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Effectiveness of Health Teaching Programme on Level of Knowledge regarding Cervical Cancer among Women of Reproductive Age Group who Attending Gynae OPD in Rohilkhand Medical College and Hospital, Bareilly U. P.

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Abstract: ***"A Quasi - experimental study was conducted effectiveness of Health Teaching Programme on level of knowledge regarding cervical cancer 50 women reproductive age group were selected by using non - random sampling. The overall mean pretest knowledge score 8.38 (27.66%) and mean post - test knowledge score 19.50 (65%). The calculated 't'value 45.983 was higher than table value 2.011 at p=0.05 level which is significant. The Health Teaching Programme regarding cervical cancer. On comparison, the mean pretest knowledge score 8.38 where as the mean post - test knowledge score was 19.50. To conclude the main aim of the study was to assess the effectiveness of health teaching programme on level of knowledge regarding cervical cancer among women of reproductive age group. In order to fulfill this objective a questionnaire was administered and data was obtained and then analysis of the data was done. The conclusion was drawn on the finding that the health teaching programme was effective by observing the significant difference between pre - test and post - test knowledge level.***

Keywords: Knowledge, women reproductive age group, Gynae OPD, Health Teaching Programme, world health organization

1. Introduction

The cervix is the lower parts of the uterus that connects the uterus to the vagina. The opening of the cervix stays small, anticipate at some point of labor when it expands to allow the fetus to pass from the uterus to the vagina. Cervical cancer occurs when cell in the cervix grow erratically and multiple out of control. As with different types of cancer, it often takes years for cervical cancer to develop. First ordinary cervical cells alternate into pre - cancerous cell. Pre - cancerous abnormalities development into cancer.

Cervical cancer is one of the leading causes of death for middle –aged women is the developing world, yet it is almost completely preventable if precancerous lesions are identified and treated in a timely manner. There are different strategies for control and prevention of cervical cancer which include traditional cytology (Pap smear), Human papillomavirus (HPV) screening, and vaccination of HPV. Cytology - based and HPV screening method are hard to be implemented in developing countries.

Cervical cancer is a destructive disease for women around the world. Nearly 500, 000 female go through from the cervical cancer and more than 270, 000 die every year. Globally, cervical cancer is the fourth - most - common cancer amongst women. It is the highest cause of women cancer deaths in developing countries, the place 80% of cervical cancer cases and deaths occur. Tragically, this disease affect the women at a relatively younger age. Many sufferers of cervical cancer die at their early 40s, while they are still contributing to the workers and raising children. Over the previous 50 years, many developed countries have achieved success in decrease cervical cancer by routinely screening female with Pap tests. Despite this development, even in state with well - established creening programs, many female proceed to go through die from cervical cancer. The situation is direr in growing countries, a lot of which lack an infrastructure for cervical cancer screening and treatment. In those countries, maximum cases of cervical cancer are undetected, resulting in hundreds of thousands of deaths each year. As the global population ages — with more female accomplishing the age when they are at highest risk for cervical cancer — cervical cancer rates, if now not addressed, will continue to increase. Without a worldwide and sustainable dedication to mobilize change, projections are that 700, 000 cases of cervical cancer will occur arise international in 2020, a 40% enlarge from the variety of cases in 2002. Over the previous decade, committed scientists, researchers, clinicians, frontline fitness workers, group leaders and advocates have worked tirelessly to carry the scourge of cervical cancer to the world's interest and to develop and apply the necessary knowledge and technologies to decrease the number one cancer killer of female in most developing countries. From Mumbai to Mexico City, Kampala to Kathmandu, innovational programs have learned how to successfully deliver and effective cervical cancer prevention programs to the female and girls who need them most.

2. Review of Literature

Review of literature related to cervical cancer.
Review of literature related to knowledge on cervical cancer.
Review of literature related to knowledge and attitude on cervical cancer

3. Material and Methods

In this study Quantitative approach was used. The research design selected for the present study is Quasi - experimental one group pre - test and post - test. The present study attempts to assess the level of knowledge regarding cervical cancer among women of reproductive age group who attending Gynae OPD in Rohilkhand Medical College and Hospital, Bareilly U. P. In this study sample size is arbitrarily decide to be 50 women of reproductive age group from the group of 15 - 49 years. In this study sample is chosen by Non probability Convenience sampling technique. The level of knowledge was assessed using structure knowledge questionnaire paired 't' test was used to evaluate the effectiveness of cervical cancer knowledge. Inferential statistical KarlPearson correlation coefficient was used to fine out the relationship between the pretest and posttest. Chi - square test was used to fine out the association between pretest level of knowledge. The main aim of applied research is to solve problems which are directly related to clinical practices. Quantitative research which also had types depends on the intervention carried out.

