



ORIGINAL RESEARCH PAPER

Nursing

“A study to assess the effectiveness of structured teaching programme on knowledge regarding use of various contraceptive methods among newly married women in selected rural areas of Waghodiya district.”

KEY WORDS:

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ABSTRACT

Background: Contraceptive methods are preventive method to help women avoid unwanted pregnancies.¹ By fertility is meant the actual bearing of children, some demographers prefer to use the work fatality in place of fertility. A women reproductive period is roughly from 15 to 45 years – a period of 30 years. A woman married at 15 and living till 45 with her husband is exposed to the risk of pregnancy for 30 years, and may give birth to 15 children, but this maximum is rarely achieved. Information on fertility in India indicates that an average woman gives birth to an average of six or seven children if her married life is uninterrupted. Fertility depends upon several factors. The higher fertility in India is attributed to universality of marriage, lower age at marriage, low level of literacy, poor level of living, limited is of contraceptives and traditional ways of life.²

Aims and Objectives: The main aim to conduct this study was to find out the level of knowledge regarding use of various contraceptive methods among newly married women.

Material and Method: in this research study a Quantitative research approach with Pre-experimental one group pre-test post-test design is used. Purposive sampling technique was used to select the samples from selected rural areas of Waghodiya district and data collection was done. Data was analyzed by using descriptive and inferential statistics such as Standard deviation and Chi-square test.

Result: In this study, 26% had poor knowledge, 70% had average knowledge, and 4% had good knowledge.

Conclusion: In this research study findings shows that the people have poor knowledge regarding use of contraceptive methods

INTRODUCTION

Contraception is an important part of lives of many women with needs varying according to age, for many people throughout the work control of their own fertility is difficult as they do not have access to contraception. Information should be appropriate for people with additional needs for example people with physical, sensory or cognitive need and those who don't speak, read English or who have different cultural and religious requirement. In 2004 the government of India recognized that sexual health service need to be improved and their white paper choosing health making healthy choices easier they promised a reviewed of sexual health services followed by investment to meet gaps in local services they should ensure a full range of contraceptive services become available and that services are modernized.³

In India it is based on efforts largely sponsored by the Indian government. In the 1965-2009 period, contraceptive usage has more than tripled (from 13% of married women in 1970 to 48% in 2009) and the fertility rate has more than halved (from 5.7 in 1966 to 2.7 in 2009), but the national fertility rate is still high enough to cause long-term population growth. India adds up to 10 lakh (1,000,000) people to its population every 15 days. Low female literacy levels and the lack of widespread availability of birth control methods is hampering the use of contraception in India. In 2009, 48.3% of married women were estimated to use a contraceptive method, i.e. more than half of all married women did not. About three-fourths of these were using female sterilization, which is by far the most prevalent birth-control method in India. Condoms, at a mere 3% were the next most prevalent method. Meghalaya, at 20%, had the lowest usage of contraception among all Indian states. Bihar and Uttar Pradesh were the other two states that reported usage below 30%.⁴

NEED FOR THE STUDY

On May 11, 2000, India's one billionth citizen was born. More than 70,000 children are born daily. Representing 17 million more Indian annually, nearly a third of the population is yet to reach puberty. With a growth rate of 1.9% per year. India will surpass

China in the next 50 years as the world's most populous country and by 2070 the population exceed 2 billion. 1992-93 to 48% in 1998-99 and the average number of children per family has dropped by over 40% from 1972- 1998-99. The target for 2010 was 2:1 children per family with the growth rate of 1.2% per year. National population policy 2000 envisages universal access to various methods of contraception and fertility regulation. It is anticipated that if this policy is fully implemented, India's population in coming years will be 1107 million instead of 1162 million.⁵

Family planning favourably influences the health development and well-being of the family. So people must be encouraged to plan their families. Especially to accomplish the small family norm and maintain health of eligible couples as well as child, eligible couples should develop awareness regarding different contraceptive methods or use of contraceptive methods.⁶

STATEMENT OF THE PROBLEM

“A study to assess the effectiveness of structured teaching programme on knowledge regarding use of various contraceptive methods among newly married women in selected rural areas of waghodiya district.”

OBJECTIVES OF THE STUDY

- To assess the level of knowledge regarding use of various contraceptive methods.
- To assess the effectiveness of structured teaching programme regarding use of various contraceptive methods.
- To find out the association between pre-test level of knowledge with selected demographic variables.

RESEARCH HYPOTHESIS

H₁ -There will be significant difference between Pre test knowledge and Post test knowledge scores of newly married women regarding various contraceptive methods.

H₂ -There will be significant increase in knowledge of newly married women regarding various contraceptive methods after

teaching program.

H₃ -There is a significant association in Pre test knowledge level on contraceptive methods among newly married women with selected demographic variables.

OPERATIONAL DEFINITION

An operational definition defines something (e.g.: variable, term or term object) in terms of the specific process or set of validation tests used to determine its presence and quality. That is, one defines something in terms of the operations that count as measuring it.

Assess: In this study assess refers to the effectiveness of structured teaching program on use of various contraceptive methods among newly married women.

Effectiveness: In this study effectiveness refers to the outcome of the structured teaching program on use of various contraceptive methods among newly married women.

Structured teaching program: It is the structured series of events in order to provide information regarding use of various contraceptive methods among newly married women.

Contraception: Contraception refers to the birth control method or family planning method.

Newly married woman: In this study the woman refers to the one who is recently married.

Rural: Village with the sense of we feeling and co-operation, rural area is a small size of community.

