



"A Study To Assessed The Effectiveness Of Planned Teaching Programme On Knowledge Regarding Prevention Of Malaria Among Women's In Selected Rural Area Of Rewa City (M.P)"

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ABSTRACT:

Communicable diseases pose significant threats to public health worldwide, with malaria being a prominent example. Originating from the bite of infected female *Anopheles* mosquitoes, malaria remains a leading cause of mortality and morbidity, particularly in regions like India. This study focuses on assessing the effectiveness of a planned teaching program aimed at enhancing knowledge regarding malaria prevention among women in the rural area of Rewa city, Madhya Pradesh. Through pre-test and post-test evaluations, demographic analysis, and correlation studies, the research identifies significant gaps in knowledge and highlights the potential of structured educational interventions in mitigating the impact of malaria. The findings underscore the urgent need for comprehensive health education initiatives and targeted interventions to improve preventive behaviors and reduce the burden of malaria in vulnerable communities.

Keywords: Malaria, Communicable diseases, Planned teaching program, Health education, Public health, Rural community, Knowledge assessment, Preventive measures, *Anopheles* mosquitoes, India

INTRODUCTION

"You have so much power to being awareness, prevention and change" (Ashley Judd) Communicable diseases are the deadly disease, which affect the common population today. Among the many communicable disease malaria is a protozoan disease which has demonstrated diverting impact in almost whole of India. Among many health problems malaria is the one of the common disease in community. Malaria is one of the oldest recorded diseases in the world. Malaria literally means "bad air" and for centuries was thought to result from inhalation of swamp vapors .it is now known that malaria is transmitted by the bite of female *Anopheles* mosquito which abound in humid ,swampy areas. Malaria is the disease responsible for very high mortality and morbidity. Malaria is related to breeding of mosquitoes caused by protozoan of the genus *Plasmodium* and transmitted to man by species of infective female *Anopheles* mosquitoes called vectors or carriers. When one of these mosquitoes bites you, it feeds on your blood and injects malaria parasites into your body. It only takes one bite to infect you. In some forms of malaria, parasites can stay dormant in your body for years, occasionally "waking up" and causing you to have more attacks of malaria. However, you can't catch malaria from another person, just from a mosquito (Basavanthappa BT 1998).

NEED FOR THE STUDY

Malaria is a protozoan disease of the genus *Plasmodium* caused by the bite of infected female *Anopheles* mosquito, characterized by high fever and rigors. Malaria is a major public health problem. The incidence Malaria disease is increasing year by year due to some reasons may be due to lack of training personnel, drug resistance, population mobility, natural disaster & lack of knowledge about Malaria disease and its prevention. India had an estimated 10.6 million cases in 2006 that account for approximately 60% of cases in the WHO South-East Asia Region. With over 100 million slides examined every year, all reported cases are confirmed; about half are due to *Plasmodium falciparum*. However, the percentage of cases detected through active versus passive surveillance is not known. The state's that are most affected are Uttar Pradesh, Bihar, Karnataka, Orissa, Rajasthan, Madhya Pradesh, Pondicherry and the largest numbers of deaths were reported from Orissa, followed by West Bengal, Mizoram, Jharkhand, Meghalaya, Karnataka, Tripura and Assam.

PROBLEM STATEMENT

"A study to assessed the effectiveness of planned teaching programme on knowledge regarding prevention of malaria among women's in selected rural area of Rewa city (M.P)"

OBJECTIVES OF THE STUDY

1. To assess the Pre-existing knowledge score regarding malaria before giving a Planned Teaching Programme test.
2. To find out the effectiveness of Planned Teaching Programme.
3. To find out the association between pre post test knowledge level with their & selected demographic variable among Community people in selected Rural slum area in Rewa.

HYPOTHESIS

H1: The mean post test knowledge scores of community people receiving structured teaching programme will be significantly higher than the mean pretest knowledge scores.

H2: The mean post test practice scores of community people receiving structured teaching programme will be significantly higher than the mean pretest practice scores.

H3: There will be significant association between the knowledge and practice Scores of adults receiving teaching programme on Malaria prevention with selected demographic variables like age, sex, religion, education, type of Family, occupation and income.

ASSUMPTION

This study assumed that: -

- The community people may have previous knowledge and practice regarding the prevention of malaria.
- Structured teaching programme may enhance the knowledge of community people regarding the prevention of malaria.

