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A Study to Assess the Effectiveness of Structured Teaching Programme on Knowledge Regarding Post-Operative Self-Care Management among Women Undergoing Abdominal Hysterectomy in Selected Hospitals

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Abstract: ***Background: Nowadays hysterectomy is a common procedure performed in the gynaecological area, which aids in the reduction of many gynaecological problems. Some of preventive and promotive pre-operative instructions about self-care measures like early ambulation mobilization, balance diet, exercise, pain management, personal hygiene, wound care, sexual awareness, psychological health awareness which may help to avoid the post-operative problems and complications. Objectives: 1. To assess the existing knowledge regarding postoperative self-care management among women undergoing abdominal hysterectomy. 2. To evaluate the effectiveness of structured teaching programme on post-operative self-care management among women undergoing abdominal hysterectomy.3.To find out the association between pre-test knowledge scores with selected demographic variables. Method: A study was conducted in selected hospitals to assess the effectiveness of structured teaching programme on knowledge regarding post-operative self-care management among women undergoing abdominal hysterectomy. 60 samples were selected by using purposive sampling technique. The sociodemographic Variables was collected by using questionnaire method on Age, number of children, education, occupation, and source of information. Pre-test conducted using structured knowledge questionnaire. Intervention: administering structured teaching programme. Post-test was conducted using same tool after 7 days. Collected data was analyzed using descriptive and an inferential statistics Result: The pre-test average score was 10.08 with standard deviation of ±2.15. The post-test average score was 18.93 with standard deviation of ±1.89. The test statistical value of the paired t test was 45.21 with p value 0.000, which is less than 0.05, hence the null hypothesis rejected and H_1 is accepted. Thus there is significant difference in pre and post-test knowledge scores. Conclusion: The study concluded that structured teaching programme was effective on knowledge regarding post-operative self-care management among women undergoing abdominal hysterectomy.***

Keywords: Assess, Effectiveness, Knowledge, Structured Teaching Programme

1. Introduction

A female reproductive system is a delicate and complex system in the body. It is important to take steps to protect it from infections and injury, and prevent problems - including some long-term health problems. Taking care and making healthy choices can help to protect the woman and her loved ones. Protecting her reproductive system also means having control of her health, if and when, she becomes pregnant, in female, uterus and breast are the natural gift which fulfil their personality development.[1]

The uterus plays a key role in the reproductive organs of mammals, including humans. From the women's point of view, it has long played the central role of regulating and controlling the physiological function of the sexual organ and has been the source of energy, life force, and the proper preserver of youth. [2]

The uterus is a meaningful organ, both to women and to society; uterus represents sexuality, fertility and motherhood and is of a great importance in a woman's existence and environmental communication. Indeed, womanhood is believed to be strongly linked to procreation. Therefore, preservation of their womb is zealously guarded and the womb is usually believed to be the symbol of their identity.[8] Uterus is important because of its impact on feminism and fertility, so the exit of this important organ can lead to many physical and mental disorders. These mental disorders can affect the quality of life of patients and ultimately lead to a reduction in the hope of their lives.[2]

The body represents to the world what the women are, the loss of a body part has a big impact on their way of communicating with the outside world and with themselves. Some women have a positive attitude to face the situation, accepting the new body image and establishing a new form of communication with the world. Others, however, experience the loss of a triggering factor of insecurity in their relationships, as a new self-image is formed and this is linked to a bad-experiences, that women feel something is lost from their body.[3]

A number of women annually undergo Gyanecological surgery and hysterectomy is second most common surgery which is performed in India. Hysterectomy is surgical procedure that removes the uterus. Hysterectomy may be

done depending on the route by vaginal, abdominal, or laparoscopic.

2. Problem Statement

"A study to assess the effectiveness of structured teaching programme on knowledge regarding self-care management among women undergoing abdominal hysterectomy in selected hospitals''.

3. Objectives of the Study

1) To assess the existing knowledge regarding postoperative self-care management among women undergoing abdominal hysterectomy.
2) To evaluate the effectiveness of structured teaching programme on post-operative self-care management among women undergoing abdominal hysterectomy.
3) To find out the association between pre-test knowledge scores with selected demographic variables.

Hypotheses

H_0: There will be no significant difference between the pre-test and post-test knowledge scores regarding post-operative self-care management among women undergoing abdominal hysterectomy.

