

EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON THE LEVEL OF KNOWLEDGE REGARDING DOTS THERAPY AMONG ASHA WORKERS OF CHC BADAGAON, JHANSI

Community Health Nursing

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ABSTRACT

Background: Tuberculosis is a specific infectious disease caused by the bacterium *Mycobacterium tuberculosis*. The disease primarily affects the lungs, causing pulmonary tuberculosis. **Aim:** The aim of the study was to evaluate the effectiveness of structured teaching programme on the level of knowledge regarding DOTS therapy among ASHA workers. **Materials and Methods:** Quasi-experimental research was adopted and self-structured questionnaire was used to explore the knowledge regarding DOTS therapy among ASHA workers of CHC Badagaon, Jhansi. **Results:** The mean pre-test score was 14.177 ± 7.11 while that of post-test was 20.633 ± 5.06 . The t-value calculated was 4.72 at df 59 at p level < 0.05 . **Conclusion:** It was revealed that the knowledge level significantly increased after the administration of structured teaching programme.

KEYWORDS

Knowledge Score, ASHA Worker, CHC, DOTS Therapy.

INTRODUCTION

Tuberculosis (TB) is a contagious infectious disease caused by *Mycobacterium tuberculosis* that can affect almost any part of the body, most commonly the lungs. Historically, tuberculosis was associated with high mortality, with many infected individuals succumbing to the disease. The infection spreads primarily through droplet transmission when a person with active TB coughs, sneezes, or speaks.

Most TB infections remain asymptomatic and latent; however, approximately one out of every ten latent infections may progress to active tuberculosis during the individual's lifetime. If left untreated, active TB can be fatal in more than half of affected cases.

In India, the Revised National Tuberculosis Control Programme (RNTCP) has made significant progress in TB control. By 2007, the programme consistently achieved a treatment success rate exceeding 85% and case detection rates approaching the global target of 70%. These achievements were possible through the implementation of the Directly Observed Treatment, Short-course (DOTS) strategy.

The DOTS strategy encompasses a wide range of activities, including securing political commitment, early case detection, supervised administration of treatment, continuous drug supply, and standardized recording and reporting systems. Failure in any of these components can contribute to treatment failure and the emergence of drug-resistant tuberculosis.

Accredited Social Health Activists (ASHAs) play an essential role in tuberculosis control at the community level. As grassroots health workers, they are often the first to identify suspected TB cases. ASHA workers are also responsible for educating patients regarding the disease, ensuring treatment adherence, and promoting awareness about tuberculosis prevention and management.

OBJECTIVES:

1. To assess the pre-test level of knowledge among the ASHA workers regarding DOTS therapy.
 2. To develop a structured teaching programme for ASHA workers regarding DOTS therapy.
 3. To assess the post-test level of knowledge among the ASHA workers regarding DOTS therapy.
 4. To compare the pre-test level and post-test level of knowledge among the ASHA workers regarding DOTS therapy.
- With this aim in mind, the research study was conducted to check for the knowledge regarding DOTS therapy of the grass root level workers.

MATERIAL AND METHODS:

A quantitative research approach was adopted in the present research study. A quasi-experimental research design (One-group pretest-post-test design) has been used to attain the objectives of the present study. The sample of the study were ASHA workers selected using the non-

probability purposive sampling technique. A total of 60 samples who fulfilled the inclusion criteria were selected for the research study.

INSTRUMENT:

The research tool for the data collection comprised of 2 sections.

- Section A of the tool consisted of the socio-demographic variable comprising of a total of 7 items like age, educational status, place of living and previous knowledge regarding DOTS therapy, marital status, year of experience, exposure to DOTS training program.
- Section B comprised of the 30 self-structured questionnaire to assess the knowledge regarding DOTS therapy.

DATA COLLECTION:

Before the collection of data, permissions were taken from the concerned authorities of the CHC, Badagaon, Jhansi District. Samples were selected as per the inclusion criteria of the study. Prior to the data collection, nature and purpose of the study was explained to the samples. Consent was taken and confidentiality was maintained. It started with pre-test data collection there after implementation of planned teaching program and followed by post test data collection

RESULTS:

Data was presented mainly as frequency and percentage distribution of knowledge score. Paired t test was used to compare means of the groups. Descriptive and inferential statistics was applied to draw conclusion of the study.

Description of demographic characteristics:

Total 7 items were assessed to collect the baseline data about the samples. It included age, educational status, place of living and previous knowledge regarding DOTS therapy, marital status, year of experience, exposure to DOTS training program.

Knowledge Level Regarding DOTS therapy:

Knowledge level regarding DOTS therapy was assessed and it was distributed into 3 different categories depending on the knowledge score.

Table 1 depicts the distribution of the samples according to their pre-test and post-test knowledge level regarding DOTS therapy. In pre-test, 30% of the samples had inadequate knowledge 40% had adequate knowledge while in the post-test 10% had inadequate knowledge, 30% had adequate knowledge and 60 % of the samples had good knowledge.

Table 2 depicts the comparative data showing the effectiveness of planned teaching programme on the knowledge level. The mean pre-test score was 14.177 ± 7.11 while that of post-test was 20.633 ± 5.06 . The t-value calculated was 4.72 at df 59 at p level ≤ 0.05

Table 1: Frequency and percentage distribution of the post-test knowledge level of the samples [N=30]

S.N	Level of Knowledge	Pre-Test		Post- Test	
		Frequency	Percentage	Frequency	Percentage
1	Inadequate	18	30%	6	10%
2.	Adequate	24	40%	18	30%
3.	Good	18	30%	36	60%

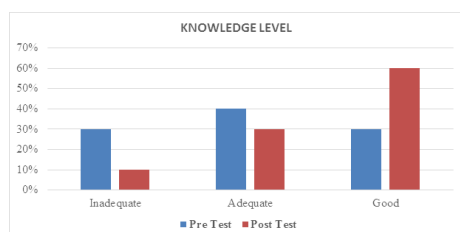


Figure 1: Graph depicting the pre-test & post-test knowledge level of the samples (N=60)

DISCUSSION:

Mr. Prashant Tambe (2024) conducted a quantitative research approach with a one-group pre-test and post-test design to assess knowledge on TB and DOTS therapy before and after the educational programme. The study included 30 ASHA workers selected via non-probability convenient sampling. The mean pre-test knowledge score was 10.43, which increased to 15.13 post-intervention. The computed t-value of 8.63 was statistically significant at the 0.05 level, indicating a substantial improvement in knowledge. The results confirm that the structured teaching programme was effective in enhancing knowledge among ASHAs. The findings support the effectiveness of structured teaching programme in improving ASHAs' understanding of TB and its DOTS therapy.

On the basis of the above literature, current research study was conducted in order to assess the knowledge of the ASHA worker in PHC of Badagaon Jhansi regarding DOTS therapy.

CONCLUSION:

The main aim of the study was to assess the effectiveness of Structured Teaching Programme (STP) on knowledge regarding DOTS therapy among ASHA workers. The pre test and post test knowledge were assessed, it concluded that Structured Teaching Programme (STP) was effective in enhancing the knowledge of ASHA workers, as majority of the ASHA workers had good knowledge regarding DOTS Therapy.

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No

CONFLICT OF INTEREST

No

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