METHODOLOGY

Research Methodology is a systematic, theoretical analysis of the Method of collection of information and data in the study. This chapter includes all those Methods and Techniques that are adopted for conducting Research studies. Research Methodology is the way in which research problems are solved systematically and scientifically. This chapter includes Research approach, Research design, setting, sample population, sample, and sample size, sampling criteria, sampling technique, validity of tool, data collection procedure and plan for analysis.

RESEARCH APPROACH

The selection of Research approach is the fundamental process for conducting research study. The Researcher will know how to collect data and analyze it. It helps the Researcher to draw conclusions from the collected data.

This study is based on Quantitative Approach. In this study in view of the problem selected and in order to accomplish was considered to assess the level of knowledge regarding use of various contraceptive methods.

It consists of 4 steps:

- Identifying the objectives of the study.
- Expanding the means of attaining the objectives.
- Collecting data.
- Analyzing the data.

RESEARCH DESIGN

Research design is a part of research study. Type of the study is descriptive research design. It helps in collecting the data, analyzing the data. It helps the Researcher in selection of appropriate variables their control and handling the observations to be made in order to analyze data.

VARIABLES

A Variable is a abstract which has a differentiating quantity or quality values. The variables in the study are as follows:

- **Independent variable**

A variable that is believe to affect the dependent variable. In this

study the use of contraceptive methods are considered as independent variable.

- **Dependent Variable**

A dependant variable is the one that cause the problem. In this study the level of knowledge regarding use of various contraceptive methods is considered as dependent variable.

RESEARCH SETTING

Setting is the place and location where the data is to be collected.

The study was conducted at Piparia, Amodar, Limda, Ropa and Mastupura at Waghodiya District.

POPULATION

A Population is the number of all the organisms of the same group or species, which live in a particular geographical area and have a capability of interbreeding.

Population defined as a Group of individuals or commodities having the same common characteristics.

Accessible population

It is a portion of the entire population in which the researcher is interested and available to the researcher.

In this study accessible population were newly married women residing at Piparia, Ropa, Limda, Amodar and Mastupura of Waghodiya district.

SAMPLING TECHNIQUE

A sample that is selected based on characteristics of population is called as purposive sampling.

The sample of the study will be selected by using non probability convenience sampling technique.

DEVELOPMENT OF TOOL

Self structured questionnaire will be used to assess the level of knowledge regarding use of various contraceptive methods among the people residing at Piparia, Ropa, Mastupura, Limda and And Amodar at Waghodia district.

DESCRIPTION OF TOOL

SECTION: A:

It is designed to obtain information of residents and it consists of 6 items related to selected demographic variables.

SECTION: B:

In this study a self structured questionnaire consist 33 items to assess the level of knowledge regarding use of contraceptive methods.

In this evaluation tool there are 33 questions, Maximum score of this tool is 33 and minimum score of this tool is 0.

SCORING

Poor : If score is >10
Average : If score is between 10 to 20
Good : If score is <20

VALIDITY OF TOOL

Validity of the degree to which on tools measures what is actual to measure. The content validity of the tool for the present study was determined by acquiring from experts. The experts suggest some alteration changes in the demographical variables and some of the questions. Appropriate changes were made accordingly the tool was finalized.

RELIABILITY OF THE TOOL

Reliability refers to the accuracy or inaccuracy in measurement device.

Reliability of tool is the degree of consistency or dependability with

which the tool measures the attribute it is designed to measure. Quality and Accuracy of the tool is assessed by the reliability of tool.

Reliability of the tool is assessed by split half method. Spearman's Brown prophecy formula has been used to test the reliability of the prepared tool. The reliability of the tool conducted on 22nd February 2017 in Ropa village and data collected from 5 people. The tool has been found to be effective and reliable as per reliability sum is 0.75.

RESULT

OBJECTIVE-1: To assess the level of knowledge regarding use of various contraceptive methods.

In this study, it highlights that the knowledge score mean percentage is 26% have poor knowledge, 70% had average knowledge and 4% had good knowledge.

OBJECTIVE-2: To assess the effectiveness of structured teaching programme regarding use of various contraceptive methods.

The Pre test mean knowledge is 1.7800 with standard deviation of 0.506. Further, Post test mean knowledge to be 2.300 with standard deviation of 0.505. It indicates that there is enhancement of knowledge score of 0.52 of newly married women. The stastical paired 't' test value is found significant (6.340*) revealing the effectiveness of structured teaching program on contraceptive methods among newly married women. However, this study reveals that, the structured teaching program on contraceptive methods among newly married women was effective. Thus the analysis reveals that there is significant difference between Pre test and Post test knowledge score of newly married women on contraceptive methods. Hence, the Researcher based on the findings, stated that the hypothesis (H₁) **"There will be significant difference between Pre test and Post test knowledge scores on contraceptive methods among newly married women."**

OBJECTIVE-3: To find out the association between pre-test level of knowledge with selected demographic variables.

The X² value computed between the knowledge level of newly married women regarding contraceptive methods and selected socio-demographic variables.

Variable of age (X²=2.68), education status(X²=14.73), religion (X²=0.43), family type (X²=12.94), family income (X²=24.80), source of information (X²=6.94) were found significant at 0.05 level of significance. Hence, the researcher based on the findings stated that the hypothesis (H₃) **"There is a significant association in Pre test knowledge level on contraceptive methods among newly married women with selected demographic variables"** has been accepted.

DISCUSSION AND CONCLUSION

The purpose of this study was to assess the level of knowledge regarding contracptive methods among people residing at selected rural areas of Waghodia district .The collected data were analyzed by descriptive and inferential statistics, interpreted in terms of objectives and hypothesis of the study. In this study the researcher concluded that people were having 26% of poor knowledge, 70% with average knowledge and 4% with Good knowledge level residing at selected rural areas of Waghodiya district. H₁ is accepted.

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