



ISSN: 2456-0057

IJPNPE 2019; 4(1): 1842-1844

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www.journalofsports.com

Received: 20-11-2018

Accepted: 22-12-2018

Navneet Kaur

Research scholar, Department of
Physical Education (T), Guru
Nanak Dev University,
Amritsar, Punjab, India

Sahil Preet Bedi

Research scholar, Department of
Physical Education (T), Guru
Nanak Dev University,
Amritsar, Punjab, India

Comparison of menstrual attitudes among active and inactive female university students

Navneet Kaur and Sahil Preet Bedi

Abstract

The primary aim of the study was to compare the menstrual attitudes among physically active and non active female university students. A sample of 60 female students was purposively selected from Guru Nanak Dev University Amritsar. The subject's menstrual attitudes were measured with the help of Menstrual Attitude Questionnaire. Body Mass Index (BMI) was calculated from the height and weight measurements of the subjects. Independent samples t-test revealed that the physically active females had significantly higher levels of menstrual attitudes ($p=0.013$) than the physically non active females.

Keywords: Physically active females, physically inactive females, menstrual attitude, body mass index

Introduction

Menstruation cycle is the most natural and integral part of a women life. Periods do not only affect the psychological factor but also give affect on physiological aspects of a woman and environment also plays an important role on the Menstruation cycle of a woman health. The menstruation cycle is governed by hormones that vice and fall, influencing the various physical sensations and emotional change that women experiences for several days mostly before the menstruation and sometime during the first few days of the flow. Women's standing during a explicit society which society's cultural beliefs regarding women's bodies form women's attitudes toward and experiences with their expelling cycles [1, 2]. Social psychologists have developed an outsized literature on the measurement of angles and techniques for attitude modification however they need been criticized for his or her basic cognitive process to such matters as however attitudes area unit shaped and therefore the social context during which they're shaped and maintained [3]. Most of females there is a need for behavioural change so as to develop the right attitude for safeguarding menstrual health. It may also assist in acquiring skills for appropriate management of symptoms and to lead a normal active life [4]. It is often reported that, the way females perceive menstruation has an effect on their own body image, gender identity, self- acceptance, symptoms attribution sexual and health behavior [5, 6]. Generally, women dislike menstruation because of the related symptoms that includes, feeling of discomfort in tolerance at the sight of blood flow and the relative restrictive performances [7, 8]. However, ethnic differences are observed in the attitude towards menstruation. Attitudes and beliefs about menstruation are found to be either positive or negative, with the majority of the literature reporting that both men and women hold mostly negative attitudes towards menstruation [6]. These negative attitudes include feeling embarrassed, seeing menstruation as annoying, disabling and as having prescriptions (certain things that women should do while they are menstruating) and proscriptions (certain things that women should not do while they are menstruating). In western culture, women also tend to view monthly menstruations as disgusting or shameful and ensure that a level of secrecy surrounds menstruation. Furthermore, negative attitudes also include seeing menstruation as a monumental physical and psychological burden that women have to bear. For example, the belief that menstruation affects the performance of women may lead to a restriction of women's opportunities in society, and may also result in many women to detaching themselves from their responsibilities. This belief could be an important source of discrimination against women and a form of social control that could further affect women's attitudes towards menstruation negatively.

Correspondence

Navneet Kaur

Research scholar, Department of
Physical Education (T), Guru
Nanak Dev University,
Amritsar, Punjab, India

The present study, therefore, aims to evaluate the level of attitude toward the menstrual cycle among the university students and to compare the level of the menstrual attitudes between the active and non active females.

Methodology

The research sample being used was descriptive survey research comparing chosen physically active and non active females in Guru Nanak Dev University, Amritsar Punjab India. The study was delimited to the age group 20 to 25 years. By applying purposive sampling technique, a total of 60 females (30 active and 30 non active) were selected. The physically active group consists of females doing at least 2-4 hours daily physical activity besides the household work, whereas the non-active group consists of females with no physical activity in the daily routine. The variable for the study was menstrual cycle; menstrual attitude questionnaire developed by Brooks and Ruble [9] was administered among the subjects. Menstrual attitude questionnaire consists of 33 items.

Statistical Analysis

Statistical analyses were performed using SPSS version 16.0 for windows (SPSS Inc, Chicago, IL, USA). The data was

presented as descriptive statistics such as mean, standard deviation. Independent samples t-test was used to compare the active and non active female students on menstrual attitude. Significance levels were set at $p < 0.05$.

Results

Table 1 and fig. 1 represents the mean and standard deviation of demographic data of physically active and physically non active female students. Age of physically active females ranged from 18-25 with 21.30 mean and standard deviation is 1.64 whereas the mean value of age of non active females is 21.06 and standard deviation 1.51. Mean height of physically active female participants is 163.01 with 5.31 standard deviation whereas the mean height physically non active female participants is 160.56 with standard deviation of 4.93. Mean value of weight of physically active females is 53.16 and standard deviation is 5.40 whereas mean value of physically non active female students in relation to weight is 52.66 with standard deviation 7.04. By gathering height, weight and age data, BMI (Body Mass Index) was also calculated. Mean value of BMI is 19.94 and standard deviation is 1.64 in physically active females whereas mean value of BMI in physically non active females is 20.43 and 2.66 is the value of standard deviation.

