



“A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME REGARDING KNOWLEDGE OF PRIMIGRAVIDA MOTHERS ON PREVENTION OF NIPPLE SORENESS RESIDING IN A SELECTED RURAL AREA AT TUMKUR.”

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Abstract:

Breast feeding is the act of naturally feeding infant with milk produced in the mother's breast. Breast milk is the best food for a new born, nothing come even closer to provide all nutrients that the baby will need later in life. Pregnant women need also to be responsible women so as to best support the health of her future child. During the first two years of life it can significantly reduce mortality and morbidity. It provides the best health benefits when started immediately after an infant's birth and continued exclusively for the first six months of life and then continued along with suitable complementary feeding through age two or longer. Breast milk provides immunologic factors to certain diseases.

The objective of study is to evaluate the effectiveness of structured teaching programme regarding knowledge of primigravida mothers on prevention of nipple soreness residing in a selected a rural area at tumkur. The design adopted the study was a Quantitative Evaluative one group pre test post test pre experimental design was used for the present study. With the convenient sampling technique 80 study participants were selected from Ramagondanahalli, Tumkur. Data were collected by using structured knowledge questionnaire with 30 items. Reliability of structured knowledge questionnaire was found to be 0.98. Structured teaching programme was administered after conducting pre-test and the post-test was conducted after 7 days. Data was analyzed by using descriptive and inferential statistical technique. Results the data analysis revealed that the mean% of post-test knowledge score (78.08%) was higher than that of pre-test knowledge score (39.37%). The calculated paired 't' test value ($t=19.42$) is greater than the table value ($P>0.05$, $df 79$) which is suggestive of significant difference between mean pre-test and post-test knowledge scores. The calculated χ^2 value revealed no significant association between socio demographic variables with their pre-test knowledge scores.

Key words: Effectiveness, STP, Prevention of nipple soreness, Primigravida mothers.

INTRODUCTION

Breast feeding is the act of naturally feeding infant with milk produced in the mother's breast. Breast milk is the best food for a new born, nothing come even closer to provide all nutrients that the baby will need later in life. Pregnant women need also to be responsible women so as to best support the health of her future child. During this period there is a possibilities are also to get sore nipple due to lack of knowledge and awareness about nipple sore on prevention .It has been reported that up to 96 percentage of all women experience some degree of nipple pain in early weeks of breast feeding . so, this present study was to

assess the effectiveness of structure teaching programme on prevention of nipple soreness among primigravida mothers on prevention of nipple soreness residing rural area at tumkur.

STATEMENT OF THE PROBLEM

“A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME REGARDING KNOWLEDGE OF PRIMIGRAVIDA MOTHERS ON PREVENTION OF NIPPLE SORENESS RESIDING IN A SELECTED RURAL AREA AT TUMKUR.”

OBJECTIVES OF THE STUDY

1. To assess the existing level of knowledge regarding the prevention of nipple soreness.
2. To develop and administer a structured teaching programme regarding the prevention of nipple soreness among Primigravida mothers.
3. To evaluate the effectiveness of structured teaching programme.
4. To find the association between the knowledge score of antenatal mother with their selected demographic variables.

HYPOTHESIS

H₁: there will be a significant difference between mean pretest and Post test knowledge scores regarding prevention of nipple soreness among primigravida mothers.

H₂: there will be a significant association between pretest test knowledge scores of primigravida mothers and their selected demographic variables.

METHODOLOGY

Quantitative Evaluative Research approach pre experimental research design one group pre and post test design is the conceptual structure within which the research is conducted; it constitutes the blue print for the collection, measurement and analysis of data. It includes an outline of what the research will do from writing the hypothesis and its operational implication to analysis of data.¹³

SAMPLE

Primigravida mothers.

SAMPLE SIZE

80 primigravida mothers in selected rural area at tumkur.

SAMPLING TECHNIQUE

Convenient sampling technique who met inclusion criteria.

STUDY SETTING

The study was conducted in selected rural areas at tumkur.

CRITERIA FOR SELECTION OF THE SAMPLE

The criteria for sample selection were mainly depicted under two headings, which included the inclusion and exclusion criteria.

Inclusion criteria:

- a) Primigravida mothers who are present at the time of data collection.
- b) Primigravida mothers who are willing to participate in the study.

Exclusion criteria:

- a) Primigravida mothers who are not present at the time of data collection.
- b) Primigravida mothers who are not willing to participate in the study.

Description of the tool:

The tool used for the present study is Structured Knowledge Questionnaire. The tool is constructed by the Investigator based on review of literature of the present study, questionnaires derived from the previous

studies and investigator’s personal experiences. The tool has been developed considering the reliability, feasibility and content validity.

In this present study, the Investigator has prepared tool in two parts.

