

Research Paper

Adaptation and Modification of Menstrual Distress Forms for Gwalior Region, India

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ABSTRACT

This study involved the process of adaptation and modification of the Menstrual Distress Forms developed at National Institute of Mental Health and Neuro Sciences (NIMHANS), Bangalore. The proposed scales were intended to be used for studying menstrual distress as a part of the researcher's PhD work in Gwalior, India. Face validity was used initially to receive feedback about the scales from three females in Gwalior. This was also done to find out whether the women would be able to understand the items without much difficulty. Recommendations pertaining to adding, deleting, modifying the items and merging some forms were received. Additionally, considering the English comprehension levels of the local women, it was suggested that the items be translated in Hindi to aid their understanding. Suitable changes were made in the language and structure of the forms and conceptual translations of the items in Hindi were added along with English items. These modified forms were shown to 16 domain experts (doctors, mental health professionals and local women) for their suggestions. The forms were finalized accordingly and rechecked with back-translation. Few items were rephrased. Hindi translations of some items were modified. The original version had four forms which were combined and/or modified to suit the current needs. Form II has been kept intact mostly. Forms I, III and IV were merged for the respondents to rate the items for pre-menstrual days, menstrual days and remaining days, in the columns one beside the other respectively. This new version was named as 'Modified Menstrual Distress Forms'.

Keywords: *Menstruation, Menstrual Distress, Females, Gwalior, India*

Menstruation refers to the shedding of the endometrium accompanied by bleeding. The cycle has its own phases and the hormonal changes accompanied in each phase tend to influence a woman's mood and behaviour.

Many women report of having experienced recurrent fluctuations in mood and behaviour that are associated with their menstrual cycles (Chaturvedi et al., 1994). These changes could be physiological or psychological or both. These fluctuations may become severe enough to interfere in their daily lives. Hence, it would be helpful in understanding the

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Received: November 3, 2025; Revision Received: December 21, 2025; Accepted: December 26, 2025

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distress in greater detail and its relationship with physiological and sociocultural factors (May, 1976; Vila & Beech, 1980).

When the need arises to use a certain questionnaire in a different cultural setting, questions regarding adapting it to suit the needs of the culture may be answered through different ways which may involve addition, removal and/or rephrasing of some items etc. Sometimes, there may also be a need for translating the items in a local language. One of the popular methods involves translation and back-translation. However, this method has limitations of detecting flaws in translation and may not be always suitable for cultural adaptation (Walde & Völlm, 2023). Getting the literal translation done from language experts may have its own concerns where the local population may not be well-versed with the final translated output. In situations where contextual translations are more relevant in conveying the actual meaning of the original items, translations from the respective professionals of that field seem more helpful in retaining the original sense of the questionnaire.

REVIEW OF LITERATURE

Many studies have focused on the negative changes experienced by women during their menstrual cycle (Prado et al., 2021; Sundström Poromaa & Gingnell, 2014; Sundström-Poromaa, 2018) while a few have focused on the positive ones (Almagor & Ben-Porath, 1991; Ertman et al., 2011). Some studies have focussed on the different phases of the menstrual cycle (Chandra & Chaturvedi, 1989; Kavitha C & Jamuna, 2013; Slade, 1984).

One of the most commonly used tools is Moos Menstrual Distress Questionnaire (MDQ) developed by Moos (1968). Unfortunately, MDQ is not without its share of criticisms which includes the methods of data collection used by Moos as well as the concern that the factor structure of the questionnaire has been provided little attention since its development (Ross et al., 2003). This motivated the authors to look for other options, especially to search for questionnaires developed for the Indian population.

Chandra and Chaturvedi (1989) had developed study instruments to assess menstrual and premenstrual distress which could be administered singly, either in combination or altogether. These instruments were also used in their studies on premenstrual symptoms and syndromes in Indian women (Chandra et al., 1994; Chaturvedi et al., 1994). These instruments were developed more than three decades earlier. Socio-cultural changes have occurred in Indian women's lives and careers thus far.

Rationale for the study

After deliberation, it was considered that there was a need to adapt these forms for various reasons. Firstly, the need was to have it in accordance with the version of Diagnostic and Statistical Manual of Mental Disorders (5th ed.) i.e. DSM 5 (American Psychiatric Association, 2013). Secondly, some items included phrases which may not be commonly used in Gwalior. Thirdly, to make the assessment more comprehensive by merging the forms (the suggestion for which came during the Phase I of the current study and is discussed in detail in the method section).

METHOD

Research Objective

To adapt and modify the forms to assess menstrual and premenstrual distress developed by Chandra and Chaturvedi for the Gwalior region, India.

Research Instrument Used/Developed

Forms to assess menstrual and premenstrual distress were developed by Chandra and Chaturvedi (1989) at NIMHANS, Bangalore. They were found to be reliable, valid and standardized.

