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A Study to Assess the Effectiveness of Video Assisted Teaching Programme on Knowledge and Attitude Regarding Usage of Menstrual Cup among Adolescents Studying at BVVS High School Bagalkot

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Abstract **Original Research Article**

Background: A menstrual cup is a type of reusable feminine hygiene product. It's a small, flexible funnel-shaped cup made of silicone that you insert into your vagina to collect blood. Cups can hold more blood than other methods, you can wear a menstrual cup for 6 to 12 hours. ***Method*:** The present study is a pre-experimental: among 50 adolescent girls, using disproportional stratified random technique. The data was collected by using the structured close ended knowledge questionnaires. The data was analyzed by using descriptive and inferential statistical in terms of mean, frequency distribution, percentage, paired t test, wilcoxon signed rank test and chi square test. ***Results:*** In pre test revels that out of 50 adolescent girls, highest pretest, (84%) had moderate knowledge (6%) of adolescent girls had good knowledge, (10%) had poor knowledge. In post revels that (84%) highest posttest adolescent girls had good knowledge (16%) had moderate knowledge, none of had poor knowledge. In attitude score (86%) highest pretest of adolescent girls had moderate attitude (10%) had low attitude, (4%) had adequate knowledge. In post test score highest (90%) adolescent girls had adequate attitude, (10%) adolescent girls that moderate attitude, (0%) had low attitude, in posttest attitude score of adolescent girl no one had a low attitude. ***Conclusion*:** The study provides that video assisted teaching programme on knowledge and attitude regarding usage of menstrual cup among adolescent girls was scientified.

Keywords: Adolescent girls, knowledge, attitude, VATP, effectiveness, and socio demographic variables, menstrual cup.

INTRODUCTION

Puberty is the time in life when a boy or girl becomes sexually mature. It is a process that usually happens between ages 10 and 14 for girls and ages 12 and 16 for boys. It causes physical changes and affects boys and girls [1]. When your body reaches a certain age, your brain releases a special hormone that starts the changes of puberty. In girls, FSH and LH target the ovaries, which contain eggs that have been there since birth. The hormones stimulate the ovaries to begin producing another hormone called estrogen. Oestrogen, along with FSH and LH, causes a girl's body to mature and prepares her for pregnancy. System that repeats monthly from menarche (i.e., the first menstrual bleed during puberty) to menopause, allowing fertilization and pregnancy. Starting with the first day of menses and ending with the day before the subsequent bleeding onset, the average cycle length is 28 days [2].

There are four main phases of the menstrual cycle. 1) Menstruation is commonly known as a period. When you menstruate, your uterus lining sheds and flows out of your vagina. Your period contains blood, mucus and some cells from the lining of your uterus. The average length of a period is three to seven days. 2) The follicular phase: The follicular phase starts on the first day of your period and lasts for 13 to 14 days, ending in ovulation. The pituitary gland in the brain releases a hormone to stimulate the production of follicles on the surface of an ovary. Usually, only one follicle will mature into an egg. This can happen from day 10 of your cycle. During this phase, your uterus lining also thickens in preparation for pregnancy. 3) Ovulation: Ovulation is when a mature egg is released from an ovary and moves along a fallopian tube towards your uterus. This usually happens once each month, about two weeks before your next period. Ovulation can last from 16 to 32 hours. It is

possible to get pregnant in the five days before ovulation and on the day of ovulation, but it's more likely in the three days leading up to and including ovulation. Once the egg is released, it will survive up to 24 hours. If sperm reaches the egg during this time, you may get pregnant. 4) The luteal phase: After ovulation, cells in the ovary (the corpus luteum), release progesterone and a small amount of estrogen [3].