Table 1: Distribution and demographics of subjects

Variables	Physically Active Female (N=30)	Physically Non Active Female (N=30)
Age (yrs)	21.30	21.06
Height (cm)	163.01	160.5
Weight (kg)	53.16	52.66
Body Mass Index (kg/m ²)	19.94	20.43

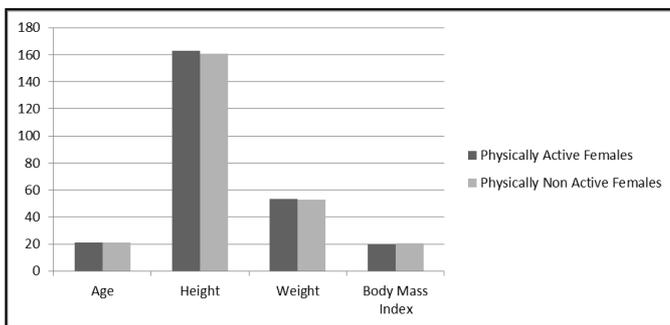


Fig 1: Graphical depiction of demographic data of physically active and physically non active females.

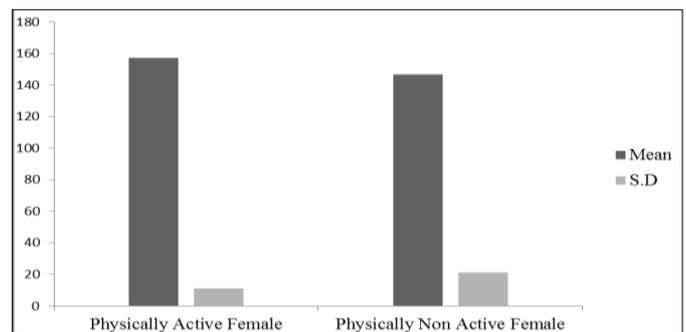


Fig 2: Graphical representation of mean and SD of physically active and non active females in relation to the menstrual attitude level.

Table 2: Descriptive and Inferential statistics of physically active and physically non active females in relation to the menstrual attitude level

Variables	(n=60)		P- Value
	Mean	S.D	
Physically Active Female	157.33	11.15	0.013*
Physically Non Active Female	146.90	21.28	

* Indicates $p < 0.05$

Table 2 and fig. 2 presents the mean values and standard deviation among physically active and non active female students on the menstrual attitudes. The mean score of physically active females on menstrual attitude is 157.33 and standard deviation is 11.15. The mean score of non active females on the variable menstrual attitude is 146.90 and standard deviation score is 21.28. The independent samples t-test revealed that the physically active females had significantly higher mean score ($p < 0.05$) on menstrual attitudes as compared to the physically non active females.

Discussion

Some women athletes stop having a period. These hormones also regulate the women period. Intense exercise and extreme thinness can reduce the level of these hormones enough to prevent or stop the monthly cycle. Athlete amenorrhea is often seen in sportswomen that stress or result in thinness. Most of the athlete women face some severe problems reasons behind it shows the negative attitude toward the menstrual cycle. Sometime prostaglandin can cause nausea, vomiting, headaches, backaches and severe cramps when you have your periods. With regard to information, perceptions of feelings for high information sources (mothers, older sisters, and female friends) became less positive over grades at the same time that symptom reports are increasing [10]. Perhaps these sources "change their tune" once a girl has had some experience with menstruation. That is, it seems reasonable that the positive aspects would be emphasized for females approaching or experiencing the changes of puberty. Later, however, conversations may shift to sharing both positive and

negative aspects of menstruation. As females have more experience, they show both positive coping responses, as reflected in feeling more comfortable and less concern about normalcy and embarrassment, but also more negative feelings and symptoms. With age, females learn more from media and health sources and perceive them as positive. At the same time, female sources, the most frequent informational source at all age levels, are perceived as less positive with age. The physically active female had a significantly higher negative attitude toward the menstruation cycle than the physically non-active females. These findings are in line with the traditional values with those reported by Brooks and Ruble ^[9] on the menstrual-related belief and behaviour during early adolescence. These results are supported by other studies that have shown earlier attitudes and knowledge about the menstruation does affect reported menstrual experience. Previous negative attitudes expectations were related to severe symptomatology. Learning more male sources, which is rated as quite negative, also related to higher levels of symptoms. In conclusion, the development of menstrual attitude and behaviours is a complex interplay of cultural beliefs, socialization factors and experience.

Conclusion

In conclusion, the development of menstrual attitude is a complex interaction of cultural values, socialization factors and experience. The results indicate that physically active females had higher mean values on menstrual attitude variable than the physically non active females.

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