H_1: There will be significant difference between the pre- test and post- test knowledge scores regarding post-operative self-care management among women undergoing abdominal hysterectomy**.**

H_2: There will be significant association between the pre-test knowledge scores with selected socio demographic variables**.**

4. Methodology

Research Approach: Quantitative Research approach

Research Design: Pre-experimental One group Pre-test Post-test design

Setting of the Study: Kulloli Hospital Sangli and Somshekhar Hospital Miraj

Research Variables

a) Independent variables: In this study Structured Teaching Programme was independent variable.
b) Dependent variable: In this study, knowledge regarding post-operative self-care management was dependent variable.

Target Population: In this study, the target population comprised of women who are undergoing abdominal hysterectomy.

Accessible Population: In this study, the accessible population comprised of women who are undergoing abdominal hysterectomy admitted in selected hospitals.

Sample Size: Study sample comprised of 60 women undergoing abdominal hysterectomy.

Sampling Technique: In this study, Non probability purposive sampling technique was adopted to select the subjects. Purposive sampling is based on the belief that the researcher's knowledge about the population can be used to hand pick sample members. This sampling technique permits the researcher to decide purposively, to select subjects which are judged to be typical of the population.

Criteria for Samples Selection

Inclusion criteria

1) Women who are undergoing elective abdominal hysterectomy.
2) Women who are willing to participate in the study.
3) Women who able to read and write Marathi and English.

Exclusion criteria

1) Women who are undergoing vaginal hysterectomy.
2) Women who are not available at the time of data collection.
3) Women who are critically ill.

Description of tool

Section I:-Socio-demographic variables such as- Age, Number of children, Education, Occupation and Source of information.

Section II:- Structured knowledge questionnaire of 25 items on knowledge regarding post-operative self-care management among women undergoing abdominal hysterectomy in selected hospitals.

Section III: Structured teaching programme.

Knowledge Score= 1 point for correct answer and 0 for incorrect answer.

Interpretations: Minimum score:0, Maximum Score: 25

Validity and reliability

Content validity concerns the degree to which an instrument has an appropriate sample of item for the construct being measured and adequately covers the construct domain. To ensure the content validity, the tool was given to 22 experts from different fields. The experts include 18 Nursing experts, 3 Obstetrician and 1 Statistician. The experts were requested to give their opinions and suggestions regarding the relevance of content and whether they agree or disagree with the tool or instrument and provide the necessary remarks.

The tool was found to be valid. Few validators suggested to modify procedure and gave instructions to keep uniformity in procedure.

In order to establish the reliability of the tool, it was administered to 10 women undergoing abdominal hysterectomy. To check the reliability of structured

knowledge questionnaire -Karl Pearson formula (split half method) was used, and the reliability was r= 0.88, thus the tool was found reliable.

Ethical Consideration

The study was approved by research committee of the institution .Assurance was given to the subjects that anonymity of each individual would be maintained.

Data Collection Procedure

Data gathering means information that is systematically collected in course of the study. Before the actual data collection, the investigator had completed the following formalities.

1) After securing written permission from respective authority, based on inclusion and exclusion criteria the subjects were selected.
2) The main study was conducted from 15/05/22 to 15/06/22 in the selected hospitals.
3) Informed and written consent was taken from the subjects after explaining the purpose of the study.
4) Pre- test was conducted by administering a structured knowledge questionnaire, followed by structured teaching programme.
5) Post- test was conducted after 7 days using same tool.
6) Data was analyzed and interpreted.

Plan for data analysis

The data analysis is the systematic organization and synthesis of research data and the testing of the research Hypotheses using that data. The data obtained was analyzed using both descriptive and inferential statistics based on objectives of the study.

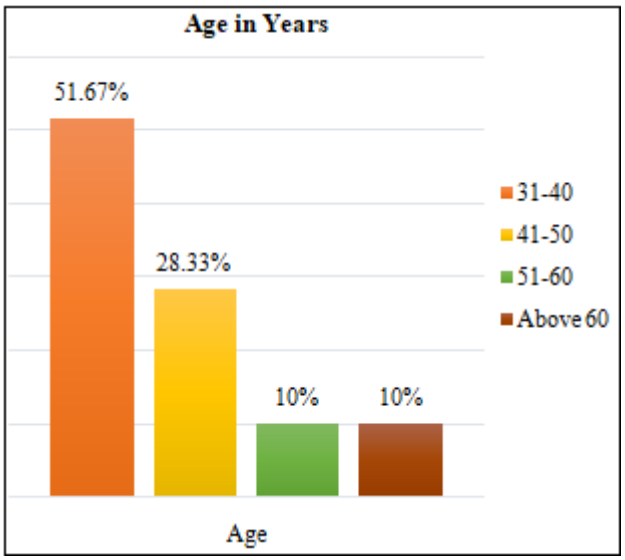
5. Result

Section I

Analysis related to demographic data of the women undergoing abdominal hysterectomy in selected hospitals in terms of frequency and percentage.