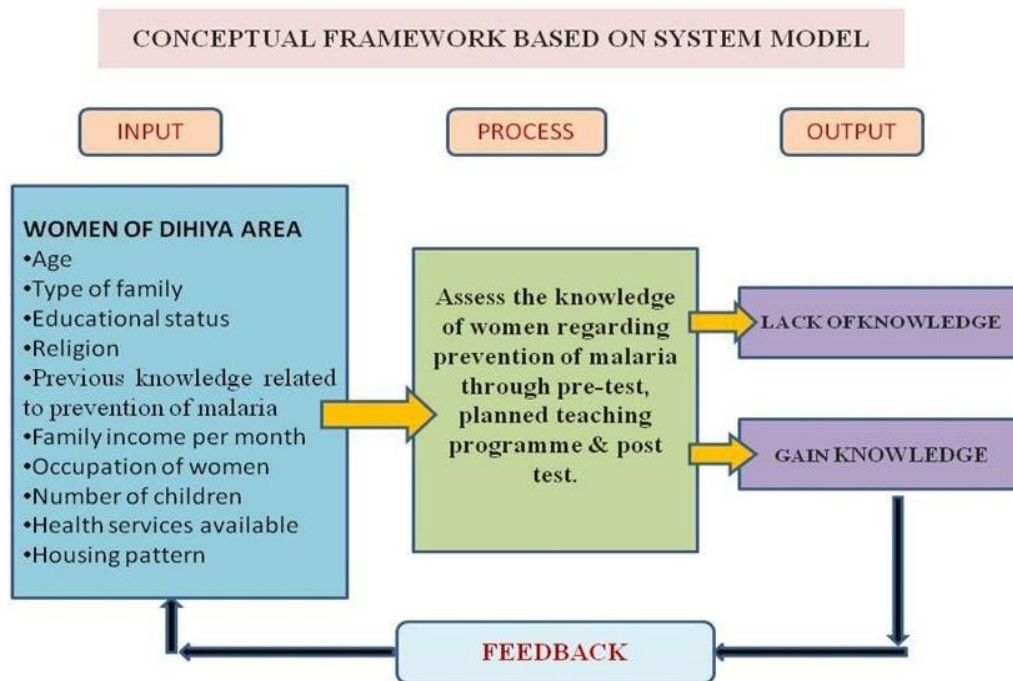
DELIMITATION OF THE STUDY

Sample size is limited to 50 community people at selected rural slum at Hassan. The study period is delimited to 4-6 weeks of duration

CONCEPTUAL FRAME WORK

The conceptual frame work represents a less formal attempt at organizing a phenomena conceptual models deal with concepts that are used as building blocks and provide a conceptual perspective regarding interrelated phenomena which are closely structured (Polit & Hungler 1999).

This study is intended to evaluate the effectiveness of structured teaching programme in terms of improving the knowledge and practice of adults receiving Health teaching on Malaria prevention. Conceptual frame work selected for this study was based on general system theory as postulated by Von Ludwig Bertalanfly, in this theory main focus is on the discrete parts and their inter relationship (Marcia Stanhope, 2004)





REVIEW OF LITERATURE

Review of literature is a broad, comprehensive, in depth, systematic and critical review of scholarly publication, unpublished scholarly print materials, audiovisual materials and personal communications. (Basavanthappa .BT, 1998).

Review of literature is the systematic and critical review of the most important published scholarly literature on a particular topic. This helps the investigator to find out what is already known and what problems remain to be solved, since effective research is based on the past knowledge, this exercise provides useful hypothesis and helpful suggestions for significant investigations.

The review of literature is discussed under the following headings.

1. Literature related to Incidence and prevalence of Malaria.
2. Literature related to Knowledge and practices of the adults regarding Malaria Prevention.
3. Literature related to Control measures regarding prevention.
4. Literature related to Effectiveness of Structured Teaching Programme.

Research methodology encompasses problem-solving, problem statement formulation, historical research, and research evaluation. It involves the systematic collection, assembly, and examination of available data, making assumptions, testing those assumptions, and deriving practical applications from verified principles (Kothari, 1998). It serves as a structured approach to address research problems effectively.

Research Approach:

The research approach outlines the fundamental procedures for conducting research, guiding the collection and analysis of data. Evaluative research, as an applied form, evaluates the effectiveness of programs, practices, procedures, or policies (Polit & Hungler, 1995). Given the objective to develop and evaluate a planned teaching program on the effect of television on children, an evaluative research approach was deemed appropriate.

Research Design:

The research design is the researcher's overall plan for obtaining answers to research questions or testing research hypotheses. It details the strategies adopted to develop accurate and interpretable information (Polit & Hungler, 1999). In this study, a pre-experimental one-group pretest-posttest design was employed to measure the effectiveness of the planned teaching program for women.

Variables:

Variables represent attributes of individuals or objects that vary. In this study, independent variables include age, family type, education status, religion, previous knowledge regarding malaria prevention, while the

dependent variable is the knowledge of women.

Setting of Study:

The setting refers to the physical location and conditions where data collection occurs. The study was conducted in the Dihiya village area of Rewa city.