A menstrual cup is a type of reusable feminine hygiene product. It's a small, flexible funnel-shaped cup made of rubber or silicone that you insert into your vagina to catch and collect period fluid. Cups can hold more blood than other methods, leading many women to use them as an eco-friendly alternative to tampons. And depending on your flow, you can wear a cup for up to 12 hours. Available brands of reusable cups include the Keeper Cup, Moon Cup, Lunette Menstrual Cup, Diva Cup, Lena Cup, and Lily Cup. There are also a few disposable menstrual cups on the market, such as the Instead Soft cup. You can wear a menstrual cup for 6 to 12 hours, depending on whether or not you have a heavy flow. This means you can use a cup for overnight protection. You should always remove your menstrual cup by the 12-hour mark. If it becomes full before then, you'll have to empty it ahead of schedule to avoid leaks [4]. The menstrual cup is a reusable, non-toxic, and non-allergic silicone device that can be used to capture menstrual fluids made up of silicon that is non-allergic and not toxic. After insertion of the menstrual cup, it opens in an oval shape and has to be positioned between the posterior fornix and pubic bone, covering the cervix. To remove it, a finger has to be hooked over the rim behind the pubic bone. Menstrual cups have been available for decades, but their use remains limited. Despite its safety, eco-friendliness, affordability, and durability, several barriers to adoption persist. Thus, this study was conducted with the primary objective to assess the adaptability of menstrual cups by examining the level of satisfaction among sexually active women [5].

Menstrual cups greatly reduce the waste generated from menstrual cycles as it is reusable, unlike sanitary pads and tampons. Hence, it is more eco-friendly. Since it can be used for five or more years, it's more economical too. Menstrual Hygiene Management (MHM) is an integral part of the Swacha Bharat Mission Guidelines (SBM-G). The MHM Guideline is issued by the Ministry of Drinking Water and Sanitation to support all adolescent girls and women. According to it, the sanitary waste should be wrapped in leak proof pouches provided by producer and should be disposed with dry waste at the time of door-to-door collection [6].

Nowadays, manufacturers make these products out of soft, pliable, sterilized, and easy to clean medical-grade materials, such as silicone, rubber, latex, and elastomer. Menstrual cups have become increasingly popular, thanks to the fact that a person can reuse them. They are also durable and can last for approximately 10 years. Many individuals see menstrual cups as an eco-friendly product. Those who are committed to reducing waste created by the plastic, non-recyclable, and non-biodegradable materials present in disposable pads and tampons are choosing them over other menstrual hygiene products [7]. Menstrual cups are safe, menstrual cups are generally considered safe by the medical community. Risks are minimal and include irritation, infection, and rarely, TSS.You can minimize risks by following directions to ensure you're using a menstrual cup correctly [8**]**.

MATERIALS AND METHODS

The research design adopted for this study was pre-experimental one group pre-test –post-test without control group design. Here one experimental group of students was selected without randomization and no control group is used. A pre – test was conducted among adolescent girls using self structured questionnaires on menstrual cup. Intervention was given in the form of video assisted teaching programme on menstrual cup among adolescent girls.

Study design: A Disproportional stratified Random sampling technique was adopted to select the sample for the present study.

Setting of the study: The present study is Adolescent girls studying in BVVS High School Bagalkot.

Participants: In the present study participant were adolescent girls studying in BVVS high school Bagalkot. The sample consisted of 50 adolescent girls. They were selected using Disproportional stratified random sample technique.

Instruments: A Disproportional stratified random sample technique was conducted among adolescents with the sample size of 50 by using Disproportional stratified random sample technique. The data was collected by self-structured questionnaires for knowledge and attitude scale.

Description of data collection instruments

Part 1: It consists of 8 items regarding the socio-demographic information of the subject such as age, educational status of the mother, educational status of the father, Educational level of the adolescent girls, Religion, Place of residence, Family monthly, Source of information.

Part 2: Data was collected by means of self-administer questionnaires with the use of structured close ended knowledge and attitude questionnaires. It consists of 20 knowledge items related to menstruation and menstrual cup and 20 attitude questionnaires. These items were closed ended multiple choice questions. A seeking system developed for the item each correct answer is

assigned a score of one wrong answer of score zero. Total score is 20.

- Part A: Questionnaires on menstruation 1-10
- Part B: Questionnaires on menstrual cup 11-20
- Attitude questionnaires related to menstrual cup 1-20

Data Collection Procedures: The present study data collection is gathering information needed to address the research problem. Prior to actual data collection, the investigator obtained permission from Principal, BVVS High School Bagalkot. The main study was conducted from 29/04/2024 to 06/05/2024 among 50 adolescences studying at BVVS high school Bagalkot, and the aim of the study was explained to the participants. They were asked questions in Kannada and other languages understandable to them.

Variable under study: The study variables for the present study were assessment the knowledge and attitude level of menstrual cup among adolescent girls.

