndrome with the selected demographic variables in control and experimental group.

ASSUMPTIONS

- Majority of the adolescent girls who attained menarche have premenstrualsyndrome.
- It is possible to relieve the premenstrual syndrome by Jacobson muscle relaxation Exercise.

METHODOLOGY

RESEARCH APPROACH	Quantitative Research Approach
RESEARCH DESIGN	Experimental Research design



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	(quasi experimental pre test post test design with control group)		
DATA COLLECTION AREA	Selected higher secondary school ,DNH,Silvassa		
TARGET POPULATION Adolescent girls with Premenstrual syndrome			
SAMPLE SIZE	14-17 years girls from selected HigherSecondary School,		
	DNH, silvassa.		
SAMPLING TECHNIQUE	Non probability purposive sampling technique		

DATA ANALYSIS AND INTERPRETATION

Section –I: Frequency and Percentage wise distribution of samples based on their demographic variables. **Section-II:** Pretest Posttest means score of premenstrual syndrome in control and experimental group.

INCLUSION	Adolescent circle with Mederate to severe degree of any monetry of surdness											
INCLUSION	Adolescent girls with Moderate to severe degree of pre-mensurual syndrome.											
CRITERIA	Adolescent girls are studying 9^{m} , 10^{m} , 11^{m} & 12^{m} .											
	Adolescent girls are free from complications such as menorrhagia ,											
	oligomenorrhoea, fibroid cramping, etc. Understand or speak both English and Gujrati those adolescent school girls who are willing to participate. those adolescent school girls are present during the period of data collection. Girls with Mild degree of premenstrual syndrome.											
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	those adolescent school girls who are willing to participate. those adolescent school girls are present during the period of data collection.											
	those adolescent school girls are present during the period of data collection.											
EXCULSION	KCULSION Girls with Mild degree of premenstrual syndrome.											
CRITERIA	Girls have any other medical disorders such as thyroidism , leukemia, endocrine											
	disorders etc., psychiatric illness like major depression, phobic disorders,											
	psychotic disorders etc., and gynecological problems like puberty menorrhagia											
	, polycystic ovarian syndrome, androgen excess disorders etc.											
	, polycystic ovarian syndrome, androgen excess disorders etc. Girls are taking selective serotonin reuptake inhibitors, hormonal birth control											
	Girls are taking selective serotonin reuptake inhibitors, hormonal birth control medicine, warfarin etc.											
	Girls are regularly doing exercise or yoga											
VADIARI E.	Sins are regularly doing excretise of yogu.											
<u>VARIADLE.</u> DEDENDENT	Dromonstruol syndromo											
DEPENDEN I	Premensular syndrome											
VARIABLE	Jacobson Progressive Muscle Relaxation Exercise											
INDEPENDENT												
VARIABLE												
DATA												
COLLECTION												
TOOL	 Socio- demographic variables 											
	 Premenstrual syndrome scale(PMSS) 											
SECTION-I												
SECTION – II												
	1											

Section-III:

- Distribution of samples based on level of premenstrual syndrome in control and experimental group.
- Comparison of posttest mean scores of premenstrual syndrome between the control and experimental group.



Section – IV:

- Association between pretest levels of premenstrual syndrome in control group and demographic variables.
- Association between pretest levels of premenstrual syndrome in Experimental group and demographic variables.

SECTION - I

Table-4.1.1: Frequency and percentage wise distribution of samples based on thedemographic variables in control and experimental group.(n=100)

Demographic	Experi	mental		Control
Variables	Gr	oup		Group
1.Standard	Frequency	Percent	Frequency	Percent
a. 9 th std	0	0.00	0	0.00
b. 10 th std	21	42.00	24	48.00
c. 11 th std	27	54.00	24	48.00
d. 12 th std	2	4.00	2	4.00
2.Religion				
a. Hindu	48	96.00	45	90.00
b. Muslim	2	4.00	5	10.00
c. Christian	0	0.00	0	0.00
d. Others	0	0.00	0	0.00
3. Type of family				
a. Nuclear family	44	88.00	45	90.00
b. Joint family	6	12.00	5	10.00
c. Extended family	0	0.00	0	0.00
d. Other	0	0.00	0	0.00
4. Type of residence				
a. Urban	43	86.00	42	84.00
b. Rural	7	14.00	8	16.00
5.Diet				
a. Vegetarian	28	56.00	24	48.00
b. Non vegetarian	22	44.00	26	52.00
6.Weight (in kg)				
a. Below 30 kg	0	0.00	0	0.00
b. 31-35 kg	1	2.00	1	2.00
c. 36-40 kg	12	24.00	12	24.00
d. 41-45 kg	22	44.00	21	42.00
e. 46-50 kg	5	10.00	6	12.00
f. Above 50kg	10	20.00	10	20.00
7. Educational status of the	mother			
a. Professional degree	0	0.00	0	0.00
b. Graduate or postgraduate	3	6.00	2	4.00