Population and Sample:

The population refers to the total aggregate of individuals meeting specified criteria. The population for this study comprised women in the Dihiya area. A sample of 50 women was selected using non-probability purposive sampling techniques.

Tool Development:

An interview schedule was developed to assess women's knowledge regarding malaria prevention. The tool underwent several iterations, including extensive literature review, expert opinions, and pilot testing, to ensure validity and reliability.

Data Collection Technique and Instruments:

Data collection involved the use of an interview schedule to assess women's knowledge regarding malaria prevention. Formal permission was obtained, and data were collected through interviews conducted on 13/12/22.

Procedure for Data Collection:

Data collection commenced after obtaining formal written permission from the medical officer. Fifty women were selected using convenience sampling. Pre-tests were conducted before administering the planned teaching program, followed by post-tests using the same questionnaire.

Plan for Data Analysis:

Data analysis included descriptive and inferential statistics, with findings presented in tables and figures. Analysis and interpretation were conducted in line with the study objectives.

Planned Teaching Programme:

The planned teaching program aimed to educate women in the rural Dihiya area about malaria prevention. Topics included malaria's impact on women's health, its causes, symptoms, prevention, and treatment. The program duration was set at 20-25 minutes.

DATA ANALYSIS AND INTERPRETATION

This chapter deals with the analysis and interpretation of data collected from 50 parent using structure questionnaire technique. The purpose of analysis is to summarize, compare and test the proposed relationship and inference the findings.

Analysis is categorizing ordinary manipulating and summarizing of data to obtain answer to research problems interpretation of tabulation data can bring light to the real meaning of the findings of the study.

(kerlinger, 1973) Interpretation refers to the purpose of making sense of results and examining the implication of the finding within the broad context.

(Abdullah and kavine, 1979) In this study analysis and interpretation of data was based on data collection from 50 women of village Dihiya through structured questionnaire.

Analysis and interpretation of data was based on the objectives of the



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study and hypothesis to be tested. Both descriptive and inferential statistics have been used.

A quasi experimental study to assess the effectiveness of planned teaching program on knowledge regarding prevention of malaria in selected rural area of Rewa city.

Section I -Demography

Section II -To assess the pretest & posttest knowledge of women regarding Prevention of malaria.

Section III -To assess the effectiveness of planned teaching on knowledge of Women's

Section IV -Find out the association between pretest knowledge with selected Demographic variables

S.NO	VARIABLES	FREQUENCY	PERCENTAGE
1	AGE		
	20-25 Yrs	16	32
	26-30 Yrs	17	34
	31-35 Yrs	13	26
	36-40 Yrs	4	8
2	Family types		
	Nuclear	34	68
	Joint	16	32
3	Education status		
	No formal education	1	2
	Primary	5	10
	Secondary	24	48
	Higher secondary	14	28
	Graduate	6	12
4	Religion		
	Hindu	32	64
	Muslim	11	22
	Christian	5	10
	Others	2	4
5	Previous knowledge		
	Yes	11	22
	No	39	78
6	Source of information		
	Family types	20	40
	Relatives	27	54
	Friends	2	4
	community	1	2

Table No -01

Demographic distribution of the samples (n=50)

Table – 02

Allotment of score for assessment of knowledge of women's (N=10)

S.No	Description	Max.score	Good	Average	Poor
01	Knowledge	15	11-15	6-10	0-5

Description: - The Table No 02 indicates the assessment of knowledge by asking total 15 questions to women's regarding prevention of malaria.. Score can be categorized in to three categories (Good, Average, and Poor).

Table No 03 Assessment of pretest knowledge of women's (N=50)

S.no	Category	Frequency	Percentage	Mean	SD
01	Good	0	0		
02	Average	7	14	3.76	1.76
03	poor	43	86		

The data presented in the table no 03 clearly indicates that 43 women have poor knowledge regarding prevention of malaria. The mean & SD also justify the knowledge.

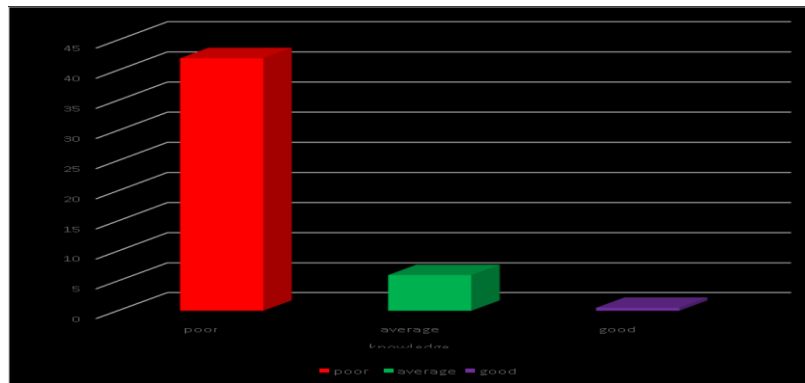


Fig. Pretest knowledge of womens

Table No 04 Assessment of posttest knowledge of women (N=50)