Sociodemographic Variables: Socio demographic Variables are Age, education status of mother, educational status of father, educational level of adolescent girl, religion, place of residence, family income per month, source of information.

Statistical analysis: The obtained data were statistically examined in terms of the objectives of the study using inductive statistics. A master sheet was prepared with responses given by the study participants. Frequencies and Percentage was used for the analysis of demographic data. The mean and standard deviation was used as inferential statistics. The Chi Square(x^2) test was used to determine association between pre test and post and to find effectiveness of assisted teaching programme, and association between post test knowledge score and attitude score.

Ethical Approval: A certificate of ethical permission was obtained from ethical committee of the institution and written consent was taken from each participant.

RESULTS

PART 1: Description of socio demographic characteristics of adolescent girls.

Percentage wise distribution of adolescent girls according to their age group revels that out of 50 subject, higher percentage (54%) adolescent girls in the age group of 15 years, (30%) of adolescent girls in the age group 14 years, (16%) adolescent girls in the age group of 16 years, The highest percentage (54%) of staff nurses in the age group of 15 years. Percentage wise distribution of adolescent girl's mothers educational status according to their educational level. Highest percentage (46%) of mother are completed their graduate (6%) mother completed their primary and secondary education. (40%) mother are complete their high school education (12%) mothers complete their post-graduation study. no any mother is from formal education. Percentage wise distribution of adolescent girls father educational status according to their educational level. Highest percentage (40%) of father is completed high school eduction. (8%) fathers completed their primary and secondary education. (28%) of father are complete their graduation. (20%) father completes their post-graduation study. no any father is from formal education. Percentage wise distribution of the education level of the adolescent girl, highest percentage (76%) of adolescent girls from 9th class. And (20%) of adolescent girls from class 8th. (4%) of girls from class 10th. Percentage wise distribution of adolescent girls according to their religion. The highest percentage is (74%) of girls are from Hindu. (22%) of girls are Muslim. (4%) of girls are Christian. (6%) of girls are from other religion. No one is from other caste. Percentage wise distribution of the place of residence of the adolescent girls. (88%) of adolescent girls from the urban area. (12%) of adolescent girls from rural area. The highest percentage is (88%) of adolescent girls from the rural area. Percentage wise distribution of adolescent girls according to the family monthly income. The highest percentage is (60%) have more than 20000 family monthly income. (16%) have 11000 to 15000 family monthly income24%) have more 16000 to 20000 monthly incomes. (0%) no one has 10000 or less than 10000 monthly incomes. Percentage wise distribution of the source of information (16%) from mass media. (28%) from family relatives. (46%) from friends. (10%) have other source of information. The highest percentage is (16%) from friends.

PART 2: Description of assessment of knowledge and attitude regarding the menstrual cup among adolescent girls in selected school bagalkot. N=50.

Table 6.1: Percentage wise distribution of adolescent girls according to level of knowledge pretest studying in selected school bagalkot, N=50

TEST	LEVEL OF KNOWLEDGE	NUMBER (f)	PERCENTAGE (%)
	Good knowledge	**3**	**6%**
	Moderate knowledge	**42**	**84%**
	Poor knowledge	**5**	**10%**

Percentage wise distribution of adolescent girls in selected school Bagalkot in pretest revels that out of 50 adolescent girls, highest pretest (6%) of adolescent girls had a good knowledge, (84%) had a moderate knowledge, (10%) had poor knowledge regarding the menstruation and menstrual cup.

Percentage wise distribution of adolescent girls in post revels that out of 50 adolescent girls highest (84%) had good knowledge. (16%) had moderate knowledge, (0%) no one had poor knowledge regarding the menstruation and menstrual cup.

Table 6.2: Percentage wise distribution of adolescent girls according to level of knowledge posttest studying in selected school bagalkot

TEST	LEVEL OF KNOWLEDGE	NUMBER	PERCENTAGE (%)
	Good knowledge	42	84%
	Moderate knowledge	8	16%
	Poor knowledge	0	0%

PART 3: To evaluate the effectiveness if video assisted teaching programme on knowledge regarding menstruation and menstrual cup among adolescent studying in selected school bagalkot.

SECTION 1: Comparison of knowledge level of adolescent in pretest and post test.