- 1) Premenstrual Assessment Form I - This was a 20-item form which assessed cross-sectionally how the woman felt on the day of assessment. The respondent had to rate her feelings and experiences on a scale of 0 to 100. This form does not mention anywhere its relation to the menstrual cycle. This enables the researcher to get an unbiased opinion from the respondent. The date of her last period and the details pertaining to her menstrual cycle are calculated later through the answers received for the questions about her general health at the end of the form.
- 2) Premenstrual Assessment Form II - This form assesses the presence of various emotions and experiences which can possibly occur in relation to the premenstrual period. Items are encircled if experienced. Three questions at the end of the scale measure the severity, continuity and disability experienced by females for the items selected, which are related to mood, cognition, physical and biological changes.
- 3) Premenstrual Assessment Form III - This is a 17-item form which rates the presence and severity of menstrual experiences on a scale of 0 to 100 in a retrospective manner. It also measures these changes in the rest of the cycle. This helps in finding out the extent and nature of changes experienced by females at other times, thus helping in eliminating false positive cases which would have been difficult to detect had the 'rest of the cycle' rating not been included. At the end of the form, it also assesses on a scale of 0 to 3, the extent to which females experience interference during their premenstrual phase with work, social activities and interpersonal relationships.
- 4) Prospective Assessment Form - This form was specially designed to prospectively assess changes over the various menstrual phases of, important experiences and emotions. This form also involves a cross-sectional method of rating such that it asks the respondents to rate the feelings and experiences of that day, thus creating a possibility for unbiased rating. It uses both the numerical and visual analogue methods of rating.

Sample Description

Purposive sampling was used. 19 participants were approached (i.e. 3 females in the first phase; and 16 domain experts comprising of family physicians, gynaecologists, ayurvedic doctors, homeopath, clinical psychologists and local persons in the second phase) from the city of Gwalior, Madhya Pradesh, India to help in modifying the forms. The modified version was then administered to 50 females for calculating reliability. After screening the forms, the sample size was reduced to 36.

Procedure

Work was carried out in 2 phases:

Phase I. Face validity was used initially to receive feedback about the scales from three females in Gwalior. This was also done to find out whether the women would be able to understand the items without much difficulty. Recommendations pertaining to addition, deletion, modification of the items and merger of some forms were received. Importantly, considering the English comprehension levels of the local women, it was suggested that the items be translated in Hindi to aid their understanding. The initial translation process was done online through Google Translate (<https://translate.google.co.in/>). Suitable changes were

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made in the language and structure of the forms and conceptual translations of the items in Hindi language were added along with English items.

Phase II. These modified forms were shown to 16 domain experts for their suggestions. The forms were finalized accordingly and rechecked with back-translation.

Ethical consideration

The current paper is a part of the pre-PhD research work of the first author who wishes to study menstrual distress as one of the variables and the PhD topic has been approved by Jiwaji University's Research Degree Committee (RDC). The first author came across the current questionnaire and intended using it. However, it was realized that some modifications were required to suit the population of Gwalior. Hence, the need arose to modify the same. Permission to do so was acquired by its earlier test-developer. Consent was taken from the participants in the study.

RESULTS

Phase I of the study

The four menstrual distress forms (henceforth abbreviated as PAF I, II, III & IV respectively) were initially shown to three females in Gwalior for face validity and to get a tentative idea whether the local females would be able to comprehend the items and be comfortable in answering them. Their suggestions were incorporated. The original four forms can be used separately depending on the need of any study. These were combined into two sections, to suit the needs of the current study. This was done after taking consent and further advice from the developer of the original forms. Suitable changes in the forms were then made and this new version was named as Modified Menstrual Distress Forms (MMDF):

MMDF Part A: consists of PAF II which was kept intact mostly with some rephrasing and one item removed because apt translation was difficult. For example, 'I am forgetful' was reframed to 'I become forgetful', 'I feel people make comments about me or making digs at me' was shortened to 'I feel people make comments about me' etc. The item 'I am clumsy and things drop from my hand' was removed.

MMDF Part B: PAF I, III and IV were merged and reorganized, to avoid repetition of items, and making it possible for the respondents to rate 29 items for pre-menstrual days, menstrual days and remaining days, in the columns one beside the other respectively. Examples of some modifications include the term 'excitement' being changed to 'Feeling excited'; item 'Change in sleep pattern' being divided into three items such as 'Sleeping more', 'Sleeping less' and 'Disturbed quality of sleep'; term 'hopeless' being added to item 'feeling sad or depressed' etc. 'Any other' option was added as item no. 30 to consider any additional experience.

The duration of pre-menstrual days was changed from 5 days (as per the earlier reference from DSM III for Luteal Phase Dysphoric Disorder) to 1 week (DSM 5 was referred for Premenstrual Dysphoric Disorder's criteria). Typographical errors were corrected. The Hindi translations of scales were made. They were not literal (word by word) but conceptual, i.e., to convey the sense of the English statements.

Phase II of the study

Theses updated forms were then shown to 16 domain experts for their feedback on the questionnaire i.e. to know if any further modification was needed and whether the

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conceptual translation in Hindi language was simple and appropriate. Table 1 can be referred to for their feedback. Additionally, these forms were also shown to some more local persons (males and females) as per some suggestions mentioned in the same table.