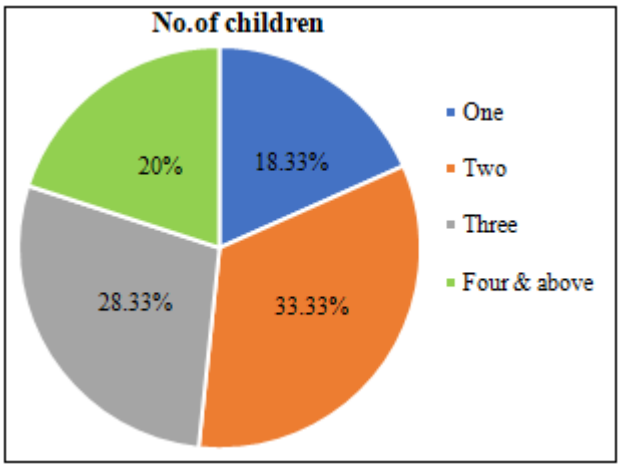
Table 1: Frequency & percentage distribution of the women undergoing abdominal hysterectomy according to demographic variables, n=60

Sr. No.	Variable	Groups	Frequency (f)	Percentage (%)
1	Age in years	31-40	31	51.67
		41-50	17	28.33
		51-60	6	10.00
		above 60	6	10.00
2	Number of Children	One	11	18.33
		Two	20	33.33
		Three	17	28.33
		Four & above	12	20.00
3	Education	Primary	24	40.00
		Secondary	22	36.67
		Graduate	9	15.00
		Post Graduate	5	8.33
4	Occupation	Housewife	26	43.33
		Private Job	14	23.33
		Government Job	5	8.33
		Farmer	15	25.00
5	Source of information	Mass Media	21	35.00
		ASHA workers	19	31.67
		Relatives	14	23.33
		Friends	6	10.00



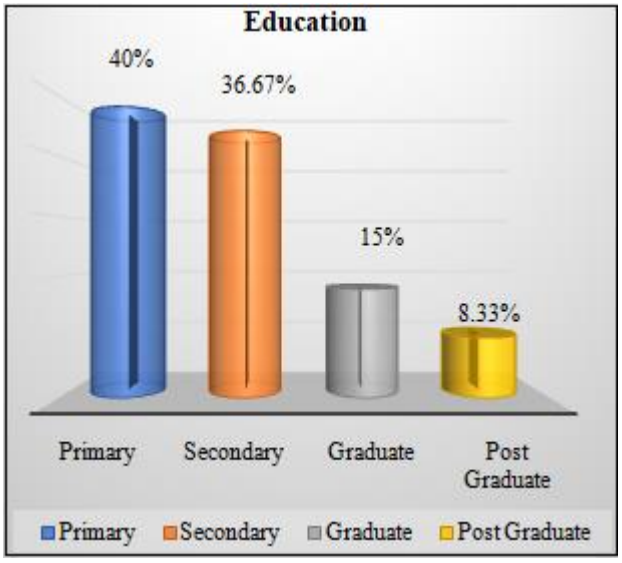
Graph 1: Simple Bar diagram showing frequency and percentage distribution of women according to age

The above simple bar diagram shows that, 31 (51.67%) women were in the age group between 31-40 years, 17 (28.33%) were between 41-50 years, 6 (10%) were between 51-60 years and 6 (10%) belonged to above 60 years



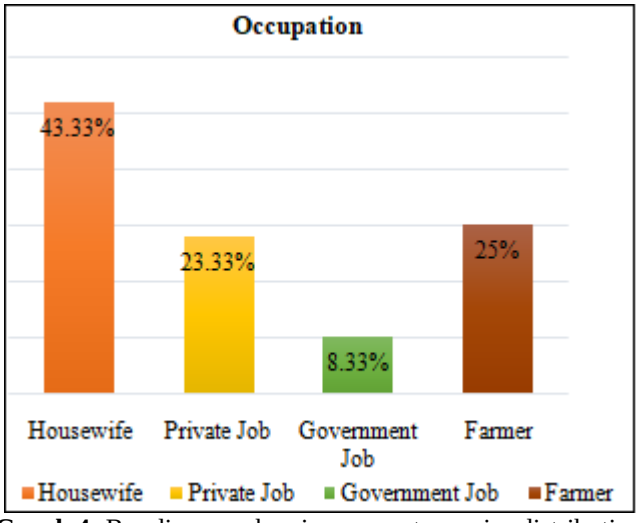
Graph 2: Pie chart showing percentage wise distribution of women based on number of children

The above pie chart depicts that, 20 (33.33%) women were having two children, 17 (28.3%) were having three children, 12 (20%) were having four and above children and 11 (18.33%) were having one child.