Table 6.3: Percentage wise distribution of knowledge level of adolescent in pretest and posttest

Level of knowledge	Pre test		Post test	
	No of respondents	Percentage (%)	No of respondents	Percentage (%)
Good knowledge	3	6%	42	84%
Moderate knowledge	42	84%	8	16%
Poor knowledge	5	10%	0	0%

Table 6.4: Percentage wise distribution of adolescent girl's attitude level studying in selected school bagalkot Pre test

TEST	LEVEL OF ATTITUDE	NUMBER (f)	PERCENTAGE (%)
	Low attitude	5	10%
	Moderate attitude	43	86%
	Adequate attitude	2	4%

Percentage wise distribution of attitude level adolescent girls in post revels that out of 50 adolescent girls highest pretest (86%) moderate attitude. (10%) had low attitude, (4%) had adequate attitude regarding the menstrual cup.

Table 6.5 Percentage wise distribution of adolescent girls attitude level studying in selected school bagalkot. Post test

TEST	LEVELOF ATTITUDE	NUMBER (f)	PERCENTAGE (%)
	Low attitude	0	0%
	Moderate attitude	5	10%
	Adequate attitude	45	90%

Percentage wise distribution of attitude level adolescent girls in post revels that out of 50 adolescent girls highest pre test (90%) adequate attitude. (10%) had moderate attitude, (0%) had low attitude regarding the menstrual cup. In this no one had a low attitude regarding the usage of the menstrual cup.

Comparison of attitude level of adolescent girls in pre test and post test

Table 6.6: Percentage wise distribution of attitude level of adolescent girls in pre test and posttest

Level of knowledge	Pre test		Post test	
	No of respondents	Percentage (%)	No of respondents	Percentage (%)
Low attitude	5	10%	0	0%
Moderate attitude	43	86%	5	10%
Adequate attitude	2	4%	45	90%

SECTION 1:

Comparison of knowledge level of adolescent in pretest and post test

Knowledge wise comparison of adolescent girls in pre test level that the following result. In pre test, out of 50 adolescent girls, highest percentage 84% of adolescent girls had moderate attitude. 10% had poor knowledge, 6%had good knowledge.

Percentage wise distribution of adolescent girls knowledge in post test revels that out of 50 adolescent girls, the highest post test 84% of adolescent girls had good knowledge 16%had moderate knowledge, 0% No one had a poor knowledge regarding the menstrual cup and menstruation.

Comparison of attitude level of adolescent girls in pre test and post test

Percentage wise comparison of adolescent girls in pre test level that the following result. In pre test, out of 50 adolescent girls, highest percentage 86% of adolescent girls had moderate attitude. 10% had low attitude, 4%had adequate attitude.

Percentage wise distribution of adolescent girls attitude in post test revels that out of 50 adolescent girls, the highest post test 90% of adolescent girls had moderate attitude 0%had low attitude, 10%had moderate attitude regarding the menstrual cup and menstruation. In the post test no one had a poor attitude regarding the usage of menstrual cup.

Section 2: Area wise effectiveness of VATP on knowledge regarding usage of menstrual cup studying in selected school bagalkot.

Table: 6.7 Area wise mean, SD and mean percentage of the knowledge score in pre test and post test, N=50

PART A: Menstruation

Knowledge area	10	Pre-test (01)		Post-test (02)		Effectiveness (02-01)	
		7.1± 1.7	11.12%	9.96± 0.1979	12.5%	2.86 ± 1.5021	27.6%

PART B: Menstrual cup

Knowledge area	10	Pre-test (01)		Post-test (02)		Effectiveness (02-01)	
		7.38 ± 1.51037	11.16%	9.98 ± 0.1414	13.44%	2.6 ±1.36	26%
	20	14.48± 2.26995	28.96%	18.46 ± 1.56766	51.88%	3.39± 0.70229	37.4%

Area wise comparison of mean and standard deviation of the knowledge score of the pre test and post test reveals an increase in the mean knowledge score of the adolescent girls after video assisted teaching programme.

Comparison of the mean percentage of the knowledge score pre test and post test revels an increase (37.4%) percentage in the mean knowledge score of the adolescent after video.

SECTION 2: Testing hypothesis

To evaluate the effectiveness of video assisted teaching programme a research hypothesis was formulated.

$H_{1:}$ There is a significant difference between pre test knowledge score and post test knowledge score regarding menstruation and menstrual cup among adolescent girls.

