“A study to assess the effectiveness of self instructional module on level of knowledge regarding prevention and management of uterine prolapse among the perimenopausal women in selected urban areas at Jaipur”.

Mrs. Snehlata Yadav

Asst. Prof. BMCHRC COLLEGE OF NURSING JAIPUR

Corresponding Email : snehay_alw@yahoo.co.in

ABSTRACT:

Introduction: A study to assess the effectiveness of self instructional module on level of knowledge regarding prevention and management of uterine prolapse among the perimenopausal women in selected urban area at Jaipur.

Material and Methods: A pre-experimental one group pre- test and post- test design was adopted, purposive sampling technique was used to select the 240 participants, the data generated by using investigator developed Structured knowledge questionnaire, content validity of investigator developed tool was obtained from experts of related departments.

Results: Out of 240 premenopausal women's, assessment of knowledge reveals that majority (86.67%) of premenopausal women's had adequate knowledge on prevention and management of uterine prolapse.

Conclusion: Post-test knowledge score of premenopausal women regarding prevention and management of uterine prolapse reveals that majority (86.67%) of the participants were having adequate knowledge and 13.33 % participants were having moderate knowledge

Key word: Premenopausal women, knowledge, prevention and management of uterian prolapse.

INTRODUCTION

Uterine prolapse is the most wide spread reproductive health condition and is the neglected health issues. The influencing factors associated with uterine prolapse are age, obesity, increased vaginal birth, constipation, poor nutrition, smoking, asthma, heavy lifting and heavy strenuous work soon after deliveries which are preventable.

A one group pre-test post test design with pre-experimental approach was adopted to evaluate the effectiveness of self instructional module regarding knowledge on prevention and management of uterine prolapse among the perimenopausal women in selected urban area at Jaipur.

NEED FOR THE STUDY

The uterus forms the most significant part of female reproductive system. Uterine prolapse is caused

by various factors, a large number which are preventable. The influencing factors associated with uterine prolapse are age, obesity, increased vaginal births, constipation, poor nutrition, smoking, asthma and heavy lifting which are preventable.⁹ The incidence of uterine prolapse is increasing now a days, the main reason being the lack of awareness about the risk factors, signs and symptoms, and preventive measures.

STATEMENT OF THE PROBLEM

“A study to assess effectiveness of self instructional module on level of knowledge regarding prevention and management of uterine prolapse among the perimenopausal women in selected urban area at Jaipur.

OBJECTIVES

- Determine the pre-test level of knowledge

regarding prevention and management of uterine prolapse among the perimenopausal women in selected urban area at Jaipur using a structured questionnaire.

- Develop and validate self instructional module.
- Evaluate the effectiveness of self instructional module regarding knowledge on prevention and management of uterine prolapse among the perimenopausal women using a structured knowledge questionnaire.
- find the association between the pre test knowledge score regarding Prevention and management of uterine prolapse and selected demographical variables.

HYPOTHESES

H₁: There is a significant difference between pre-test and post- test knowledge scores regarding prevention and management of uterine prolapsed among perimenopausal women.

H₂: There is a significant association between the pre-test knowledge scores Regarding prevention and management of uterine prolapse among perimenopausal women and their selected demographical variables.

RESEARCH METHODOLOGY

Research Approach:

An evaluative research approach was considered suitable for assessing effectiveness of self instructional module.

Research Design:

The research design was a pre-experimental one group pre- test and post- test design.

Population:

The Population was comprised of perimenopausal women from shastri Nagar at jaipur.

Sample size:

240 perimenopausal women who meet the criteria, were selected as sample for the present study from the shastri Nagar at Jaipur.

Sampling technique:

Purposive sampling technique was used to select the participants.

Criteria for selection of sample

Inclusion criteria for sampling

Perimenopausal women who are:

- married and between the ages of 45-55 years.
- Having one or more children.
- Available at the time of data collection .
- Willing to participate in the study.
- Able to read and write English and Hindi language.

Exclusion criteria for sampling

Perimenopausal women who are :

- with history of hysterectomy and cancer of the uterus
- with history of 3rd and 4th degree of uterine prolapse.
- staying as guest during the data collection period.

Development of tool

Keeping in view of the objective of the study a Structured knowledge questionnaire was prepared based on the review of literature and in consultation with experts in the field of nursing, gynecology and related disciplines.

Validity of tool

The Content validity of the tool and SIM was ascertained in consultation with seven experts in the field of obstetrical nursing, gynecological and related disciplines

Reliability

The r Split half method was used to estimate homogeneity.

The reliability of the test was estimated by using Karl Pearson's Correlation Coefficient. The reliability (r) of the tool was found to be 0.86 which indicated that the tool was reliable.