Table 1 Feedback received for the Modified Menstrual Distress Forms

Sr. No.	Profession/ Qualification/ Gender	Feedback (Suggestions which were incorporated are <u>underlined</u>)	Suggestions not incorporated (reasons)
1	Local woman & Acupressure therapist	All okay.	
2	Ayurvedic Doctor (male)	All okay.	
3	Homoeopathic Physician and Reiki Healer (female)	Part A- 1. <u>Item 35- Along with मूझे गर्म और ठंडी चमक आती है add this- मूझे गर्माहट या ठंडक महसूस होती है.</u> 2. Item 39- झुनझुनी may also be explained as झनझनाहट, if the participants do not understand.	Item 39 seemed to be understood by the local persons. Original terms were retained.
4	MBBS (Family Physician) (male)	Questionnaire seems fine. Translation seems easy to understand.	
5	MBBS, DGO (female)	All okay.	
6	MBBS (Family Physician) (male)	Part A- Add an item on 'lower abdominal pain' to indicate dysmenorrhea.	Point 1 covered already in Item 29 'I get stomach ache'.
7	MBBS, DGO (female)	All okay.	
8	MBBS, MD- Obstetrics & Gynaecology (female)	Questionnaire seems fine. Translation seems easy to understand.	
9	Clinical Psychologist (male)	<u>1. Keep 'Name' optional.</u> <u>2. Translate Nuclear family as एकल परिवार.</u> <u>3. Page 1- Q.2 write 'वर्तमान समय में'.</u> Part A- 4. Item 25. Change 'खाद्य पदार्थों' to 'खाने की चीजों'. 5. Item 58. For 'मेरा आवेग नियंत्रण खराब है' search for a simple alternative word to replace 'खराब'.	Part A- Items 25 and 58 seemed to be understood by the local persons. Those translations were retained.
10	Clinical Psychologist (female)	<u>1. Translate 'Nuclear family' as अलग/ एकल परिवार.</u> <u>2. Page 1- Q.2 change वर्तमान में कोई दवा? to क्या आप वर्तमान समय में कोई दवा ले रही हैं?</u> <u>3. Page 1- Q.5 change मासिक धर्म की समस्या है? to मासिक धर्म में समस्या है?</u> Part A- 4. Item 13 the word उपेक्षित may be simplified. Check if people may understand. 5. Item 14 the word अति प्रतिक्रिया may be simplified. Check if people may understand. 6. Item 18 change मूझे दस्त आते हैं to मूझे दस्त हो जाते हैं. 7. Item 25 change कुछ खाद्य to विशिष्ट खाद्य.	Items 13, 14 and 28 seemed to be understood by the local persons. Those translations were retained. For Item 35, suggestion was incorporated as given by Expert in Sr. no. 3

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Sr. No.	Profession/ Qualification/ Gender	Feedback (Suggestions which were incorporated are underlined)	Suggestions not incorporated (reasons)
		<p>8. Item 28 <u>उत्तेजित</u> may be simplified and give different translation for agitated/ check if people may understand <u>उत्तेजित</u> or a synonym for 'irritated'.</p> <p>9. Item 35- Change <u>मुझे गर्म और ठंडी चमक आती है</u> to गरम/ठंडा हवाओं सा महसूस करती हूँ or तेज गर्मी / सर्दी लगती है or मुझे मेरा शरीर गरम / ठंडा लगता है</p> <p>10. Item 39- 'I get tremors' <u>meaning not clear.</u></p> <p>11. For Q.2- <u>ARE THESE FEATURES CONTINUOUS OR FLUCTUATING?</u> <u>make the Hindi translation indicating a choice between the two and not as a yes/ no question? change क्या ये लक्षण निरंतर या उतार-चढ़ाव वाली हैं? to क्या ये लक्षण निरंतर रहते हैं या फिर इनमें उतार-चढ़ाव रहता है?</u></p>	
11	BAMS (female)	<p>Part A-</p> <p>1. Instructions- Instead of घेरकर बताएं, write <u>चिह्नित करें.</u></p> <p>2. Item 40- for 'bloated' instead of 'मैं फूला हुआ महसूस करती हूँ' write 'मुझे पेट में अफरा/भारीपन महसूस होता है'.</p> <p>3. Item 55- instead of 'मुझे कुछ भी करने की कोई प्रेरणा नहीं है', write 'मुझे कुछ भी करने का मन नहीं करता.'</p>	
12	BAMS (male)	<p>1. Part A Item 53- after 'त्वचा खुरदरी' add '<u>रूखी</u>' in brackets.</p>	
13	Local Woman	<p>1. Hindi translation seems easy to understand.</p> <p>2. Part B- The instructions 'to give a rating from 0-100' were confusing initially. Then she was asked to understand it in terms to percentages i.e. <u>how much percentage of change takes place. It became clear.</u></p>	
14	MBBS, MD (Paediatrics) (female)	Questionnaire seems fine. Translation seems easy to understand.	
15	A team of 3 Gynaecologists (females)	Questionnaire seems fine. Translation seems easy to understand.	
16	MS, DNB, MICOG (females)	Questionnaire seems fine. Translation seems easy to understand.	
	Common suggestions from experts:	<p>1. It was advised to not give the questionnaire to women from the lower socio-economic strata and those who are illiterate because it will be very difficult to explain the items and obtain honest answers from them. Most of them are likely to give only 'yes-no' answers. They may not be comfortable in revealing such personal details. Also, their local language/dialect is quite different from Hindi.</p> <p>2. Suggestion to collect data from literate women only, especially working women.</p>	

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The feedback and suggestions mentioned in Table 1 were discussed with the earlier test-developer. Along with the changes (underlined in the table), some items/terms were removed because apt translation was difficult and was found as confusing by many: Part A- 'I get tremors', 'I feel hostile towards some people', and Part B- the term 'Keyed up' removed from item 16.

