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A pre-experimental study to assess the effectiveness of a structured teaching programme on knowledge regarding dysfunctional uterine bleeding and its management among married women in selected rural areas of Raigarh, Chhattisgarh.

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Abstract

Dysfunctional uterine bleeding is irregular uterine bleeding that occurs in the absence of recognizable pelvic Pathology, general medical disease, or Pregnancy. It may be excessively heavy or high and may be prolonged, frequent or random "A pre-experimental study to assess the effectiveness of structured teaching programme on knowledge regarding dysfunctional uterine bleeding and its management among married women in selected rural area at Raigarh, Chhattisgarh." the aim of the study was to assess the knowledge of married women regarding dysfunctional uterine bleeding. In this study quantitative research approach one group pre test post test research design with purposive sampling technique was used to select 40 married women. Objectives of the studies were to assess the pre-test knowledge score of married women, to compare the effectiveness of structured teaching programme between the pre-test and post-test knowledge score, to find out the association between pre test knowledge scores with selected socio-demographic variables. The conceptual framework used in this study was Ludwig Von Bertalanffly (1968) General system theory model. The Demographic data were collected by using self structured questionnaires was used to collect data related to knowledge regarding dysfunctional uterine bleeding. The study finding revealed that there was marked increased in the overall knowledge of post-test than level of knowledge of pre-test which shows effectiveness of structured teaching programme in which pre-test mean score of knowledge was found 10.27 with the SD of 2.63 and overall post-test mean score of knowledge was found 18.37 with the SD of 2.02. The calculated paired 't' test value was 12.04 which was found to be significant at $p<0.05$ level of significance. There was significant association was found between pre-test level of knowledge with selected socio-demographic variable- previous knowledge. There was no significant association was found between pre-test level of knowledge with selected socio-demographic variable age, age of marriage, religion, education, occupation, family income, number of live child, last three months menstruation history, how many pads using on 1" and

2nd day of period. The study conclude structured teaching programme was effective in improving the knowledge regarding dysfunctional uterine bleeding.

Key words -Assess, Structured teaching programme, Knowledge, Dysfunctional uterine bleeding, Selected area, Married women.

1. Introduction

Background of the study:

Dysfunctional uterine bleeding is a common, debilitating condition. Dysfunctional uterine bleeding is the diagnosis given to women with abnormal uterine bleeding in whom no clear etiology can be indentified. Dysfunctional uterine bleeding is defined as the spectrum of abnormal menstrual bleeding patterns that may occur, in anovulatory women who have no medical illness or pelvic pathology. Dysfunctional uterine bleeding includes a decrease or increase in blood loss during menses, a decrease or an increase in the length of menses and irregular bleeding episodes that occur at frequent intervals between menses. It may also occur as prolonged bleeding at irregular intervals. Dysfunctional uterine bleeding is the clinical term used to describe abnormal uterine bleeding not associated with a clinically detectable organic cause, in women of child bearing age. Currently it is defined as a state of abnormal bleeding due to anovulatory cycles.

Dysfunctional uterine bleeding is one of the common gynecological problems encountered in clinical practice and is defined as abnormal bleeding from the uterus in the absence of an organic lesion to account for. It is the most common cause of Dysfunctional uterine bleeding but remains a diagnosis of exclusion. Thus, if on bimanual examination, the uterus and appendages are found to be normal, this term is used.2

Dysfunctional uterine bleeding can arise from a bewildering number of sources. Some of the few common conditions causing. Abnormal uterine bleeding" for which the reproductive age women approach gynecologist are Anovulation associated, Pregnancy Complications, Sub mucous fibroids, endometrial polyps, infection associated, coagulation abnormalities. IUD Complications. All the causes of dysfunctional uterine bleeding should be ruled out before making a diagnosis of dysfunctional uterine bleeding, by history, systemic and local examination as well as relevant investigations. The organic causes are usually bening including pregnancy complications, fibroids and pelvic inflammatory disorders. Dysfunctional uterine bleeding can be anovulatory but is mostly ovulatory (70-80%). 5

Dysfunctional uterine bleeding is the most common symptom of gynaecological conditions, which is defined as any type of bleeding in which the duration, frequency or amount is excessive for an individual. Dysfunctional uterine bleeding has objectively measured menstrual loss and labelled heavy bleeding as more than 80 ml blood loss per cycle.

Women's perception of what is normal regarding menstruation depends largely on their understanding of menstruation and what they perceive its functions to be. It is difficult to measure menstrual blood loss objectively and the quantitative criteria do not take into accounts the quality of life which is significant.

Abnormal bleeding could vary from irregular bleeding to heavy menstrual should aim therefore to improve quality of life measures."