4. Result and Finding

Age – In the present study 32 (64%) of the women belongs to the age group of less than 3o years. Marital status – In this present study 41 (82%) women have done Married Religion – In this present study 38 (76%) of women were Hindu. Education - In this present study 17 (34%) women were primary school. Types of family – In this present study 40 (80%) of women were join family. Family Income - In this present study 40 (80%) of women were 5001 - 10000 monthly income. Occupation – In this present study 35 (70%) women of house wife. Residence –In this present study 36 (72%) of women belongs urban areas. Information about cervical cancer - In this present study 41 (82%) of women having no knowledge regarding cervical cancer. Family history of cervical cancer – In this present study 50 (100%) of women having no family history of cervical cancer. This objective revealed that after comparing the overall mean pretest knowledge score 8.38 (27.66%) and mean posttest knowledge score 19.50 (65%). The calculated't' value i. e.45.983was higher than the table value 2.011 at p=0.05 level which is significant. The health teaching programme regarding cervical cancer. The analysis revealed that there is no significant association establish with the selected socio - demographic variables. Only six demographic variables i.e. age, education, family income, residence, information about cervical cancer, family history of cervical cancer was found association. Hence research hypothesis was partially accepted at <0.05 level of significant.

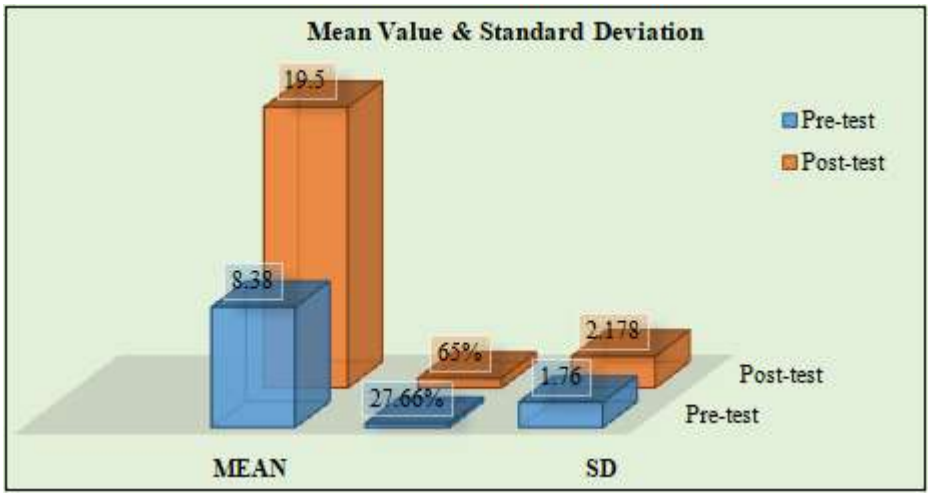

Figure 1: Pie diagram showing the mean value and stander deviation of participant according to their pretest and posttest.

Table 1: shows that the mean value & standard deviation for the pretest & the posttest i. e. Mean pretest (8.38), posttest (19.50) & mean %pretest (27.66%), posttest (65%) & standard deviation pretest (1.760), posttest (2.178) and paired 't'test calculated value 45.983, tabulated value 2.011

5. Discussion

This objective revealed that after comparing the overall mean pretest knowledge score 8.38 (27.66%) and mean posttest knowledge score 19.50 (65%). The calculated't' value i. e.45.983was higher than the table value 2.011 at p=0.05 level which is significant. The health teaching programme regarding cervical cancer. On comparison, the mean pretest knowledge score 8.38 where as the mean posttest knowledge score was 19.50. Thus H_1 which state that will be a significant difference between mean pretest and mean posttest knowledge level of women is accepted.

6. Conclusion

The chosen areas demands conducts of more research and findings that is to obtained and should be drawn out as a protocol in teaching the women with various effective teaching strategies which improves their understanding in cervical cancer.

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