S.no	Category	frequency	Percentage	Mean	SD
01	Good	40	80		
02	Average	9	18	11.68	2.20
03	Poor	1	2		

The data presented in the table no 03 clearly indicates that 40 women's have good knowledge regarding prevention of malaria The mean & Sd also justify the knowledge

Table No- 05

Correlation between pre & post knowledge of women's (N=50)

S.no	Description	Mean	SD	Correlation
01	Pre test knowledge	3.76	1.76	0.77
02	Post Test knowledge	11.68	2.20	

The table no. 06 the comparison between pre and post knowledge made by correlation. Correlation is the appropriate statistical method to compare the pre & post test knowledge score. The result showed positive correlation

Table No- 06

Comparison between pre & post knowledge of women's (N=50)

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S.no	Description	Mean	SD	T_test
01	Pre knowledge test	3.76	1.76	1.66
02	Post knowledge Test	11.68	2.20	

The table no.06 comparison between pre and post knowledge made by test of significance method.

Table No-07

Association of pretest knowledge of women's regarding prevention of malaria with selected demographic variables (N=10)

S.no	Variables	Poor	Average	Good	Total	DF	Chi-value	p-value	inference
1	Age								
	20-25 yrs	12	4	0	16				
	26-30 yrs	15	2	0	17	6	150	0	MS
	31-35 yrs	12	1	0	13				
	36-40 yrs	4	0	0	4				
2	Family types								
	Nuclear	30	4	0	34				
	joint	13	3	0	16	2	3.51	0.318	NS
3	Education status								
	No formal education	1	0	0	1				
	primary	4	1	0	5	8	15.71	0.204	NS
	Secondary	22	2	0	24				
	Higher secondary	11	3	0	14				
	Graduate	5	1	0	6				
4	Religion								
	Hindu	25	7	0	32				
	Muslim	11	0	0	11	6	8.84	0.451	NS
	Christian	5	0	0	5				
	others	2	0	0	2				
5	Previous Knowledge								
	Yes	5	6	0	11				
	No	38	1	0	39	2	2.122	0.547	NS
6	Sources of information								
	Family types	16	4	0	20				
	relatives	24	3	0	27	6	5.29	0.807	NS
	friends	2	0	0	2				



(Result significant at 0.05% level of significance)

Abbreviation

MS= Most significant S= Significant
NS= Not significant NP= Not possible

Description:- Table no -07 reveals that the association between knowledge of women's regarding prevention of malaria with demographic variables is statistically tested by applying chi-square test. The age of the students was found most significant. Another variable were not significant.

Discussion:

This chapter critically examines the major findings of the study and engages in a detailed discussion of those findings in relation to the research objectives. The primary objective of the study was to assess the effectiveness of a planned teaching program regarding malaria prevention in the rural area of Dihiya, Rewa, MP.

Problem Statement and Objectives:

The study aimed to evaluate the pre-existing knowledge regarding malaria and determine the effectiveness of the planned teaching program. Additionally, it sought to explore the association between pre-test and post-test knowledge levels with selected demographic variables among community members in the selected rural area of Rewa.

Major Findings:

The study revealed significant demographic characteristics among the sample population, with a notable distribution across various age groups and family structures. Pre-test results indicated a considerable proportion of women with poor knowledge regarding malaria, which notably improved post-teaching program implementation. The majority of participants hailed from nuclear families, with a significant portion having no prior knowledge of malaria prevention.

Summary:

Malaria remains a prevalent disease with significant morbidity and mortality rates, particularly in rural communities like Dihiya. The study underscores the importance of structured educational interventions in improving knowledge levels regarding malaria prevention. With five types of malaria identified, it's crucial to target educational efforts towards enhancing awareness and preventive measures.

Conclusion:

The study concludes that while a substantial portion of the population exhibits poor knowledge regarding malaria prevention, there is potential for improvement through planned teaching programs. Enhanced education and awareness initiatives are necessary to address the gaps in knowledge and reinforce preventive measures within the community.

Implications, Limitations, and Recommendations:

The study has far-reaching implications for nursing practice, education, administration, and research. It underscores the importance of health education initiatives targeted towards women in various settings to promote preventive behaviors. However, the study's limitations, including its focus on a specific rural area and sample size, warrant further research for generalizability. Recommendations include conducting similar studies on a larger

scale, in both rural and urban settings, and exploring the effectiveness of interventions aimed at promoting children's health status.

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