RESULTS AND DISCUSSION

Section I: Description of demographical proforma of perimenopausal women.

The majority (70%) of the participants were belonging to 45-49 years of age. The maximum (31.70%) of the participants were having PUC educational status. Majority (38.3%) of the participants were Hindu religion, maximum (36.7%) of the participants were having self employee occupation, highest (41.7%) of the participants were home makers.

Majority (60%) of the participants belonged to nuclear family. Maximum (48.4 %) of the participants had a family monthly income of Rs 6001-10,000, highest (55%) of the participants were having number of two children, maximum (56.7 %) of the participants had delivered at the age of 20-24 years, and majority (81.7%) of the participants had undergone normal delivery.

Similar findings were reported in a descriptive study which was conducted to assess the knowledge on factors influencing uterine prolapse and its prevention among women in Karnataka. It revealed that all the participants belonged to the age group of 21-35 years. 70 % of the participants were aged 21-25 years, 41 % of participants were under parity one, 63 % of the participants belonged to Hindu religion, 70 % of the participants had primary education, 96 % were housewives, 58% had income between Rs. 3001-4000 and 92 % had undergone normal delivery.¹¹

Section II: Pre-test knowledge score of perimenopausal women regarding prevention and management of uterine prolapse.

The pre-test level of knowledge scores of perimenopausal women regarding prevention and management of uterine prolapse revealed that majority (63.33%) of participants had inadequate knowledge, 36.67% of them had moderate knowledge and none of them had adequate knowledge.

In the area of anatomy and physiology of uterus the Mean percentage was 33.75, with Mean and SD 1.35 ± 1.117 . In the area of influencing factors of uterine prolapse the Mean percentage was 33.61, with Mean and SD 2.02 ± 1.214 . In the area of prevention and management of uterine prolapse the Mean percentage was 28.05, with Mean and SD 3.08 ± 1.898 .

The Mean percentage in the area of 'factors influencing uterine prolapse' was 46.67 % with a Mean and SD of 4.20 ± 1.608 . The Mean percentage in the area of 'signs and symptoms, diagnosis' was 41.40 % with a Mean and SD of 2.07 ± 1.075 and the Mean percentage in the area of 'structure of uterus' was 36.17 % with a Mean and SD of 2.17 ± 1.295 . The total Means score and SD was 14.09 ± 2.400 with a total score of 46.97 %.

Section III: Effectiveness of SIM on knowledge regarding prevention and management of

uterine prolapse.

Findings revealed that 63.33% of participants were having inadequate knowledge, 36.67% were having moderate knowledge in pre-test. Whereas 86.67% were having adequate and 13.33 % were having moderate knowledge in post- test.

The computed "t" value is higher than the tabulated value ($T_{239}=1.67$) at $p<0.05$ level of significance. Hence it can be inferred that SIM was effective regarding knowledge on prevention and management of uterine prolapse among the perimenopausal women.

Section IV: Association between the pre-test level of knowledge score regarding prevention and management of uterine prolapse and selected baseline variables.

Computed Chi-square (χ^2) test proved that there is significant association between pre-test knowledge score of perimenopausal women regarding prevention and management of uterine prolapse and selected baseline variables like level of education, occupation, nature of work and monthly income.

NURSING IMPLICATIONS

Any research has its worth when it is implied to be beneficial to the public. The findings of the study have implications in the field of nursing education, nursing practice, nursing administration, and nursing research.

Nursing Education.

The findings of the study will help nurse educators to carry out further studies in broader aspects. Nurses should have a thorough knowledge regarding the prevention and management of uterine prolapse so that they can explain and motivate how to prevent and manage in early stage and reduce the complication of its consequences.

Nursing Practice

Health education is considered as the most cost effective powerful tool of any health care agency. The nurse as an important health team member can use this SIM as an effective method to spread awareness among the common public specially perimenopausal women who are ignorant about prevention and management of uterine prolapse.

Nursing Administration

Nursing administrators should implement outreach programmes to make the public aware about the prevention and management of uterine prolapse. Nursing administrators can contact the ladies club, women welfare associations,

Nursing Research

The present study would help nurses and other health personnel to understand the level of knowledge of women regarding uterine prolapse and its prevention..

Recommendations

Based on the findings of the study the following recommendations are put forward for further research.

- A similar study can be undertaken on a large sample to generalize findings.
- A study can be conducted to evaluate the effectiveness of planned teaching programme on prevention and management of uterine prolapse among perimenopausal women.
- A comparative study can be conducted to find out knowledge regarding prevention and management of uterine prolapse among perimenopausal women of rural and urban area.