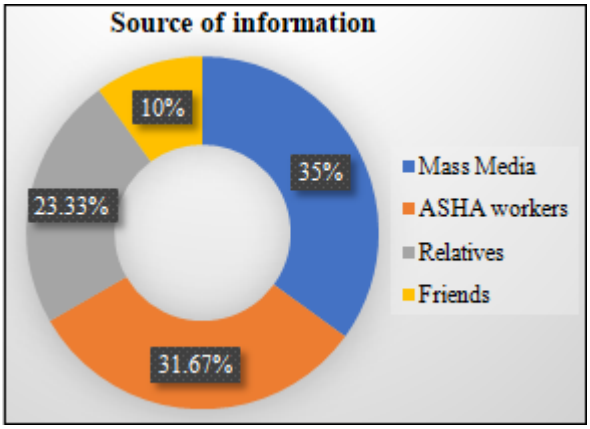
Graph 3: Cylindrical graph showing percentage wise distribution of samples based on their education

Above Cylindrical graph depicts that, women according to education, 24 (40%) had primary education, 22 (36.67%) had secondary education, 9 (15%) were graduate and 5 (8.33%) were postgraduate.



Graph 4: Bar diagram showing percentage wise distribution of women based on their occupation

Above 3D Bar diagram depicts that, women 26 (43.33%) were housewives, 15 (25%) were farmers, 14 (23.33%) of them were doing private job, 5 (8.33%) of them were doing government job.



Graph 5: Doughnut chart showing percentage wise distribution of samples based on source of information.

Above Doughnut chart depicts, women who received information regarding post-operative self-care management 21 (35%) from mass media, 19 (31.67%) from ASHA workers, 14 (23.33%) from relatives and 6 (10%) had received from friends.

Section II

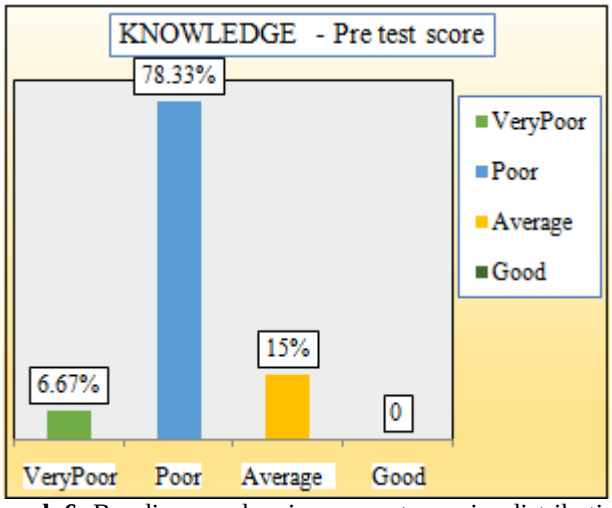
Analysis related to assessment of knowledge regarding post-operative self-care management among women undergoing abdominal hysterectomy in selected hospitals in terms of frequency and percentage.

Table 2: Assessment of knowledge pre-test scores regarding post-operative self-care management among women undergoing abdominal hysterectomy. *n=60*

Variable	Groups	Score	Pre Test	
			Frequency	Percentage
Knowledge	Very Poor	1-6.	4	6.67
	Poor	7-12.	47	78.33
	Average	13-18	9	15.00
	Good	19-25	0	0.00
Knowledge	Minimum		6	
	Maximum		14	
	Mean (SD)		10.08 (±2.15)	

The above table depicts that, 47 (78.33%) had poor knowledge, 9 (15%) had average knowledge, 4 (6.67%) had very poor knowledge and no one women had good knowledge.

The mean pre-test knowledge score was 10.08 with standard deviation of ±2.15. The minimum score of knowledge was 6 and maximum score had 14.