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c. Intermediate or post high								
school diploma	0	0.00	0	0.00				
d. High school certificate	0	0.00	0	0.00				
e. Middle school certificate	35	70.00	31	62.00				
f. Primary school certificate	7	14.00	10	20.00				
g. Illiterate	5	10.00	7	14.00				
8.when you attained menarc	che							
a. <12 years	4	8.00	5	10.00				
$b. \ge 12$ years	46	92.00		90.00				
	_		45					
9. Frequency of menstrual c	ycle	ſ						
a. 26-28 days	28	56.00	32	64.00				
b. 29-31 days	9	18.00	10	20.00				
c. 32-34 days	7	14.00	6	12.00				
d. Above 35 days	6	12.00	2	4.00				
10. How many days you hav	e menstrual flo	W						
a. 2-4 days	16	32.00	20	40.00				
b. 5-7 days	34	68.00	30	60.00				
c. 8-10 days	0	0.00	0	0.00				
11.Family history of premer	nstrual syndron	ne						
a. Present	32	64.00	34	68.00				
b. Absent	18	36.00	16	32.00				
12.How many days you have	12.How many days you have premenstrual syndrome							
a. 1-3 Days	6	12.00	5	10.00				
b. 4-6 days	40	80.00	40	80.00				
c. 7-10 days	2	4.00	3	6.00				
d. >10 days	2	4.00	2	4.00				

SECTION - II

Table-2.1 : Posttest means score of premenstrual syndrome in control and experimental group.

							(N=100)
Premenstrual syndrome	Max score	Control -post test scores			Experii	nental post	test score
		Mean	SD	Mean%	Mean	SD	Mean%
Physical	55	30.74	6.83	5.89	19.32	2.49	35.13
Psychological	45	26.56	7.11	59.02	15.72	3.32	34.93
Behavioral	45	27.12	6.42	60.27	15.32	2.04	34.04
Psychosocial	30	18.76	4.98	62.53	10.2	1.68	34.00
Overall	175	103.18	25.35	58.96	60.56	9.53	34.60



SECTION - III

Table-:3.1 Distribution of samples based on level of premenstrual syndrome in control and experimental group.



Table – 3.2 : comparison of pre test and post test mean score of premenstrual syndrome in control group.

(n - 50)

			(11=50)				
Group	Pre te	est	Post t	est	Mean	"t"	P value
	Mean	SD	Mean	SD	difference	value	
Control	102.24	20.73	103.18	25.35	0.94	0.775	0.442
Group							

Table – 3.3 : comparison of pre test and post test mean score of premenstrual syndromein experimental group. (n=50)

Group	Pre t	est	Post test		Mean	"t"	P value
	Mean	SD	Mean	SD	Difference	value	
experimental	118.5	29.35	60.56	9.53	57.94	15.02	<i>≤</i> 0.001***
group							

P<0.001*** - Highly significant

Table –3.4: Comparison of post test means score of premenstrual syndrome between The contr	:ol
and experimental group. $(n = 100)$	

Control group Experiment		ntal group	al group Mean			
post test pos		post	test	Difference		P value
Mean	SD	Mean	SD	42.62	14.421	P<0.001***



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103.18	25.35	60.56	9.53		

P<0.001*** – Highly significant

SECTION-IV

Table- 4.1: Association between pretest levels of premenstrual syndrome incontrol group and demographic variables. (n=50)

conveys the association between pretest levels of premenstrual syndrome in control group and demographic variables. The above findings concludes that there is an association between pretest level of premenstrual syndrome in control group with the selected demographic variables such as religion and age at menarche. Hence, the researcher accepts the research hypothesis (H3).

