



“The Effectiveness of a Structured Teaching Programme on Knowledge Regarding Preventive Measures of Uterine Prolapse Among Multiparous Women”

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Abstract

A study titled “A study to evaluate the effectiveness of a structured teaching programme on knowledge regarding preventive measures of uterine prolapse among multiparous women in a selected hospital at Indore” was conducted to:

1. Assess the pre-test and post-test knowledge scores regarding preventive measures of uterine prolapse among multiparous women.
2. Evaluate the effectiveness of a structured teaching programme.
3. Identify the association between pre-test knowledge scores and selected demographic variables.

The conceptual framework for the study was based on Ludwig von Bertalanffy's theory. A quasi-experimental approach with a one-group pre-test post-test design was adopted. A total of 120 multiparous women were selected using a purposive sampling method. Data was collected through a structured interview schedule. The findings revealed that the structured teaching programme significantly increased knowledge among multiparous women.

The post-test knowledge scores were significantly higher than the pre-test scores ($p < 0.05$). The mean pre-test score was 13.22, and the mean post-test score was 19.82, with a mean difference of 6.62. Significant associations were observed between pre-test knowledge scores and selected demographic variables such as education, occupation, and income.

The study concluded that structured teaching programmes are effective in improving knowledge regarding uterine prolapse prevention among multiparous women.

Keywords: Multiparous women, Uterine prolapse, Preventive measures, Structured teaching programme

Introduction

The uterus, a pear-shaped organ of the female reproductive system, is located in the pelvis and supported by the pelvic floor muscles. Weakening of these muscles can result in uterine prolapse, where the uterus descends into the vaginal canal. Uterine prolapse is common among multiparous women due to pelvic muscle injuries incurred during childbirth. Other contributing factors include a high body mass index, loss of estrogen, and repetitive downward pressure on the pelvic floor from activities like lifting and sneezing.

While mild prolapse can often be managed with conservative treatments, such as pelvic floor exercises, severe cases may require medical interventions like pessary insertion or surgery. Preventive measures, including structured education, can play a vital role in reducing the incidence of uterine prolapse.

Need for the Study



Maternal health issues, such as uterine prolapse, significantly affect women's quality of life. Despite its prevalence, many multiparous women lack adequate knowledge regarding its prevention. This study aims to bridge this knowledge gap, empowering women to adopt preventive measures.

Statement of the Problem

A study to evaluate the effectiveness of a structured teaching programme on knowledge regarding preventive measures of uterine prolapse among multiparous women in a selected hospital at Indore.

Objectives of the Study

1. To assess the pre-test and post-test knowledge scores regarding preventive measures of uterine prolapse among multiparous women.
2. To evaluate the effectiveness of a structured teaching programme on preventive measures.
3. To determine the association between pre-test knowledge scores and selected demographic variables.

Operational Definitions

1. **Effectiveness:** Improvement in knowledge levels regarding preventive measures of uterine prolapse.
2. **Structured Teaching Programme (STP):** A systematically planned educational intervention.
3. **Knowledge:** Information gained by multiparous women as assessed by a structured interview schedule.
4. **Preventive Measures:** Steps taken to prevent uterine prolapse.
5. **Uterine Prolapse:** Downward displacement of the uterus into the vaginal canal.
6. **Multiparous Women:** Women who have given birth two or more times.

Hypotheses

- **H1:** The mean post-test knowledge score of multiparous women will be significantly higher than the mean pre-test knowledge score.
- **H2:** There will be a significant association between pre-test knowledge scores and selected demographic variables.

Assumptions

- Multiparous women may have limited knowledge about the prevention of uterine prolapse.
- A structured teaching programme can effectively increase knowledge levels.

Limitations of the Study

- Limited to multiparous women admitted to the postnatal ward of a selected hospital.