Limitations

- The study was conducted for small sample size in a selected setting by purposive sampling, which limits the generalization of principles.
- Present study was only limited to knowledge on prevention and management of uterine prolapse.

CONCLUSION

This chapter deals with description of the study findings, implications for nursing practice, nursing administration, nursing education and nursing research, limitation of the study and suggestions.

The following conclusions were drawn on the basis of the findings of the study.

1. The pre-test knowledge score of perimenopausal women regarding prevention and management of uterine prolapse reveals that majority (63.33 %) of the participants were having inadequate knowledge and 36.67 % were having moderate knowledge and

none of the participants were having adequate knowledge regarding prevention and management of uterine prolapse.

2. Area wise pre-test knowledge score of perimenopausal women regarding prevention and management of uterine prolapse showed that highest knowledge score was in the area of signs and symptoms of uterine prolapse, the Mean Percentage was 36.6, with Mean and SD $1.10 \pm .796$ and lowest was in the area of meaning of uterine prolapse Mean Percentage was 23.33 with Mean and SD $.93 \pm 0.841$. In the area of anatomy and physiology of uterus the Mean percentage was 33.75, with Mean and SD 1.35 ± 1.117 . In the area of influencing factors of uterine prolapse the Mean percentage was 33.61, with Mean and SD 2.02 ± 1.214 . In the area of prevention and management of uterine prolapse the Mean percentage was 28.05, with Mean and SD 3.08 ± 1.898 .
3. Post-test knowledge score of perimenopausal women regarding prevention and management of uterine prolapse reveals that majority (86.67%) of the participants were having adequate knowledge and 13.33% participants were having moderate knowledge.
4. The highest knowledge score was in the area of prevention and management with the Mean difference 5.43 and SD ± 2.03 . The computed “t” value is higher than tabulated value in all areas. It can be inferred that the SIM on knowledge regarding prevention and management of uterine prolapse among perimenopausal women was effective.
5. The computed “t” value is higher than the tabulated value ($T_{239}=1.67$) at $p<0.05$ level of significance). Hence it can be inferred that SIM was effective regarding knowledge on prevention and management of uterine prolapse among the perimenopausal women.
6. Computed Chi-square (χ^2) test proved that there was a significant association between pre-test knowledge score of perimenopausal women regarding prevention and management of uterine prolapse and selected demographical variables like level of education, occupation, nature of work and monthly income.

BIBLIOGRAPHY

1. Nayak BK. Menopause. Health Action 2008 Mar; 21(7):18-21.
2. Buckler H. The menopause transition endocrine changes and clinical symptoms. JBMS 2005 Jun; 11(2):61-5.
3. Dutta D.C. Textbook of obstetrics and gynecology. 4th ed .Calcutta: New Central Book Agency (p) ltd; 2005,190-210.
4. Park K. Textbook of preventive and social medicine. 20th ed . India: Banarsidas Bhanot Publishers; 2005.
5. Basavantappa BT. Community health nursing. 6th ed. India: Jaypee Brothers Publishers; 2006.
6. Center for Agro-Ecology and Development. Uterine prolapse report.[Online]. [2002Mar 1]; Available from URL:[http://www.advocacy.net.Org/modules/fck/upload/files/upa/CAED%20uterine % 20% prolapse%20study%20 Report.doc](http://www.advocacy.net.Org/modules/fck/upload/files/upa/CAED%20uterine%20%20prolapse%20study%20Report.doc).
7. Hassanbadi S, Keshavarz H, Marann ES, Sarraf Z. Prevalence of reproductive morbidity among women of Qashqa'i tribe, Islamic Republic of Iran. Eastern Mediterranean Health Journal 1998; 4(2):312-8.
8. Bajracharya A R. Uterine prolapse: A Hidden Tragedy for women [Online]. [2011 Nov 17]; Available from: URL: [http://www.Shvoong.com/medicine_and_health/gynecology/1711392- Uterine prolapse hidden -tragedy – Women](http://www.Shvoong.com/medicine_and_health/gynecology/1711392-Uterine_prolapse_hidden-tragedy-Women)
9. Barsoom RS. Risk factors for genital prolapse in non hysterectomies women around menopause. EJOGR. 2002; 93(2):135-40.
10. Ravindra S TK, Savitri R, and Bhavani A, women's experience of utero- vaginal prolapse.[Online] . Available from: URL www.rhmjournal.org.UK .
11. Bodner-AB, Shrivastava C, Bodner K. Risk factors for uterine prolapse in Nepal. International Urogynaecology Journal 2007 Nov; 18(11):13