Paired t test was used to find out the difference between the pre test knowledge and post test knowledge score of adolescent girls studying in selected school bagalkot.

Table 6.8: Significant difference between the pre test knowledge and post test knowledge score of adolescent girls studying in selected school bagalkot

Test	Mean	Mean Diff	SD Diff	Paired t-value	Table value
Pre Test	14.48	3.98	22.92	10.1195	3.84
Post Test	18.46				

As the calculated t value (10.1195) was much higher than table value (3.84) for the degree of freedom 1 and 0.05% level of significance.

H1: There is a significance difference between pre test and post test knowledge score of adolescent t girls. Hence H1 is accepted. Finding revealed the presence of significance difference between pre test and post test knowledge score, hence the VATP proved to be effective.

$H_{2:}$ There is a significant difference between pre test knowledge score and post test knowledge score regarding menstruation and menstrual cup among adolescent girls

Wilcoxon signed rank test was used to find out the difference between the pre test and post test attitude score of adolescent girls studying in selected school bagalkot.

Table 6.9: Significant difference between the pre test attitude and post test attitude score of adolescent girls studying in selected school bagalkot

Test	Mean	Mean Diff	SD Diff	Z -value	Table value
Pre Test	31.18	16.38	0.4743	6.0927	3.84
Post Test	47.56				

As the calculated Z value (6.0927) was much higher than table value (3.84) for the degree freedom 1 and 0.05% level of significance.

H2: There is a significance difference between pre test and post test attitude score of adolescent girls Hence H2 is accepted. Finding revealed the presence of significance difference between pre test and post test attitude score, hence the VATP proved to be effective.

PART 4: Association between pre test knowledge score of adolescent girls working in selected school bagalkot.

Table 6.10: Association between post test knowledge score and selected demographic variable

Sl. No	Socio demographic variable	Df	Chi square value	Table value	P value	Association
1	Age	1	4.76	3.84	0.05	Significant*
2	Education status of mother	1	1.71	3.84	0.05	Not significant
3	Education status of father	1	2.78	3.84	0.05	Not significant
4	Educational level of adolescent girl	1	0.8	3.84	0.05	Not significant
5	Religion	1	4.76	3.84	0.05	Significant*
6	Place of residence	1	1.38	3.84	0.05	Not significant
7	Family income per month	1	0.71	3.84	0.05	Not significant
8	Source of information	1	0.28	3.84	0.05	Not significant

Df= degree of freedom, NS = not significant, S = significant

H_1: Chi-square test used to find out the association between pre test knowledge scores of adolescent girls studying in selected school bagalkot with their socio-demographic variables by using 2*2 contingency table.

Chi-square value is lesser than table value for socio-demographic variables Age(x^2=4.76, p=0.05) Educational status of mother(x^2=1.71, p=0.05) Educational status of father (x^2=2.78,p=0.05) Educational level of adolescent girl(x^2=0.8,p=0.05) Religion(x^2=4.76,p=0.05) Place of residence (x^2=1.38,p=0.05) Family income per month(x^2=0.71, p=0.05) Source of information(x^2=0.28,p=0.05).

Table 6.11: Association between post test attitude score and selected demographic variable

Sl. No	Socio demographic variable	Df	Chi square value	Table value	P value	Association
1	Age	1	0.96	3.84	0.05	Not significant
2	Education status of mother	1	0.99	3.84	0.05	Not significant
3	Education status of father	1	0.3	3.84	0.05	Not significant
4	Educational level of adolescent girl	1	11.3	3.84	0.05	Significant*
5	Religion	1	9.9	3.84	0.05	Significant*
6	Place of residence	1	3.05	3.84	0.05	Not significant
7	Family income per month	1	0.02	3.84	0.05	Not significant
8	Source of information	1	0.09	3.84	0.05	Not significant

H_2: Chi-square test used to find out the association between pretest attitude scores of adolescent girls studying in selected school bagalkot with their socio-demographic variables by using 2*2 contingency table.

Chi-square value is lesser than table value for socio-demographic variables Age(x^2=0.96, p=0.05) Educational status of mother(x^2=0.99, p=0.05) Educational status of father (x^2=0.3,p=0.05)Educational level of adolescent girl(x^2=11.3,p=0.05) Religion (x^2=9.9,p=0.05) Place of residence(x^2=3.05, p=0.05) Family income per month(x^2=0.02, p=0.05) Source of information(x^2=0.09, p=0.05).