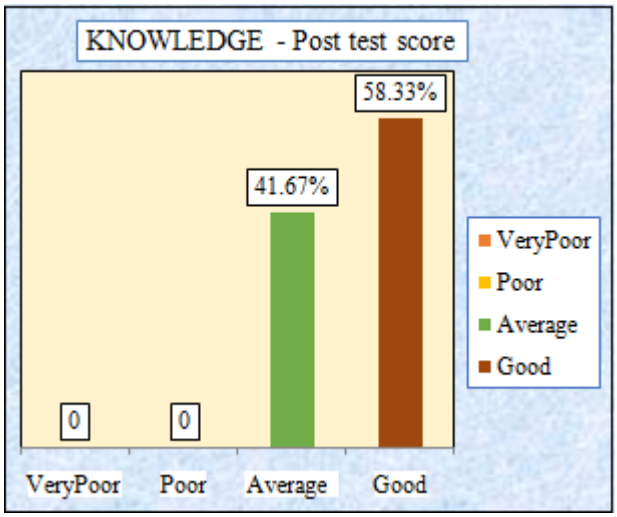


Graph 6: Bar diagram showing percentage wise distribution of pre-test knowledge scores.

Table 3: Assessment of Post-test knowledge scores regarding post-operative self-care management among women undergoing abdominal hysterectomy, *n=60*

Variable	Groups	Score	Post Test	
			Frequency	Percentage
Knowledge	Very Poor	1-6.	0	0.00
	Poor	7-12.	0	0.00
	Average	13-18	25	41.67
	Good	19-25	35	58.33
Knowledge	Minimum		15	
	Maximum		23	
	Mean (SD)		18.93 (±1.89)	

The above table depicts that, 35 (58.33%) women had good knowledge, 25 (41.67%) had average knowledge and no one had poor and very poor knowledge. The mean post-test knowledge score was 18.93 with standard deviation of ±1.89. The minimum score of knowledge was 15 with maximum score of 23.



Graph 7: Bar diagram showing percentage wise distribution of post-test knowledge scores

Section III

Analysis related to comparison of pre & post-test knowledge scores in terms of frequency and percentage.

Table 4: Comparison of pre & post-test knowledge scores regarding post-operative self-care management among women undergoing abdominal hysterectomy, *n=60*

Knowledge	Score	Pre Test		Post Test	
		Frequency	Percentage	Frequency	Percentage
Very Poor	1-6	4	6.67	0	0.00
Poor	7-12	47	78.33	0	0.00
Average	13-18	9	15.00	25	41.67
Good	19-25	0	0.00	35	58.33
Minimum		6		15	
Maximum		14		23	
Mean (SD)		10.08 (±2.15)		18.93 (±1.89)	

The above table shows that majority subjects in pre-test 47 (78.33%) had poor knowledge and minimum 4 (6.67%) had very poor knowledge respectively, while in post-test maximum 35 (58.33%) had good knowledge and minimum 25 (41.67%) had average knowledge.

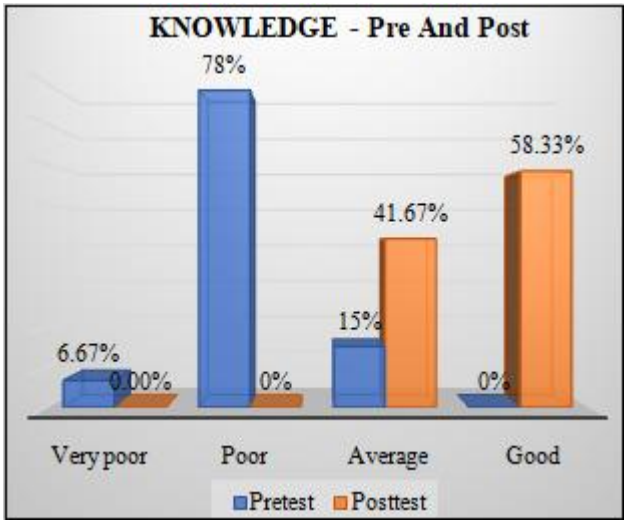


Figure 8: 3D Column diagram showing pre-test post-test knowledge score regarding post-operative self-care

management among women undergoing abdominal hysterectomy

Section IV

Analysis related to effectiveness of structured teaching programme on knowledge regarding post-operative self-care management among women undergoing abdominal hysterectomy in selected hospitals.

Table 5: Mean and standard deviation of knowledge scores regarding post-operative self-care management among women undergoing abdominal hysterectomy, n = 60

Group	Frequency	Mean	S.D.	t value	P value
Pre Test	60	10.08	±2.15	45.21	0.000
Post Test	60	18.93	±1.89		

The above table depicts that analysis of the pre-test and post-test mean of the knowledge regarding post-operative self-care management among women undergoing abdominal hysterectomy was done by the paired t test. The test was conducted at 5% level of significance.