Table-4.2: Association between pretest levels of premenstrual syndrome in experimental group and demographic variables. (n=50)

conveys the association between pretest levels of premenstrual syndrome in experimental group and demographic variables. The above findings concludes that there is an association between pretest means score of premenstrual syndrome in experimental group with the selected demographic variables such as Education status of the mother . Hence, the researcher accepts the research hypothesis (H3).

DISCUSSION:

- Most of the adolescent girls have moderate, severe and very severe level of premenstrual syndrome.
- After the practice of Jacobson muscle relaxation exercise, level of premenstrual syndrome has decreased significantly in experimental group.
- The findings indicate that, Jacobson muscle relaxation excercise can be administered to the school going adolescent girls in reducing the level of premenstrual syndrome since it is affordable, comfortable and effective without any side effects.
- After the completion of the study, subjects in control group were taught about the Jacobson muscle relaxation excercise.

REFERENCES:

- 1. Adle Pilliteri.(2007)., "TEXT BOOK OF MATERNAL AND CHILD HEALTH NURSING"., (2nd ed)., New York: JB Lippincott Publication., Pg No:865-867.
- 2. Ann Marriner Tomey, Martha Raile Alligood. (2006)., "NURSING THEORISTS AND THEIR WORK" ., (6th ed), Missouri; Mosby publication., Pg No: 55-57.
- 3. Basavanthappa, B.T.(2003)., "NURSING RESEARCH"., (1St ed), New Delhi: Jaypee brothers medical publishers (pvt) Ltd., Pg No: 365-387.
- 4. Baskar Rao K., N.N. Roy Chowdhury.(1994)., "CLINICAL GYNAECOLOGY"., (3rd ed), Madras: Orient Longmann Ltd., Pg No: 87
- 5. Dorothy etal. (1995)., "FOUDAMENTALS OF NURSING RESEARCH", (2nd ed), USA: Jones and Bartlett publication.401-403.
- 6. Dutta. D.C.(1994)., "TEXT BOOK OF GYNAECOLOGY INCLUDING PERINATOLOGY AND CONTRACEPTION"., (2nd ed), Calcutta: New Central book agency (Pvt) Ltd., Pg No: 423
- 7. Gupta, G.S.Kappor. (1990)., "FUNDAMENTALS OF MATHEMATICAL STATISTICS"., New



Delhi: Sultan Chand publication

- 8. Kothari, C.R.(2004)., "RESEARCH METHODOLOGY METHODS AND TECHNQUES"., (2nd ed), New Delhi: New age International (p) Ltd publication., Pg No: 34-39.
- 9. Mahajan, B.K. (1991)., "METHODS IN BIOSTATISTICS"., (5th en), New Delhi: Jaypee Brothers medical publishers., Pg No:45-47.
- 10. Nancy Burns, Susan, K. Groove. (2005)., "THE PRACTICE OF NURSING RESEARCH"., (5th ed), Missouri: Elsevier Saunders publications., Pg No:223-226.
- 11. Polit and Beck. (2004)., "NURSING RESEARCH PRINCIPLES AND METHODS"., (7th ed), philadelphia: Lippincott Williams and Wilkinscompany., Pg No: 281-285.
- 12. Polit, F. Denise Hungler. (2001) "NURSING RESEARCH PRINCIPLES AND METHODS"., (5th ed), Philadephia: J.B. Lippincott publication.
- 13. Potter and Perry.(2001)., BASIC NURSING THEORY AND PRACTICE., (5th ed), Missouri: Mosby publications., Pg No: 365
- 14. Roger P. Smith.(2002)., "NETTER'S OBSTETRICS GYNAECOLOGY AND WOMEN'S HEALTH"., (1st ed), New Jersey: Icon learning systems.
- 15. Sundar Rao, P.S.S. and Richard. (2004)., " AN INTRODUTION TO BIOSTATISTICS"., (3rd ed), New Delhi: Prentice Hall of India Private Ltd.,Pg No: 113-119.
- 16. V.G.Padubidri, Shirish N. Daftary.(1996)., "SHAW'S TEXT BOOK OF GYNAECOLOGY"., (11th ed), New Delhi: B.I. Churchill Livingstone (Pvt) Ltd.
- 17. V.L.Bhargava.(1993)., "TEXT BOOK OF GYNAECOLOGY AND OBSTETRICS"., (1st ed),New Delhi: Golgotia publications (Pvt) Ltd.
- Wesley, L.Ruby. (1992)., "NURSING THEORIES AND MODELS"., (2nd ed), Pennsylvania : Spring House publication.