Table 2 Internal and test-retest reliability values for MMDF (n=36)

Category	Phases	Internal reliability (Cronbach's α)	Test-retest reliability (Pearson's r)
MMDF Part A			
Affective (8 items)	Menstrual	.76	.78**
Physiological (35 items)	Menstrual	.78	.68**
Behavioural (5 items)	Menstrual	.48	.57**
Cognitive (10 items)	Menstrual	.75	.81**
Total (58 items)	Menstrual		.80**
MMDF Part B			
Emotional (9 items)	Premenstrual	.71	.11
	Menstrual	.56	.55**
	Rest of the cycle	.73	.57**
Somatic (13 items)	Premenstrual	.87	.15
	Menstrual	.80	.52**
	Rest of the cycle	.83	.76**
Behavioural (4 items)	Premenstrual	.42	.17
	Menstrual	.34	.41*
	Rest of the cycle	.74	.35*
Cognitive (3 items)	Premenstrual	.87	.21
	Menstrual	.82	.50**
	Rest of the cycle	.85	.52**
Total (29 items)	Premenstrual	.93	.28
	Menstrual	.89	.62**
	Rest of the cycle	.92	.71**

* $p < .05$, ** $p < .01$ (two-tailed)

Considerably good values were found for Cronbach's alpha and test-retest reliability was checked through Pearson's Product-Moment Correlation by a statistician where the values were found to be significant in most analyses. No significant test-retest correlation values were found for the premenstrual phase in any category of MMDF Part B. Lower values observed in the 'behavioural' category for both Part A and B seem to indicate the variable nature of human behaviour which may vary in each menstrual cycle.

DISCUSSION

This paper aimed at modifying the menstrual distress forms to suit the population of Gwalior region. Modifying the Menstrual Distress Forms which were already standardized on the Indian population was considered a better option rather than opting for Moos MDQ which

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was based on the western culture. The sample considered for Menstrual Distress Forms were from the southern part of India which is culturally distinct from the northern part. Hence, it was decided to modify these forms to suit the population of the Gwalior city where the northern culture prevails. During the course of the study, the need to add conceptual Hindi translation for the forms was realized and implemented accordingly.

It should be noted that the translation of the items in Hindi was done to aid the understanding of the items in English and is not meant to be used separately as a Hindi version. The domain experts who were contacted were practitioners in the city region of Gwalior covering different areas of the expanded city. The feedback and suggestions of the professionals from the health care sector were found to be useful and contributed in the drafting process of the forms. Such cultural and contextual insights could not have been possibly obtained from professional translators or language teachers.

With reference to the calculated reliability values, it may be noted that menstrual cycle experiences are subjective. Hence, reliability for various categories may be subject to change as per the population studied. Also, as compared to the other three categories, the 'behavioural' aspect is more 'in control' of the person where, a female may choose how to behave, irrespective of the distress she may be experiencing. This may be an implication of the cultural variations in how menstruation is perceived as a concept. Behaviours tend to vary and may not be considered relatively stable as compared to other aspects such as cognitive changes, physiological changes etc. Nevertheless, the information obtained from each female may help in getting an idea about her own personal experiences.

An advantage of the Modified Menstrual Distress Forms is that even though the original four forms for menstrual distress can be used as single forms as well as in various combinations, this modified version includes the aspects of all the four forms and yet not appear as lengthy as compared to all the four forms considered together.

Limitations and Future Directions

Considering the sensitive nature of the topic, while using these forms for a survey, it might be difficult to understand the overall trend of the respondents' experiencing menstrual distress if survey biases such as non-respondent bias, acquiescence bias, social desirability biases influence the outcome. Additionally, since the participants will be made aware of the purpose of this questionnaire through the instructions mentioned at the beginning, it cannot be considered as an unbiased one.

Attempts can be made in the future to standardize this scale for more cultures especially in the northern part of India including the rural regions provided the psychometric properties support the same for cultural variations.

CONCLUSION

The final version now called Modified Menstrual Distress Forms (MMDF), consist of the following sections, each comprising of the conceptual Hindi translation of the instructions, items and questions-

Part A- It consists of 60 statements (58 plus 2) which women might experience during their period. Respondents are expected to encircle the item number of the statement if experienced by them. Items are related to affective, physiological, behavioural and cognitive changes.

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Part B- It consists of 29 items along with one optional item and 4 questions. A list of emotional, somatic, behavioural and cognitive changes which women feel during the menstrual phase are mentioned as items. Respondents are expected to indicate if they experience any of these changes during the different parts of their menstrual cycle (premenstrual, menstrual and rest of the cycle) and rate how much change do they feel on a scale from 0 to 100.