The pre-test average score was 10.08 with standard deviation of ±2.15. The post-test average score was 18.93 with standard deviation of ±1.89. The test statistical value of the paired t test was 45.21 with p value 0.000, which is less than 0.05, hence the null hypothesis rejected and H_1 is accepted. Thus there is significant difference in pre and post-test knowledge scores.

It concluded that structured teaching programme was effective on knowledge regarding post-operative self-care management among women undergoing abdominal hysterectomy.

Section v

Analysis related to association between pre-test knowledge scores regarding post-operative self-care management among women undergoing abdominal hysterectomy with selected demographic variable.

Table 6: Association between the pre-test knowledge scores of women with selected demographic variables. *n=60*

Sr. No.	Variable	Groups	Knowledge		Chi Square		d.f.	Significance
			Below Md	Above Md	Calculated	Table		
1	**Age in years**	31-40	18	13	5.06	7.81	3	NS
		41-50	6	11				
		51-60	4	2				
		above 60	5	1				
2	**Number of Children**	One	7	4	0.75	7.81	3	NS
		Two	10	10				
		Three	10	7				
		Four & above	6	6				
3	**Education**	Primary	21	3	17.89	7.81	3	**S**
		Secondary	7	15				
		Graduate	4	5				
		Post Graduate	1	4				
4	**Occupation**	Housewife	19	7	10.01	7.81	3	**S**
		Private Job	4	10				
		Government Job	1	4				
		Farmer	9	6				
5	**Source of information**	Mass Media	8	13	4.52	7.81	3	NS
		ASHA workers	12	7				
		Relatives	10	4				
		Friends	3	3				

NS= Non-significant; S= significant

The findings of the above table shows that chi square test was used to find out association between the pre-test knowledge scores and demographic variables of women. Significant association found between the pre-test knowledge scores of women with demographic variables, education and occupation, no significant association was found between the pre-test knowledge scores of women with demographic variables, age in years, number of children and source of information.

The above graph depicts that, in the control group,12 (60%) post LSCS mothers were in the age group between 21-25 years, 5(25%) were between 26-30 years, 2(10%) were between 31-35 years and 1(5%) belonged to 36-40 years.

In the experimental group, 10(50%) post LSCS mothers were in the age group between 21-25 years, 8(40%) were between 26-30 years and 2 (10%) were between 31-35 years

6. Nursing Implication

The findings of the study have implication in nursing education, nursing practice, nursing administration and nursing research.)

Nursing Education

Nursing education is continuous changing and developing in india and nurse from our country can be found all over the world providing care and education.

Now a days more awareness is given to the health promotion and prevention of disease condition. The fact which is very

common in medical field i.e "prevention is better than cure." As per the changing needs of the society nurses should concentrate on such topics. As looking to the incidence of abdominal hysterectomy nursing education must emphasize on post-operative self-care management of women undergoing abdominal hysterectomy to promote good health of the women and prevent further complications.

Teacher can use the result of the study as an information illustration for the students to make students aware of post-operative self-care management of women undergoing abdominal hysterectomy. So it will help nurses to improve their knowledge as well as nurses can provide knowledge regarding post-operative self-care management among women undergoing abdominal hysterectomy.

Nursing Practice

The structured teaching programme helps in improving the knowledge of women undergoing abdominal hysterectomy. Hence, it can used as a teaching aid in gynecology department. Nurses can utilize this teaching aid to educate the women before undergoing hysterectomy which may help them to get speedy recovery.

Nursing Administration

The findings of the study can be used as a basis of in-service education programme for Axillary nurses, staff nurses and supervisors, to update their knowledge on post-operative self-care management of women, this will help them to improve their knowledge and can impart this knowledge to the women who are undergoing abdominal hysterectomy.

Nusring Research

Research is fundamental essential prerequisite for any profession. The purpose of nursing research includes identification, description, explanation, prediction and control of the facts. Therefore, present study provides base and further encouragement to carry out further study related to the area and various interventions can be adopted to educate this group. Nursing research studies need to concentrate on the behavior modification of women undergoing hysterectomy by developing unique educational programme especially in the field of gynecology.

7. Conclusion

The present study concluded that knowledge of the women regarding post-operative self-care management was improved after administration of structure teaching programme. Thus, the null hypothesis (H_0) is rejected and (H_1) is accepted.

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