PART- I: Consists of Socio Demographic variables age,educational status,religion, type of family, occupation,income,gravidia and source of health information.

PART- II: Structured Knowledge Questionnaire on Prevention of nipple soreness.

FINDINGS:

SECTION II : ANALYSIS OF PRE-TEST AND POST-TEST KNOWLEDGE SCORE a) Analysis of pre-test Knowledge score of respondents.

1. Analysis of Pre-test knowledge scores.

TABLE – 1 : Classification of Respondents based on their Pre test Knowledge scores regarding Prevention of nipple sorenes. N=80

| Knowledge level | Category | Respondents | |
|-----------------|--------------|-------------|---------|
| | | number | Percent |
| Inadequate | ≤50% score | 65 | 81.25 |
| Moderate | 51-75% score | 15 | 18.7 |
| Adequate | >75% score | 0 | 0 |
| Total | | 80 | 100 |

This picture classification of respondents according to their knowledge level in the pre-test. The data showed that majority (81.25%) of the respondents had inadequate knowledge, only 18.75% had moderate knowledge but none of them adequate knowledge.

GRAPH 1: Respondents based on their Pre test Knowledge scores regarding Prevention of nipple sorenes. N=80

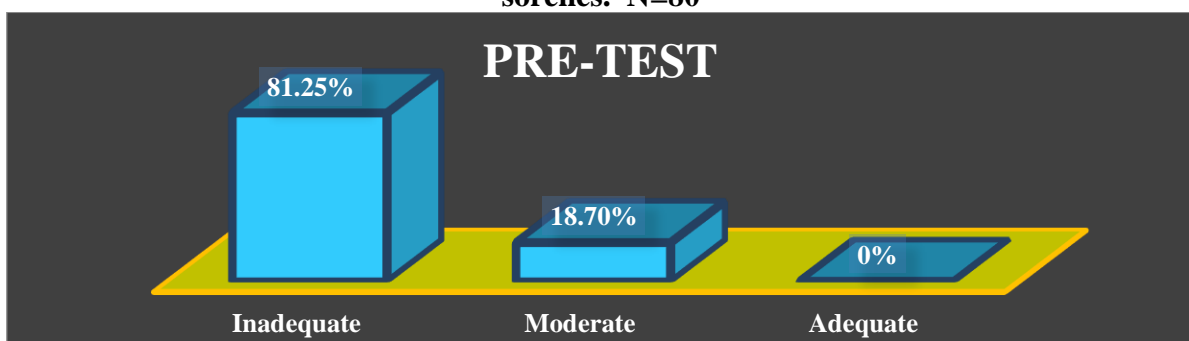


TABLE -2 : Mean, SD, Median, Mean%, CV of Pre test knowledge scores of Respondents regarding Prevention of nipple soreness.

N=80

| Knowledge | Statement | Max. Score | Respondents Knowledge | | | | |
|-----------|-----------|------------|-----------------------|----------|--------|------|-------|
| | | | Mean | Mean (%) | Median | SD | CV |
| Knowledge | 30 | 30 | 11.81 | 39.37 | 11 | 4.36 | 36.98 |

Table 2 depicts that, Aspect wise and wholesome Mean, SD, Median, Mean%, CV of Pre test knowledge scores of respondents regarding Prevention of nipple soreness. The overall pre-test mean percentage of respondents was 39.37%.

b) Analysis of Post-test Knowledge and Perception score of respondents.

1. Analysis of Post-test knowledge scores.

TABLE – 3 : Classification of Respondents based on Post test Knowledge scores regarding.

| Knowledge Level | Category | Respondents | |
|-----------------|--------------|-------------|---------|
| | | Number | Percent |
| Inadequate | ≤50% Score | 0 | 0 |
| Moderate | 51-75% Score | 28 | 35 |
| Adequate | >75%Score | 52 | 65 |
| Total | | 80 | 100 |

N=80

GRAPH 2: Respondents based on their Post test Knowledge scores regarding Prevention of nipple sorenes.