2. Need for The Study

This Study aims to explore the knowledge regarding dysfunctional uterine bleeding among married women's. The main need of the study is to determines the prevalence, collecting, information related to dysfunctional uterine bleeding. This study is provide the information about dysfunctional uterine bleeding among married women in rural areas.

The proffered therapy in the management of dysfunctional uterine bleeding among women is rural area. The purpose of the study was to describe the prevalence of the cause of chronic dysfunctional uterine bleeding among married women of reproductive age using the PALM COLEN Classification system. Previous studies have reported that in both premenopausal and postmenopausal women, dysfunctional uterine bleeding was the most common symptoms with an incidence of up to 68%. The age of 25 and 49 the highest was 22.2% at 40 to 44 years, 18.7% at 55 to 39 year and 2.9% at 50 to 55 years. Dysfunctional uterine bleeding is reported to occur in 9 to 14 % women between menarche and menopause. The prevalence varies in each country.

"In India" the reported prevalence of dysfunctional uterine bleeding is around 17.9%. The international federation of gynaecology and obstetrics to abandon the use of dysfunctional uterine bleeding. While continue to use the term abnormal uterine bleeding and heavy menstrual bleeding**.**

3. Statement of The Problem

A pre-experimental study to assess the effectiveness of structured teaching programme on knowledge regarding dysfunctional uterine bleeding and its management among married women in selected rural area at Raigarh, Chhattisgarh.

4. Objectives

1. To assess the pre-test and post-test knowledge score of women's regarding dysfunctional uterine bleeding.
2. To evaluate the effectiveness of structured teaching programme by comparing the pre-test and post-test knowledge score.
3. To find out the association between pre-test knowledge scores with selected socio-demographic variables.

5. Hypotheses

Ho- There will be no significant association between knowledge of married women's regarding dysfunctional uterine bleeding selected socio-demographic variable at 0.05 level of significance.

H_1- There will be significant between pre-test and post -test knowledge score of women's regarding dysfunctional uterine bleeding among married women's and demographic variable at 0.05 level of signification.

H_2- There will be significant association of pre-test knowledge scores regarding Knowledge of dysfunctional uterine bleeding among married women's with selected demographic variables at 0.05 level of significance.

Variable:

- In the presented study the independent variable was a **structure Teaching Program**
- In the presented study the dependent variable were **Knowledge Regarding dysfunctional uterine bleeding and its management among married in women .**

6. Criteria of Sample Selection

Sampling criteria involves selecting the cases that meet some predetermine criterion of importance. The criteria for sample selection are mainly depicted under two headings, which include the inclusion criteria and exclusion criteria-

7. Inclusion Criteria

1. 40 Married women age (35-55).
2. Women's who are willing to participate.
3.Women's who are present at the time of data collection. 3.
4. Married womens who communicate in Hindi.

8. Exclusion Criteria

1. Women's who did not willing to participate.
2. Women's who are not present at the time of data collection
3. Married adult women who did not communicate in hindi.
4. Women who are widow and divorcy.

Description of The Tool- The tools consist of-Section I-socio-demographic variables - Socio demographic data contain 10 items such as age, age in marriage, religion, education, occupation, family income, last three months periods, using pads on 1 and 2nd day, and previous knowledge about dysfunctional uterine bleeding.

Section II- self structured questionnaire Comprise of 24 multiple choice questions is used to assess the knowledge regarding dysfunctional uterine bleeding and its managements among married women in pre-test and post-test.

The total score was converted into percentages and interpreted as follow-

- 0-8: poor knowledge level.
- 9-16: Average knowledge level.
- 17-24: Good knowledge level.

Organization of Study Findings

- Criteria-wise analysis of Knowledge Regarding dysfunctional uterine bleeding and its management among married women before and after the intervention.
- Criteria-wise analysis of mean , mean percentage SD and standard error and t value knowledge regarding dysfunctional uterine bleeding and its management among married women before and after test.

Criteria-wise analysis of knowledge levels of Knowledge Regarding dysfunctional uterine bleeding and its management among married women before and after the intervention

Table 1.1 Distribution of subject knowledge level of married women after Pre-Test and Post Test

(N=40)

S.no.	Criteria	Pre-Test	Post Test
1	Poor	26	3
2	Average	12	6
3	Good	2	31

Figure 1.1 Distribution of subject knowledge level of married women after Pre-Test and Post Test