DISCUSSION

The findings of the present study are discussed in light of previous scientific studies in this chapter and discussion regarding findings of the study is presented in accordance with the objectives of the study and hypothesis. The current study aims at to determine association between pre test and post test regarding usage of menstrual cup among adolescents. And assess the effectiveness of video assisted teaching programme

among adolescent studying in BVVS High school Bagalkot. In order to achieve the objectives of the study, Disproportional stratified random technique was adopted. The sample was selected without randomization and no control group sampling technique. The sample comprised of 50 women.

Percentage wise distribution of adolescent girls according to their age group revels that out of 50 subject, higher percentage (54%) adolescent girls in the age group of 15 years, (30%) of adolescent girls in the age group 14 years, (16%) adolescent girls in the age group of 16 years, The highest percentage (54%) of staff nurses in the age group of 15 years.

Percentage wise distribution of the educational status of the mother according to their educational level. Highest percentage (46%) of mother are completed their graduate (6%) mother completed their primary and secondary education. (40%) mother are complete their high school education (12%) mothers complete their post-graduation study. no any mother is from formal education.

Finding of the present study were contradictory study conducted by Gayathri mohanan. The most of the girls 69.1% of them were in the age group of 17-25.

Finding of the present study were contradictory study and the study conducted by Gowri Krishna ajitha. The most of the women after hysterectomy 73.7% of them had good knowledge.

Percentage wise distribution of adolescent girls in selected school Bagalkot in pre test revels that out of 50 adolescent girls, highest pre test (6%) of adolescent girls had a good knowledge, (84%) had a moderate knowledge, (10%) had poor knowledge regarding the menstruation and menstrual cup.

Finding of the present study were contradictory study the study conducted by Manju george. The most of the adolescents 81% of them had a good attitude.

Percentage wise distribution of attitude level adolescent girls in post revels that out of 50 adolescent girls highest pre test (86%) moderate attitude. (10%) had low attitude, (4%) had adequate attitude regarding the menstrual cup.

Finding of the present study are contradictory study the study conducted by Krushna Sone, Anvarsab Naregal, Nisha Deshmukh, Vaibhav Thombare, Arpita Dethes and Priyanka Hiwale. The most of adolescents in pre test 06% of had good knowledge and in post test 78% had good knowledge.

Percentage wise distribution of effectiveness of video assisted teaching programme regarding menstrual cup among girls. The data depicts that in pre-test 18(36%) subjects had poor knowledge, 18 (36%) Subjects had average knowledge & 03 (06%) subjects had good knowledge regarding menstrual cup. In post-test 04 (08%) subject had poor knowledge, 07(14%) subject had Average knowledge and 39 (78%) subjects had good knowledge regarding menstrual cup The overall mean of knowledge regarding menstrual cup was 10.78with SD ±2.518 in Pre-test. Overall mean of post test was 15.42 with SD ±3.758

Finding of the present study were contradictory the study conducted by Ms. Marvella M. Nongkhar, Ms. Sujana Yambem, Ms Sunday June Langstang. The most of the adolescents in pre test 3% had favorable attitude and 68% had favorable attitude in post test.

Percentage wise distribution of Video Assisted Teaching Programme regarding the use of the menstrual cup, 65% (106) of the participants had moderately favorable attitudes, 32% (52) of the participants had unfavorable attitudes and 3% (4) of the participants had favorable attitude, the mean pre-test is 22.2 and standard deviation is ±5.10 and after the Video Assisted Teaching Programme, 68%(109) of the participants had favorable attitude and 32% (53) of the participants had moderately favorable attitude and the mean post-test was 40.3 and Standard Deviation was ±4.7 regarding the use of menstrual cup among B.Sc. Nursing students before and after Video Assisted Teaching Programme.

Limitations: The study limited to the sample of 50 adolescents studying at BVVS high school bagalkot.

CONCLUSION

The main focus of this study was assessing video assisted teaching programme on knowledge and attitude of menstrual cup among adolescents. The data was collected from 50 adolescents. The study proved that there is a significant association between post test knowledge and attitude score of adolescents.

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