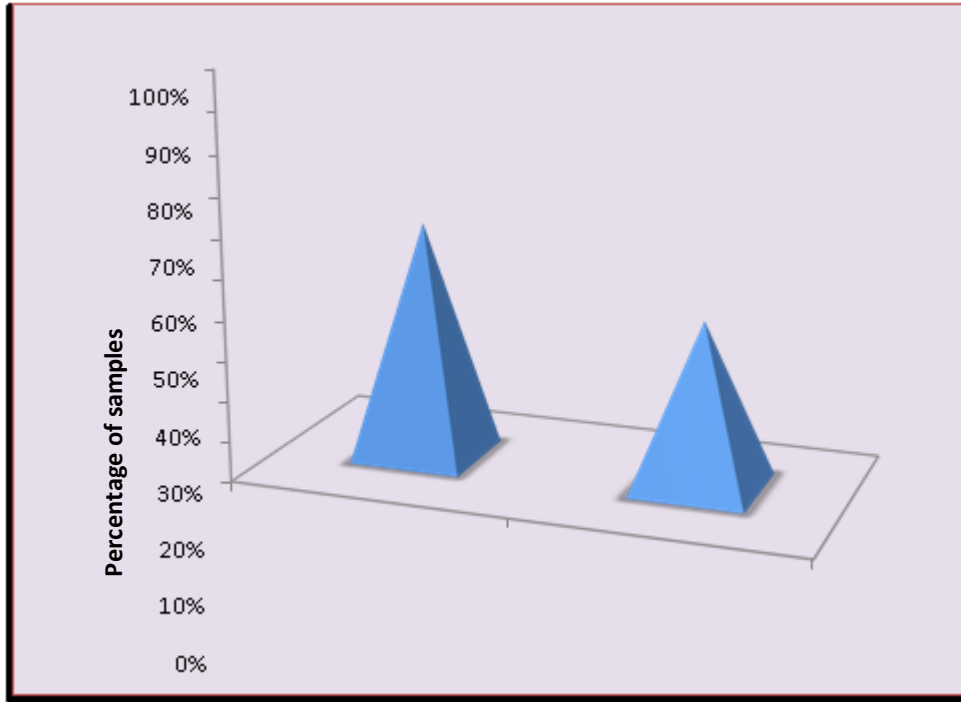
Methodology

Research Approach

An evaluative research approach was employed using a pre-experimental method.

Research Design

A one-group pre-test post-test design was used to evaluate the effectiveness of the structured teaching programme



Distribution of subjects reveals that 58.3 % were Nuclear family and 41.7 % were joint family.

Figure1: Graph showing distribution of samples according to their type of family

Table1: Distribution of samples according to their place of previous delivery

N=120

Place of previous delivery	Frequency	Percent
a. Home delivery	46	38.3
b. Hospital delivery	74	61.7

Distribution of subjects reveals that 38.3% were had home delivery and 61.7

% were had hospital delivery.

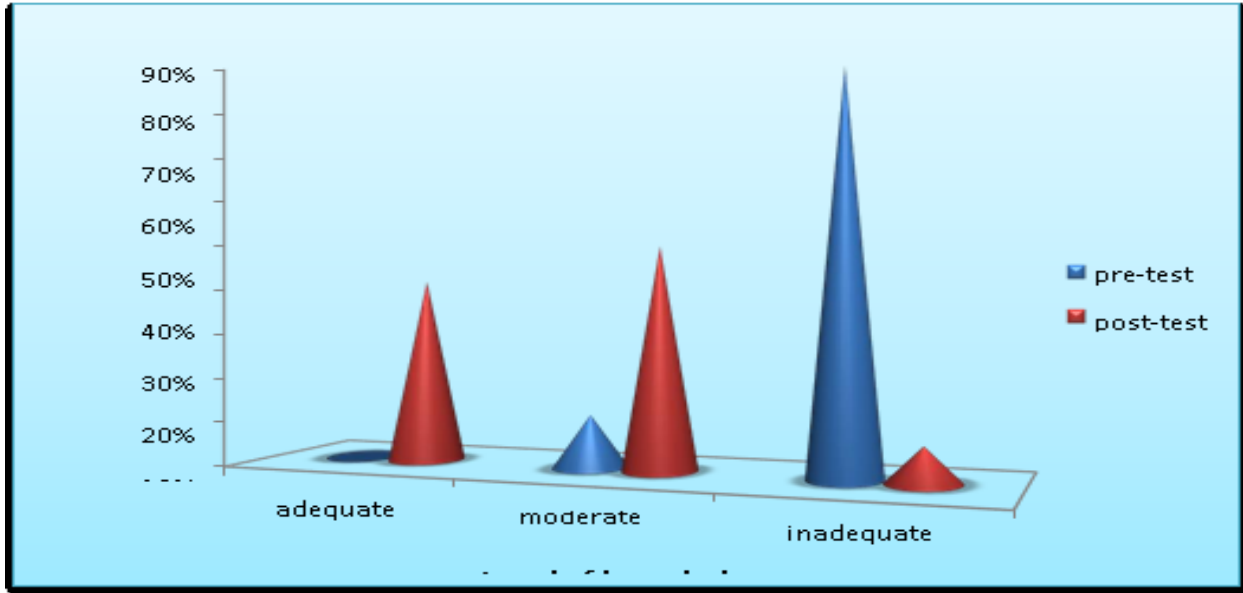


Figure2: Comparison of pre-test and post-test knowledge level of multiparous women.