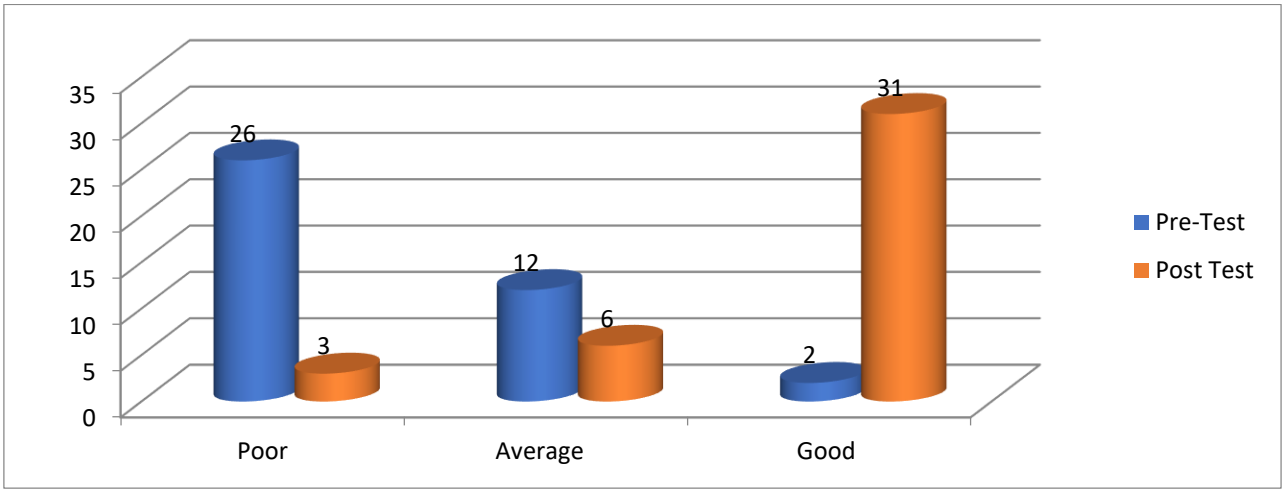

Figure:1.1 Reveals that in the **pre-test**,2student had good knowledge,12 had average knowledge, 26 had poor knowledge. In the **post-test**, 31married women s had good knowledge, 06 had average knowledge, 3 had poor knowledge.

Criteria-wise analysis of mean, mean percentage SD and standard error and t value knowledge regarding dysfunctional uterine bleeding and its management among married women before and after test.

Table1.2 Criteria-wise analysis of knowledge level of married women s before and after test

Score	Mean	Mean difference	SD	DF	Paired t Value	p value
Pre-test	10.27	8.1	2.63	39	5.19	<0.05 Highly Significant
Post-test	18.37		2.02		18.63	

Table Reveal The mean pre-test score was **10.27 ± 2.63**, which increased to **18.37 ± 2.02** in the post-test, with a **mean difference of 8.10**. The paired *t*-test showed a statistically highly significant difference between the pre-test and post-test scores (**t = 5.19, df = 39, p < 0.05**), indicating that the intervention was effective in significantly improving the participants' score.

Nursing implication-
The implications of the study can be seen in the area of Nursing education, Nursing practice, Nursing research and Nursing administration.
Nursing education-The community Health Nurse as a educator incorporate the major study findings in Nursing curriculum at all level in order to well equip the students to address the inadequate knowledge and negative attitude perceived health related behaviour among healthy women and unhealthy women.
Nursing practice-The community Health Nurse plays a vital role in educating and motivating, women for dysfunctional uterine bleeding, and emphasizes on the improve health status of the rural community who were unserved and under served to improve their health status and to change the behaviour regarding dysfunctional uterine bleeding.
Nursing research-The findings of the study can be disseminated to Community Health Nursing, Nurse practicenores and the student nurses through internet, journals, literature etc.

Nursing administration-The Community Health Nurse administrator should collaborate with Governing bodies to create policies, building up and mobilizing resource, creating coalition with Non-Governmental organizations in order to create knowledge regarding

Delimitations

- 40 married women age (35-55 year).
- Married adult womens who communicate in Hindi.
- Study is restricted in selected rural areas of Raigarh.

9. Recommendations

- A similar study can be conducted to assess the knowledge on dysfunctional uterine bleeding among married women.
- A similar study could be done with other teaching strategies to identify the differences in their knowledge regarding dysfunctional uterine bleeding.
- A comparative study can be conducted among rural and urban women.
- A prospective study can be conducted to see the effect of formal teaching programme of dysfunctional uterine bleeding in various settings.
- The intervention tool can be utilized by the health care professionals, nurse educator, and clinical instructors in their future.
- A longitudinal study to be conducted for the effect of education regarding dysfunctional uterine bleeding among married women population

10. Conclusion

The main conclusion drawn from the present study revealed that the calculated paired 't' value was t= 12.04 which was found to be highly significant at $p<0.05$ level related to knowledge on dysfunctional uterine bleeding and there were significant association between pre test level of knowledge with their selected socio- demographic variables such as previous knowledge related to dysfunctional uterine bleeding. Thus structured teaching programme was effective to enhance good knowledge on dysfunctional uterine bleeding.

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