



KNOWLEDGE REGARDING INFERTILITY AND ITS MANAGEMENT AMONG STAFF NURSES AT D.Y.PATIL HOSPITAL AND RESEARCH CENTER,KOLHAPUR, WITH A VIEW TO DEVELOP INFORMATION BOOKLET.”

Nursing

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ABSTRACT

“Motherhood is the biggest gamble in the world. It is the glorious life force. It's huge and scary—it's an act of infinite optimism.” – Gilda Radner
Demographers tend to define infertility as childlessness in a population of women of reproductive age," whereas "the epidemiological definition refers to "trying for" or "time to" a pregnancy, generally in a population of women exposed to" a probability of conception. Infertility is a disease in which the ability to get pregnant and give birth to a child is impaired or limited in some way. For heterosexual couples (man and woman), this is usually diagnosed after one year of trying to get pregnant (but may be diagnosed sooner depending on other factors). For heterosexual couples, one third of causes of infertility are due to a male problem, one third are due to a female problems, and one third are due to combination or unknown reasons. When the cause of the infertility is found to come from the female partner, it's considered female infertility or “female factor” infertility. Thus the investigator would like to take up the present study to assess the knowledge regarding infertility and its management among staff nurses.

Objectives: 1. To assess the knowledge regarding infertility and its management among staff nurses who are working at hospital. 2. To find out an association of knowledge scores with regarding infertility and its management. **Research Methodology:** In view of the nature of the problem of the study and to establish the objectives of the study, a quantitative, evaluative survey approach was used to assess knowledge regarding infertility and its management among the staff nurses. A descriptive evaluative survey research design is used for this study. The study was conducted at D.Y.Patil hospital and Research Centre, Kolhapur, data was collected from the 100 staff nurses by using structured knowledge questionnaires method regarding infertility and its management. Non probability, purposive sampling technique was used for the study. **Results:** After analysis of knowledge scores among staff nurses regarding knowledge of infertility and its management; mean was 22.83, median was 50.2, mode was 105.9, SD was 0.77 and range was 25. Maximum number of staff nurses 64 had good knowledge (64%), while 29 staff nurses had average knowledge (29%) and minimum 7 staff nurses had poor knowledge (07%). Among 100 staff nurses 64 (64%) had good knowledge regarding infertility and its management. There is significance association between knowledge scores with their selected socio demographic variable like Age in years (χ^2 cal = 166.41 χ^2 tab = 12.59), Sex (χ^2 cal = 7321.82 χ^2 tab = 5.99), Religion (χ^2 cal = 512.46 χ^2 tab = 12.59), Education (χ^2 cal = 1648.34 χ^2 tab = 15.50) Experience in wards (χ^2 cal = 232.54 χ^2 tab = 18.30), Marital status (χ^2 cal = 96.08 χ^2 tab = 9.48), Type of family (χ^2 cal = 163.41 χ^2 tab = 5.99). Therefore the calculated Chi-square values were higher than tabulated value at $P < 0.05$ level of significance, Hence H_1 is accepted. **Conclusion:** It can be concluded that information booklet will improve the knowledge regarding infertility and its management. Based on the findings of the study the following conclusions are drawn. 1. Overall test of knowledge regarding infertility and its management among staff nurses was good.

KEYWORDS

Knowledge, rating score, infertility, and staff nurses.

INTRODUCTION:

Infertility is typically defined as the inability to become pregnant after one year of sexual intercourse without contraception for women over age 35, this condition is diagnosed after 6 months of an inability to conceive using this threshold there will be women, albeit a minority who met the criteria for “infertility” but go on to conceive without medical intervention

Not everyone has goal to becoming a parent, but for those who do being unable to conceive a child is an exquisitely painful reality. Many of us spend a portion of our lives attempting to avoid unplanned pregnancies and assume that once we are ready to conceive. It will be happen with little difficulty. We tend to think that shifting gears from preventing pregnancy to planning conception and childbirth will proceed in a relatively smooth and orderly fashion. A failure to conceive then is major life stressed which can wreak havoc on otherwise well-adjusted couples.

Even in today's society 'we tend to assume that individuals in committed relationship have the goal of procreation women are often identified with their ability to give birth. Both men and women are supposed to pass on genetic and generational legacies. Failure by either partly to “fulfil their end of the bargain” can be divesting humiliating and emotionally destructive. The continuing taboo against discussing the infertility compounds these react on even though tremendous strides have been made in treating this relatively common condition, infertility is typically not openly discussed.¹

MATERIAL AND METHOD:

A descriptive evaluative survey research design is used for this study. The main purpose of the descriptive study is to observe, describe and document aspects of a situation as it naturally occurs. The research approach adopted for the study was quantitative evaluative and the research design was descriptive survey design. By using non-

probability, purposive sampling 100 staff nurses from D.Y.Patil Hospital and Research centre, Kolhapur. Structured knowledge was used to assess the knowledge of staff nurses regarding infertility and its management. Data were analysed by using mean, median, mode, standard deviation, range and chi-square test. The research investigator obtained formal permission from the medical officer D.Y.Patil hospital and Research Centre and Research Centre and research centre, Kolhapur. The data was collected from the staff nurses on 28/08/2021. Informed consent was obtained from the staff nurses after explaining the purposes and objectives. The structured questionnaire was then filled by the staff nurses. By the end of one hour the investigators were able to collect data from 100 staff nurses who were working D.Y.Patil hospital and Research Centre, Kolhapur.