To test the statistical significance between the pre-test and post-test score,

Paired ‘t’ test was used.

H_{01} : there will be no significant difference between the means of pre-test and post-test knowledge scores of the samples.

Table2: Comparison of pre-test and post-test mean and mean percentage scores of subjects

N=120

S I L N O	Knowled ge aspects	M ax sc or e	Pre-test		Post-test		Mean differenc e	T value	Inference
			Mean	Mean %	Mean	Mean %			
1	General aspect	7	2.08	29.71%	2.28	32.57%	0.2	10.145	S



2	Causes of uterine prolapsed	3	0.81	27%	1.81	60.33%	1	11.212	S
3	Signs and symptoms	5	2.10	42%	3.15	63%	1.05	13.898	S
4	Preventive aspect	15	6.31	42.06%	8.91	59.4%	2.6	14.516	S
Overall knowledge		30	13.22	44.06%	19.82	66.06%	6.6	20.405	S

S= Significant

From the above table it evident that the mean difference between the pre-test and post-test score was 6.6. The obtained "t" value, **20.405** is greater than the table value at 0.05 (2.009575) level of significance. Therefore, the null hypothesis (H_{01}) is rejected. Hence it can be concluded that there is significant difference between the pre-test and post-test knowledge levels of women and the difference of mean observed was true difference. Thus the teaching programme was effective in terms of gain in knowledge among multiparous women.

3. ASSOCIATION OF PRE-TEST KNOWLEDGE SCORES WITH SELECTED DEMOGRAPHIC VARIABLES

Chi-square test was used to find out the association between the pre-test knowledge scores of the samples and selected demographic variables.

H_{02} : there will be no significant association between the pre-test knowledge score and selected demographic variables.

Table17: Chi-square computed between pre-test knowledge scores of multiparous women and selected demographic variables.

N=120

Variables	Knowledge		ChiSquare	df	Inference
	Below median	Above median			
1.Age					
a. 25-35years	36	24	1.931	2	NS
b. 36-45years	34	16			



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c. 46 years and above	8	2			
2. religion	32	18			
a. Hindu	28	12	1.714	3	NS
b. Muslim	14	6			
c. Christian	4	6			
d. Any other					
3. Educational					
Qualification					
a. No formal education	38	12	11.870	3	S
b. Primary education	28	12			
c. Secondary education	16	4			
d. Graduation and above	4	6			

4. Occupation					
a. House wife	36	14	7.853	3	S
b. Self employed	14	16			
c. Private employed	16	4			
d. Govt employed	12	8			
5. Income					
a. Lessthan3000	36	14	8.099	3	S
b. Rs. 3001-6000	26	14			
c. Rs. 6001-9000	14	6			
d. Rs.9001andabove	2	8			
6. Place of residence					
a urban	34	16	0.170	1	NS
b rural	44	26			
7. Type of family					
a nuclear	46	24	0.190	1	NS
b joint	32	18			
8. place of previous delivery					
a home	32	14	0.342	1	NS
b hospital	46	28			
9. Number of children					
a. Two	28	22	1.526	1	NS
B More than two	50	20			

$\chi^2_{(1)}=3.841, \chi^2_{(2)}=5.991, \chi^2_{(3)}=7.815; \chi^2_{(4)}=9.488 \chi^2_{(5)}=11.070, P<0.05$

S=Significant

NS=Not Significant

CONCLUSION:

The main conclusion drawn from this present study was that the knowledge of multiparous women were below average knowledge in pre - test. Multiparous women were above knowledge after the administration of structured teaching programme on preventive measures of uterine prolapsed in post test. So it was clearly stated that to acquire maximum level of knowledge, effective structured teaching programme is essential.

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