REFERENCES

- Almagor, M., & Ben-Porath, Y. S. (1991). Mood changes during the menstrual cycle and their relation to the use of oral contraceptive. *Journal of Psychosomatic Research*, 35(6), 721–728. doi:10.1016/0022-3999(91)90123-6
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders (5th ed)*. Washington, DC: Author.
- Chandra, P. S., & Chaturvedi, S. K. (1989). Cultural variations of premenstrual experience. *The International Journal of Social Psychiatry*, 35(4), 343–349. doi:10.1177/002076408903500407
- Chandra, P. S., Chaturvedi, S. K., & Gururaj, G. (1994). Identification and Assessment of Premenstrual Symptoms and Syndromes in Women - an Epidemiological Approach to the Investigation. *NIMHANS Journal*, 12(1), 1–8.
- Chaturvedi, S., Chandra, P., Gururaj, G., Beena, M., & Pandian, R. D. (1994). Prevalence of pre-menstrual Symptoms and Syndromes: Preliminary Observations. *NIMHANS Journal*, 12(1), 9–14.
- Ertman, N., Andreano, J. M., & Cahill, L. (2011). Progesterone at encoding predicts subsequent emotional memory. *Learning & Memory (Cold Spring Harbor, N.Y.)*, 18(12), 759–763. doi:10.1101/lm.023267.111
- Kavitha, C., & Jamuna, B. L. (2013). A study of menstrual distress questionnaire in first year medical students. *International Journal of Biological & Medical Research*, 4(2), 3192–3195.
- May, R. R. (1976). Mood shifts and the menstrual cycle. *Journal of Psychosomatic Research*, 20(2), 125–130. doi:10.1016/0022-3999(76)90038-6
- Moos, R. H. (1968). The development of a menstrual distress questionnaire. *Psychosomatic Medicine*, 30(6), 853–867. doi:10.1097/00006842-196811000-00006
- Prado, R. C. R., Silveira, R., Kilpatrick, M. W., Pires, F. O., & Asano, R. Y. (2021). Menstrual cycle, psychological responses, and adherence to physical exercise: Viewpoint of a possible barrier. *Frontiers in Psychology*, 12. doi:10.3389/fpsyg.2021.525943
- Ross, C., Coleman, G., & Stojanovska, C. (2003). Factor structure of the Modified Moos Menstrual Distress Questionnaire: assessment of prospectively reported follicular, menstrual and premenstrual symptomatology. *Journal of Psychosomatic Obstetrics and Gynaecology*, 24(3), 163–174. doi:10.3109/01674820309039670
- Slade, P. (1984). Premenstrual emotional changes in normal women: Fact or Fiction? *Journal of Psychosomatic Research*, 28(1), 1–7. doi:10.1016/0022-3999(84)90034-5
- Sundström Poromaa, I., & Gingnell, M. (2014). Menstrual cycle influence on cognitive function and emotion processing- from a reproductive perspective. *Frontiers in Neuroscience*, 8. doi:10.3389/fnins.2014.00380
- Sundström-Poromaa, I. (2018). The menstrual cycle influences emotion but has limited effect on cognitive function. In *Vitamins and Hormones* (pp. 349–376). Elsevier. doi:10.1016/bs.vh.2018.01.016

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- Vila, J., & Beech, H. R. (1980). Premenstrual symptomatology: An interaction hypothesis. *The British Journal of Social and Clinical Psychology*, 19(1), 73–80. doi:10.1111/j.2044-8260.1980.tb00931.x
- Walde, P., & Völlm, B. A. (2023). The TRAPD approach as a method for questionnaire translation. *Frontiers in Psychiatry*, 14. doi:10.3389/fpsyt.2023.1199989

Acknowledgment

The researcher is thankful for the test-developer's permission to adapt their forms. This paper is a part of the first author's PhD work. No funding was provided. This paper's authors declare that there were no conflicts of interest.

Declaration

Part of this paper was presented at a Two-Day National Conference on "Women's Health and Well-being" organized by Department of Psychology, Central University of Haryana in collaboration with National Academy of Psychology (NAOP) between October 12-13, 2023.

Conflict of Interest

The author(s) declared no conflict of interest.

How to cite this article: Chandani, J. & Nagaich, N.K. (2025). Adaptation and Modification of Menstrual Distress Forms for Gwalior Region, India. *International Journal of Indian Psychology*, 13(4), 2585-2599. DIP:18.01.234.20251304, DOI:10.25215/1304.234

APPENDIX

NOT TO BE USED WITHOUT PERMISSION

Modified Menstrual Distress Forms

Participant's Details (प्रतिभागी का विवरण):

Name (optional) [नाम (वैकल्पिक)]: _____ Date (दिनांक) _____

Marital status: Unmarried/ Married/ Widowed/ Divorced/ Separated/Live in relationship
(वैवाहिक स्थिति: अविवाहित / विवाहित / विधवा / तलाकशुदा / अलग / लिव इन रिलेशनशिप)

No. of Children (बच्चों की संख्या): ___ Education (शिक्षा): _____ Religion (धर्म): _____

Occupation (व्यवसाय): _____ Family Type: Joint/Nuclear (परिवार का प्रकार: संयुक्त/ एकल)

Age (उम्र) _____ Socio Economic Status: Low/ Medium/ High (सामाजिक आर्थिक स्थिति: निम्न/मध्यम/उच्च)

