

Effectiveness of Structure Teaching Programme on Knowledge Regarding Prevention of Uterine Prolapse Among House Wife

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ABSTRACT

Uterine prolapse is a common reproductive health problem in low-income countries like Nepal. Physical symptoms of this condition influence women's quality of life. Current data insufficiently determine women's awareness of this condition health care seeking practices for uterine prolapsed in India are inadequate. Uterine prolapsed is falling or sliding of the uterus from its normal position in the pelvic cavity into the vaginal canal uterine prolapsed occurs most commonly in women who have one or more vaginal birth & in Caucasian women's and Other condition associated with an increased risk of problems with the supportive tissues of the uterus include obesity & chronic coughing or straining. Obesity place additional strain on the supportive muscles of the pelvis as does excessive coughing caused by lung conditions such as chronic bronchitis & asthma chronic constipation & the pushing associated with it causes weakness in the muscles. The that the mean knowledge score of pretest 8.8 mean post test knowledge score 15.56 mean difference of 7.16 stander deviation was 2.37 and stander error 0.47 T-value is 13.82 Table value 2.4 .at degree of freedom 29 and level of $p < 0.005$ and this shows that there was significant in knowledge score in pre test and post test..

Keywords: Structured teaching programme (STP), knowledge, prevention of uterine prolapse, house wife.

INTRODUCTION

Uterovaginal Prolapse is widespread problem in Nepal. In consideration of diverse geographical determinants and the nature of the clinical or community based study carried out in general population against the women who are sick and actual sufferers during different period of year. Several surgical camps are mushrooming every year with extension of services in various parts throughout the country to address the problem of uterine prolapse. This approach is useful to reduce the prevalence of prolapse and the related magnitude of morbidity. The concept of surgical camps is marvellous but the approaches are undoubtedly less palatable. These kinds of surgical camps for major vaginal surgery at community and district level must be the first of its kind and needs applause. It can be prevented by having increased knowledge on preventive measures like taking adequate rest during puerperium, performing Kegel's exercise, maintaining a healthy weight, avoiding constipation by taking fiber containing diet, avoid heavy lifting and smoking. Knowledge about preventive measures and management may help to prevent complications of the disease and may improve their quality of life.

OBJECTIVES

1. To assess the knowledge of women regarding prevention of uterine prolapsed.
2. To evaluate the effectiveness of structured teaching programme on prevention of uterine prolapsed.
3. To compare the pretest and post test knowledge of women regarding prevention of uterine prolapsed.

METHODOLOGY

The research design used for the study was a pre-experimental research design with one group pre-test post test design. The study was conducted among community women in selected community area Sahpura Bhopal (M.P.). A sample size of 30 community women was selected through purposive sampling technique. The analysis, interpretation and discussion of data collected from 30 community women who are residing in community area Sahpura Bhopal (MP). Descriptive and inferential statistics were adopted for the analysis and interpretation of the data.

FINDINGS AND DISCUSSION

Section-I: Description of demographic variables

1. Data depicts that majority of community women age of 28{96% } where in the age group of 31-35 years, 02 (3%) where above the age of above 35 year, 0 (0%) where in the age group of 26-30 years.
2. In regard to the Educational status 15 (50%) of community women where 10th, 3 (10%) were 12th and 12 (40%) of community women Illiterate.
3. Depicts that majority of community women religion 15 (50%) where in the Hindu, 8 (26%) were in the Christian and 7 (24%) were in the Muslims.

Section- II: Effectiveness of plan teaching programme regarding knowledge in community women.

The data shows that regarding knowledge of prevention of uterine prolapsed in pre test more than half 15(50%) of women score moderate, one third only 13 (41%) score inadequate. 2 (9%) present of women fall under the category adequate where as in post test majority (73.8%) of women score adequate near to one third 6 (20%) of women score moderate and, 2 (6.2%) scored inadequate. the mean knowledge score of pre-test 8.8 mean post test knowledge score 15.56 mean difference of 7.16 standard deviation was 2.37 and standard error 0.47 t-value is 13.82 Table value 2.4 .at degree of freedom 29 and level of $0.p < 0.005$. This shows that there was significant in knowledge score in pre test and post test.

CONCLUSION

Uterine prolapse is a health concern affecting millions of women worldwide. The global prevalence of it (2007) was 2-20% under the age of 45 years. In United States of America U.S.A (2002) was 11.4% and in Egypt (1993) was 56%. Even though prolapse is not considered a life threatening condition, but it affect the women physically, psychologically, sexually and lead to occupational and social limitations, it also increase the risk of reproductive and urinary tract infection. Uterine prolapse is one of the most common causes of reproductive morbidity which influence the women quality of life. Even though prolapsed is not considered a life threatening condition, but it affect the women physically, psychologically, sexually and lead to occupational and social limitations, it also increase the risk of reproductive and urinary tract infection. .

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