

ABSTRACT

The term Premenstrual Syndrome (PMS) is widely used in the West but remains unfamiliar in Chinese society. The present study adopted a culturally sensitive approach for developing instruments that would validly assess perimenstrual distress (PMD) and menstrual attitudes among Chinese women in Hong Kong. Specifically, Study 1 was concerned with the development and testing of the psychometric properties of the Chinese Menstrual Distress Questionnaire (CMDQ) and the Chinese Menstrual Attitudes Questionnaire (CMAQ) in a sample of 538 young women. Using an older sample of 339 working women and housewives, Study 2 used the two instruments to investigate the relationship between PMD and the psychosocial variables of menstrual attitudes, role quality, social support, and psychological well-being.

In Study 1, a list of locally salient perimenstrual symptoms were generated from qualitative interviews and the local literature on PMD. These were added to the Moos Menstrual Distress Questionnaire. Local attitudes were also added to the Menstrual Attitudes Questionnaire. These two instruments, together with a demographic and menstrual information data sheet, and measures of anxiety, depression, neuroticism, and modernity, were completed by a mixed group of 538 high school girls, female undergraduates, housewives, and working women.

The CMDQ and CMAQ demonstrated good reliability and factorial validity. The former yielded four factors, namely, Dysphoria, Arousal, Somatic Distress, and Muddled. The latter also yielded four factors, namely, Menstrual Taboos, Debilitation and Indigenous Practices, Menstruation as a Female Experience, and Trivialization of

Menstrual Effects. The two instruments showed convergent and discriminant validity with respect to CMDQ's relationship with anxiety, depression, and neuroticism, and CMAQ's relationship with age and modernity. The local items in both instruments emerged saliently in factor structures. Their endorsement rates were high.

In Study 2, the 34-item CMDQ and 38-item CMAQ were administered to 57 housewives and 282 working women. Their depression, general well-being, social support, sex role attitudes, disordered eating, and role quality were also assessed. Confirmatory Factor Analysis substantiated the four-factor structure of the CMDQ but not the CMAQ.

Perimenstrual distress was common among the Chinese women studied. Out of its 34 items, 19.6% and 27.5% of the respondents reported five or more symptoms, and 2.8% and 4.3% of the respondents reported 20 or more symptoms, in the premenstrual and menstrual phase respectively. The most frequently reported premenstrual symptoms were emotional, namely, irritability and easy to lose temper. For the menstrual phase, the most common symptoms were somatic, namely, fatigue and abdominal cramps. Symptom endorsement rates were generally higher in the menstrual than premenstrual phase.

Housewives and working women showed no difference in the level of PMD or symptom endorsement rates. Based on structural equation modeling and hierarchical multiple regression, negative menstrual attitude was most predictive of PMD. Absence of the wife and maternal roles, quality of the maternal role and, to a lesser extent, depression, predicted PMD. Additionally, PMD significantly predicted general well-being. Limitations and implications of the present study were discussed.