Please answer the following (कृपया निम्नलिखित का उत्तर दें): -

- (1) Do you have any physical illness at present? Yes/No, if yes, what is it?
क्या आपको इस समय कोई शारीरिक बीमारी है? हाँ/नहीं, यदि हाँ, तो यह क्या है?
- (2) Any medications at present?
क्या आप वर्तमान समय में कोई दवा ले रही हैं?
- (3) At what age did you get your **first period**?
आपको पहली बार माहवारी/मासिक धर्म किस उम्र में आया था?
- (4) When did you have your last period? (Date)
आपकी आखिरी माहवारी कब हुई थी? (तारीख)

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- (5) Do you think you have problems with your periods? Yes/No
क्या आपको लगता है कि आपको पीरियड्स/ मासिक धर्म में समस्या है? हां/नहीं
- (6) Do you think your periods are **regular or irregular**?
क्या आपको लगता है कि आपके मासिक धर्म नियमित हैं या अनियमित?
- (7) For how many days of your period do you bleed? Days
आपको मासिक धर्म के कितने दिनों तक रक्तस्राव होता (खून बहता) है? दिन
- (8) How many days is your monthly cycle? Days
आपका मासिक चक्र कितने दिनों का है? दिन
- (9) Have you consulted a gynaecologist in the last one year? Yes/No. If yes, for what?
क्या आपने पिछले एक साल में किसी स्त्री रोग विशेषज्ञ से सलाह ली है? हां/नहीं। यदि हां, तो किसलिए?
- (10) Do you use Oral Pills (for contraception)? Yes/No
क्या आप ओरल पििल्स/ गोलिएँ (गर्भनिरोधक के लिए) का उपयोग करती हैं? हां/नहीं

PART A Instructions (निर्देश):

Here is a list of changes which have been reported by women during their menstrual period. Different women have different experiences, and there is no right or wrong experience. Do you experience any of the following, during your menstrual period?

यहां उन परिवर्तनों की सूची दी गई है जो महिलाओं द्वारा मासिक धर्म के दौरान बताए गए हैं। अलग-अलग महिलाओं के अलग-अलग अनुभव होते हैं, और कोई सही या गलत अनुभव नहीं होता है। क्या आपको मासिक धर्म के दौरान निम्नलिखित में से कोई भी अनुभव होता है?

Please indicate by encircling the number of the statement, if it happens to you during your menstrual periods:

यदि मासिक धर्म के दौरान आपके साथ ऐसा होता है, तो कृपया उस वाक्य का नंबर घेरकर बताएं / चिह्नित करें:

1. I feel weepy, I cry easily. (मुझे रोना आता है, मैं आसानी से रो पड़ती हूँ)
2. I feel restless, I am not able to sit still. (मुझे बेचैनी महसूस होती है, मैं स्थिर नहीं बैठ पाती)
3. I feel tensed or apprehensive. (मैं तनावग्रस्त या आशंकित महसूस करती हूँ)
4. I tend to lose my temper easily (मैं आसानी से अपना आपा खो देती हूँ)
5. I feel people are teasing me. (मुझे लगता है लोग मुझे चिढ़ा रहे हैं/ मेरा मजाक बना रहे हैं)
6. I feel easily irritated. (मुझे आसानी से चिड़चिड़ापन महसूस होता है)
7. I get sudden mood swings. (मेरा मूड अचानक बदल जाता है)
8. I make mistakes at work. (मैं काम में गलतियाँ करती हूँ)
9. I become forgetful. (मैं भुलक्कड़ हो जाती हूँ)
10. I feel my efficiency is less (मुझे लगता है कि मेरी कार्यक्षमता कम है)
11. I cannot decide on things, I am unable to make up my mind. (मैं चीजों पर निर्णय नहीं ले पाती, मैं अपना मन नहीं बना पाती)
12. I feel people make comments about me. (मुझे लगता है कि लोग मेरे बारे में टिप्पणियाँ करते हैं)
13. I feel upset if somebody ignores me, I feel left out. (अगर कोई मुझे नजरअंदाज करता है तो मुझे दुख होता है, मैं खुद को उपेक्षित महसूस करती हूँ)
14. I become over sensitive and over react to even small things. (मैं अति संवेदनशील हो जाती हूँ और छोटी-छोटी बातों पर भी अति प्रतिक्रिया व्यक्त करती हूँ)
15. At times, I think of ending my life. (कभी-कभी मैं अपनी जिंदगी खत्म करने के बारे में सोचती हूँ)
16. I feel an increase in my body weight. (मुझे अपने शरीर के वजन में वृद्धि महसूस होती है)