RESULT:

Section 1: Findings related to distribution of socio- demographic data of staff nurses

Table-1: Frequency and percentage distribution of rating score according to their socio-demographic data. n=100

Sr. No	Selected-SocioDemographic Variables	Frequency <i>f</i>	Percentage %
1	Age in year		
	a) 20-25	43	43
	b) 26-30	39	39
	c) 31-35	12	12
	d) 36-40	06	06
2	Sex		
	a) Male	25	25
	b) female	75	75
3.	Religion		
	a) Hindu	50	50
	b) Muslim	13	13
	c) Christian	36	36

	d)Other	01	01
4	Education		
	a)A.N.M	01	01
	b)G.N.M	53	53
	c)B. B.Sc	19	19
	d)B.Sc	25	25
	e)M.Sc	2	2
5	Experience in wards		
	a)Medicine	19	19
	b)Surgery	18	18
	c)Paediatrics	15	15
	d)Gynaecology and obstetrics	16	16
	e)Causality	16	16
	f)other	16	16
6	Marital status		
	a)Married	49	49
	b)Unmarried	51	51
7	Type of family		
	a)Joint	35	35
	b)nuclear	65	65

Section 2: Findings related to knowledge score regarding infertility and its management among staff nurses.

Table 2:-Frequency and Percentage (%) assessment of knowledge regarding infertility and its management among staff nurses. n=100

Knowledge scores	Frequency <i>f</i>	Percentage %
Good (23-32)	64	64
Average(12-22)	29	29
Poor (00-11)	07	07

Table 3:-Calculated mean,median,mode,rangeand SD of knowledge scores regarding infertility and its management among staff nurses. n = 100

Mean	Median	Mode	Range	Standard deviation
22.83	50.2	105.9	25	0.77

Section 3: Testing of hypothesis for an association between the pre-test knowledge scores with their selected socio demographic variables.

In this section researcher analysed and categorized the association between pre-test. Knowledge scores of subjects regarding infertility and its management

Table 4: Association between pre-test knowledge score with their selected socio demographic variables n=100

Sr. No	Variables	Scores			Chi square values		Df
		Good	Average	Poor	Calculated	Tabulated	
1	Age in years						
	a)20-25	23	17	3	166.41*	12.59	5
	b)26-30	27	8	4			
	c)31-35	9	3	0			
	d)36-40	5	1	0			
2	Sex				7321.82*	5.99	2
	a)Male	17	7	1			
	b)female	47	22	6			
3.	Religion				512.46*	12.59	5
	a)Hindu	32	15	3			
	b)Muslim	10	3	0			
	c)Christian	22	10	4			
	d)Other	0	1	0			
4	Education				1648.34*	15.50	8
	a)A.N.M	1	0	0			
	b)G.N.M	31	16	5			
	c)PB. B.Sc	14	4	1			
	d)B.Sc	16	8	1			
	e)M.Sc	2	0	0			
5	Experience in wards				232.54*	18.30	10
	a)Medicine	12	6	1			
	b)Surgery	13	3	2			
	c)Paediatrics	11	3	1			

	d)Gynaecology and obstetrics	13	3	0			
	e)Causality	8	5	3			
	f)other	7	9	0			
6	Marital status						
	a)Married	37	10	4	96.08*	9.48	4
	b)Unmarried	28	18	3			
7	Type of family						
	a)Joint	23	9	4	163.41*	5.99	2
	b)nuclear	43	18	3			

Note:* Indicates significance

The present study has been undertaken to assess the knowledge regarding infertility and its management among staff nurses at D.Y.Patil Hospital and Research Centre, Kolhapur.

The major findings of the study are:-

- Findings related to distribution of socio demographic data of staff nurses.
- Findings on knowledge scores of staff nurses regarding infertility and its management.

1) Findings Related To Distribution Of Demographic Data Of Staff Nurses.

Majority of the staff nurses (43) belonged to 20 to 25 years of age group (43%) whereas 6 staff nurses' belonged to 36 to 40 years (6%). Majority of staff nurses (50) belonged to Hindu religion (50%) whereas 37 belonged to Christian religion (37%). Majority of staff nurses (54) belonged to G.N.M (54%) whereas (02) belonged to M.Sc. nursing (2%). Majority of staff nurses (75) belonged to female. (75%) whereas (25) belonged to male (25%). Majority of staff nurses (65) belonged to nuclear family (65%), whereas (35) belonged to joint family (35%). Majority of staff nurses (19) belonged to medicine ward (19%), whereas (15) belonged to paediatrics ward (15%). Majority of staff nurses (51) belonged to unmarried category (51%), whereas (49) belonged to married (49%).

2) Findings On Knowledge Scores Of Staff Nurses Regarding Infertility And Its Management.

The maximum number of staff nurses 64 had good knowledge (64%), while 29 staff nurses had average knowledge (29%) whereas 07 staff nurses had poor knowledge (07%).

Major Findings Of The Study Were:-

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