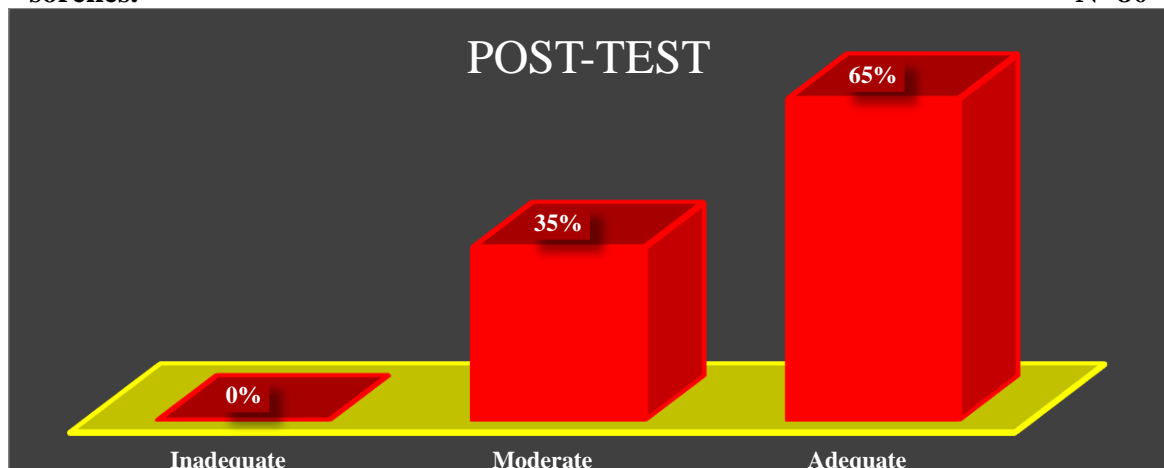


TABLE -4 Association between selected demographic variables and pre test knowledge scores regarding

| Demographic Variable | Category | Knowledge Level | | | | X ² Value | P Value |
|---------------------------|--------------------|-----------------|----|---------|----|----------------------|---------|
| | | ≤Median | | >Median | | | |
| | | N | % | N | % | | |
| Age | Below 20 | 5 | 6 | 10 | 13 | 4.87 (NS) | P>0.05 |
| | 21-25 | 22 | 28 | 12 | 15 | | |
| | 25-30 | 7 | 9 | 8 | 10 | | |
| | 30 years and above | 7 | 9 | 9 | 11 | | |
| Religion | Hindu | 32 | 40 | 30 | 38 | 0.91 (NS) | P>0.05 |
| | Muslim | 6 | 8 | 4 | 5 | | |
| | Christan | 3 | 4 | 5 | 6 | | |
| Types of family | Joint | 7 | 9 | 5 | 6 | 0.39 (NS) | P>0.05 |
| | Nuclear | 34 | 43 | 34 | 43 | | |
| Educational Qualification | SSLC | 5 | 6 | 7 | 9 | 0.78 (NS) | P>0.05 |
| | PUC | 18 | 23 | 14 | 18 | | |

| | | | | | | | |
|-------------------------------------|------------------------|----|----|----|----|--------------|--------|
| | Degree | 18 | 23 | 18 | 23 | | |
| Occupation of Mother | House wife | 11 | 14 | 7 | 9 | 1.92 (NS) | P>0.05 |
| | Daily wager | 6 | 8 | 10 | 13 | | |
| | Private employee | 24 | 30 | 22 | 28 | | |
| Family income/ Month | Rs.5001-10000 | 9 | 11 | 7 | 9 | 0.50 (NS) | P>0.05 |
| | Rs.10001-20000 | 24 | 30 | 22 | 28 | | |
| | Above Rs.20000 | 8 | 10 | 10 | 13 | | |
| Gravida of the Mother | Primigravida | 7 | 9 | 5 | 6 | 0.28 (NS) | P>0.05 |
| | Multigravida | 34 | 43 | 34 | 43 | | |
| Source of Health Information | Family membars/Friends | 7 | 9 | 5 | 6 | 2.45 (NS) | P>0.05 |
| | Mass Media | 13 | 16 | 15 | 19 | | |
| | Health Professionals | 10 | 13 | 5 | 6 | | |
| | Friends and neighbour | 11 | 14 | 14 | 18 | | |

*Significant at 5% level,
NS-Non significat

The data presented in Table 7 determines the association between pre test knowledge scores of respondents with selected demographic variables.

There is no significant association was found between all the variables and pre test knowledge level of adolescents. Hence null hypothesis H02 is accepted and research hypothesis H2 is rejected for these variables.

DISCUSSION

In this study the findings were discussed under 5 sections.

section 1: Demographic variables.

section 2 :assessment of the knowledge of primigravida mothers regarding prevention of nipple soreness.

Section 3:Assessing the effectiveness of STP on prevention of nipple soreness.

Section 4: Association between demographic variables and Post test knowledge scores of respondents.

Section 5 :Testing of the hypothesis.

CONCLUSION:

Based on the findings the invistigator concluded that the structuce teaching program was effective in improving the level of knowledge regarding prevention of nipple sournes.The knowledge of the Primigravida mothers was inadequate before the administration of STP. There is significance difference between mean pre-test and post-test knowledge scores of Primigravida mothersregarding Prevention of nipple soreness. STP is proved to be one of the effective teaching methods. There is significance association between selected demographic variables and post test knowledge scores.

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