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17. I get headaches. (मुझे सिरदर्द होता है)
18. I get loose motions. (मुझे दस्त हो जाते हैं)
19. I have joint and muscle pains and aches. (मुझे जोड़ों और मांसपेशियों में दर्द रहता है)
20. I get backache. (मुझे पीठ में दर्द होता है)
21. My sexual desire gets reduced. (मेरी यौन इच्छा कम हो जाती है)
22. I do not sleep well. (मुझे अच्छी नींद नहीं आती)
23. I get easily fatigued. (मैं आसानी से थक जाती हूँ)
24. My appetite gets reduced. (मेरी भूख कम हो जाती है)
25. I crave for certain food items (मुझे विशिष्ट खाद्य पदार्थों की इच्छा होती है)
26. I sleep too much (मैं बहुत ज्यादा सोती हूँ)
27. I feel very lethargic and lazy (मुझे बहुत सुस्ती और आलस महसूस होता है)
28. I feel very agitated (मैं बहुत उत्तेजित महसूस करती हूँ)
29. I get stomach ache (मुझे पेट में दर्द होता है)
30. I have increased sexual desire (मेरी यौन इच्छा बढ़ जाती है)
31. I feel sick (nausea) [मैं बीमार महसूस करती हूँ (जी मिचलाना)]
32. My breasts ache (मेरे स्तनों में दर्द होता है)
33. I get palpitations (मेरी धड़कन बढ़ जाती है)
34. I sweat a lot (मुझे बहुत पसीना आता है)
35. I get hot and cold flushes (मुझे गर्म और ठंडी चमक आती है/मुझे गर्माहट या ठंडक महसूस होती है)
36. I feel constipated (मुझे कब्ज महसूस होता है)
37. I feel dizzy (मुझे चक्कर आता है)
38. I get tingling and numb feelings in the body (मुझे शरीर में झुनझुनी और सुन्नपन महसूस होता है)
39. I feel bloated up (मुझे पेट में अफरा/भारीपन महसूस होता है)
40. At times, I wish I were dead (कभी-कभी, मुझे लगता है कि काश मैं मर गयी होती)
41. I go frequently to the toilet for urination (मैं बार-बार पेशाब करने के लिए शौचालय जाती हूँ)
42. I get swelling in my feet (मेरे पैरों में सूजन आ जाती है)
43. My breasts get engorged (swelling, tightness, and an increase in size of the breasts) [मेरे स्तनों में सूजन आ जाती है (स्तनों में सूजन, जकड़न और आकार में वृद्धि)]
44. I pass a lot of white discharge [मुझे बहुत अधिक श्वेत प्रदर (सफ़ेद स्राव/पानी) होता है]
45. There is a decrease in my urination. (मेरे पेशाब/ मूत्र त्याग में कमी आ जाती है)
46. I get acne (मुझे मुहांसे हो जाते हैं)
47. I get a burning sensation in my private parts. (मेरे गुप्तांगों में जलन होती है)
48. My hair and skin feel oily or greasy (मेरे बाल और त्वचा तैलीय या चिकने लगते हैं)
49. I feel feverish (मुझे बुखार सा महसूस होता है)
50. My hair feels dry (मेरे बाल रूखे लगते हैं)
51. My efficiency in general gets reduced (सामान्यतः मेरी कार्यक्षमता कम हो जाती है)
52. My skin becomes rough (मेरी त्वचा खुरदरी (रूखी) हो जाती है)
53. I notice a change in my complexion (मुझे अपने रंग में बदलाव नज़र आता है)
54. I have no motivation to do anything (मुझे कुछ भी करने का मन नहीं करता)
55. My skin becomes soft and smooth (मेरी त्वचा कोमल और मुलायम हो जाती है)
56. I have no desire to do my work (मुझे अपना काम करने की कोई इच्छा नहीं होती)
57. I cannot control myself. I have a poor impulse control. (मैं अपने आप पर नियंत्रण नहीं रख सकती। मेरा आवेग नियंत्रण खराब है।)
58. I feel very aggressive (मैं बहुत आक्रामक महसूस करती हूँ)
59. I have to abstain from college/ job/ work/ social activities during my period. (मुझे अपनी माहवारी के दौरान कॉलेज/ नौकरी/ कार्य/ सामाजिक गतिविधियों से दूर रहना पड़ता है)
60. The above feelings prevent me from going out, mixing with others, doing household chores etc. (उपरोक्त भावनाएँ मुझे बाहर जाने, दूसरों के साथ घुलने-मिलने, घर का काम करने आदि से रोकती हैं)

ARE THESE FEELINGS INTOLERABLE? YES/NO

क्या ये भावनाएँ असहनीय हैं? हाँ/नहीं

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ARE THESE FEATURES CONTINUOUS OR FLUCTUATING?

क्या ये लक्षण निरंतर रहते हैं या फिर इनमें उतार-चढ़ाव रहता है?

HOW LONG DO THESE CHANGES LAST? Days

ये परिवर्तन कितने समय तक चलते हैं? दिन

Any other experiences you have during your menstrual period which has not been mentioned above, please write. मासिक धर्म के दौरान आपको कोई अन्य अनुभव हो जिसका उल्लेख ऊपर नहीं किया गया है, कृपया लिखें।

- 1.
- 2.
- 3.
- 4.
- 5.

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Part B Instructions (निर्देश):

This form is for assessment of changes during the menstrual period. There is nothing right or wrong and each woman may have a different experience.

यह फॉर्म मासिक धर्म के दौरान होने वाले बदलावों के आकलन के लिए है। इसमें कुछ भी सही या गलत नहीं है और प्रत्येक महिला का अनुभव अलग-अलग हो सकता है।

The following is a list of changes which women feel during the menstrual phase. **Please indicate if you experience any of these in the menstrual period and rate how much change do you feel on a scale from 0 to 100.** Also indicate if you experience these before periods or during the rest of your menstrual cycle, also on a scale of 0 to 100. i.e., at a time other than your periods.

निम्नलिखित परिवर्तनों की एक सूची है जो महिलाएं मासिक धर्म चरण के दौरान महसूस करती हैं। **कृपया बताएं कि क्या आप मासिक धर्म के दौरान इनमें से किसी का अनुभव करती हैं और आप कितना बदलाव महसूस करती हैं, इसका मूल्यांकन 0 से 100 के पैमाने पर करें।** यह भी बताएं कि क्या आप इन्हें मासिक धर्म से पहले या अपने मासिक धर्म चक्र के बाकी समय के दौरान अनुभव करती हैं, वह भी 0 से 100 के पैमाने पर। यानी, आपके मासिक धर्म के अलावा किसी अन्य समय पर।

CHANGES बदलाव	One week before periods begin मासिक धर्म शुरू होने से एक सप्ताह पहले	During periods मासिक धर्म के दौरान	Rest of the cycle मासिक धर्म चक्र के बाकी दिनों के दौरान
1. Increased work performance कार्य निष्पादन में वृद्धि			
2. Feeling excited उत्साहित महसूस करना			
3. Feeling sad, hopeless or depressed उदास, निराश या अवसादग्रस्त महसूस करना			
4. Being oversensitive अति संवेदनशील होना			
5. Increased sexual desire यौन इच्छा का बढ़ना			
6. Getting angry easily जल्दी गुस्सा आना			
7. Sense of losing control नियंत्रण खोने का एहसास			
8. Increased energy, vigour ऊर्जा, जोश में वृद्धि			
9. Sleeping more अधिक सोना			
10. Backache, headache, body ache कमर दर्द, सिरदर्द, बदन दर्द			
11. Swelling of feet, body, feeling bloated पैरों, शरीर में सूजन, फूला हुआ/ भारीपन महसूस होना			
12. Increase in appetite भूख का बढ़ना			
13. Feeling affectionate towards others दूसरों के प्रति स्नेह का एहसास			
14. Fatigue, tiredness, lethargy थकान, थकावट, सुस्ती			
15. Feelings of happiness, joy खुशी, आनंद की भावनाएँ			
16. Restlessness, tense बेचैनी, तनाव			

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17. Decreased concentration एकाग्रता में कमी			
18. Feelings of well-being अच्छे स्वास्थ्य का एहसास			
19. Change in bowel habit मल त्यागने की आदत में बदलाव			
20. Feeling of being rejected, isolated अस्वीकृत, अलग-थलग किये जाने का एहसास			
21. Impaired work performance बिगड़ा हुआ कार्य निष्पादन			
22. Prefer solitude, avoid gatherings एकांत पसंद करती हूँ, भीड़-भाड़ से बचती हूँ			
23. Decrease in sexual desire यौन इच्छा कम होना			
24. Sudden mood changes, tearfulness अचानक मूड बदलना, आंसू आना			
25. Craving for specific foods विशिष्ट खाद्य पदार्थों की लालसा			
26. Sleeping less कम सोना			
27. Difficulty in concentration एकाग्रता में कठिनाई			
28. Decrease in appetite भूख कम लगना			
29. Disturbed quality of sleep नींद की गुणवत्ता में गड़बड़ी			
30. Any other... कोई अन्य...			

You need not answer the following questions if it is because of family traditions/ expectations, religious rituals etc. यदि यह पारिवारिक परंपराओं/अपेक्षाओं, धार्मिक अनुष्ठानों आदि के कारण है तो आपको निम्नलिखित प्रश्नों का उत्तर देने की आवश्यकता नहीं है।

My usual social activities suffer during my menstrual period due to the above experiences.
उपरोक्त अनुभवों के कारण, मासिक धर्म के दौरान मेरी सामान्य सामाजिक गतिविधियाँ प्रभावित होती हैं।

- (1) Not at all (2) To a certain extent (3) To a great extent
(1) बिल्कुल नहीं (2) कुछ हद तक (3) काफी हद तक

The above experiences during the menstrual period interfere with my work (at home or workplace).
मासिक धर्म के दौरान उपरोक्त अनुभव मेरे काम (घर या कार्यस्थल पर) में बाधा डालते हैं।

- (1) To a great extent (2) Not at all (3) To some extent
(1) काफी हद तक (2) बिल्कुल नहीं (3) कुछ हद तक

My interactions with other people like friends or relatives are disturbed by the changes during my menstrual period.

मेरे मासिक धर्म के दौरान होने वाले बदलावों के कारण दोस्तों या रिश्तेदारों जैसे अन्य लोगों के साथ मेरी बातचीत बाधित होती है।

- (1) To some extent (2) To a great extent (3) Not at all
(1) कुछ हद तक (2) काफी हद तक (3) बिल्कुल नहीं

I think I have menstrual distress or tension.

मुझे लगता है कि मुझे मासिक धर्म संबंधी परेशानी या तनाव है।

- (1) Yes (2) No (3) May be (4) Don't know
(1) हाँ (2) नहीं (3) हो सकता है (4) पता नहीं