A Study to Assess the Effectiveness of Structured Teaching Program (STP) Regarding Awareness on Generic Medicine among the Health Care Workers in Selected PHCs, Karad Taluka

Akshay S. Dudhe¹, Tukaram Zagade², Vaishali Mohite³

Abstract: Background: One of the measures to cut-down the expenditure on medicines is to use generic drugs. Hence the study was taken up to know the awareness and preference for generic drugs among the health care workers. Aim: This study aims to aware health care workers regarding Generic Medicine. Methodology: All the participants from selected PHCs. The study was done on total 50 participants. Among them, 33 were nursing staff, 5 were pharmacist and 12 were Multipurpose Health Workers (MHW) included. They were given a structured questionnaire to know the awareness and knowledge on generic drugs, then willingness to prescribed (health care workers) and used it. Structured Teaching Program (STP) given and then with same structured questionnaire post test collected. Results: The study results showed subsequent increase in knowledge as post test values were 38 (76 %) health care workers had good knowledge, 11 (22%) had average knowledge and 1(2%) had poor knowledge as compared to pre test 36 (72%) health care workers had average knowledge, 3 (6%) had good knowledge and 11 (22%) had poor knowledge regarding generic medicine. There was significant increase in mean knowledge (mean pre 14.44 SD=4.282 to mean post 22.4 SD=3.044). The calculated paired 't' value 13.644 is greater than table value (t=1.67) at 0.05 level of significance. Conclusion: The Structured Teaching Program (STP) was effective in improving the knowledge on awareness regarding Generic Medicine among the health care workers in selected PHCs, Karad Taluka. There is significant association found in between gender (p=0.0009) and education. (p=0.0026).

Keywords: assess, effectiveness, Structured Teaching Program (STP), awareness, Generic Medicine, health care workers, Primary Health Center (PHC)

1. Introduction

“An ounce of prevention is cheap, the pound of cure costly”

The rising health-care expenses remain a serious concern for the health-care system worldwide. As reported by the WHO, in many developing countries out-of-pocket expenses may go up to as high as 80% of total health-care expenditures.¹

The cost incurred on medicine is one of the major concerning components of that expenditure. Hence, the need of the hour is to keep health-care costs nominal without hampering the access to quality care.²

As we aim to cater high-quality health-care system to the masses with limited available resources, increased usage of generic medicines can improve affordability of the health care without compromising the quality.³ Drugs play a role in health protection and recovery, in addition to helping maintain and enhance the quality of life.⁴ Around one third of the world’s population encounters difficulties in accessing medications, due to high prices, with this proportion rising to 50% in the developing countries.⁵

Generic Drugs are an alternative to reference drugs in many countries all over the world, including the United States (USA), Germany, United Kingdom, Iraq, Malaysia and Brazil.⁶⁻⁷⁻⁸⁻⁹

A generic drug is defined as a medication that is produced freely after expiry of the patent protecting the branded product, necessarily being similar to the reference drug in bioequivalence in order to obtain the same therapeutic effect.¹⁰ The reference drug is registered with the federal public health surveillance agency, and its quality must be proven scientifically when applying for registration, with its efficacy and safety being tested through clinical trials.¹¹

In addition to reference and generic drugs, there is a third class called “similar drugs”, defined as medications with the same active ingredient(s), concentration, pharmaceutical form, route of administration, dosage and treatment indication, which are equivalent to the medication registered with the federal agency, although allowed to differ in some characteristics, such as product size and shape, use-by dates, packaging, labeling, excipients and vehicles.¹²

2. Problem Statement

“A study to assess the effectiveness of Structured Teaching Programme (STP) regarding awareness on generic medicine among the health care workers in selected PHCs, Karad Taluka.”

Objective of Study
1) To assess the level of awareness regarding generic medicine among the health care workers in selected PHCs, Karad taluka.
2) To evaluate the effectiveness of structured teaching program (STP) regarding awareness of generic medicine among the health care workers in selected PHCs, Karad taluka.
3) To find out the association between effectiveness of structured teaching program (STP) regarding awareness of generic medicine among the health care workers in selected PHCs and socio demographic variables.

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3. Hypotheses

H1 - There will be no significant difference between awareness regarding generic medicine among the health care workers before and after administration of Structured Teaching Program (STP).

H0 – There will be significant difference between awareness regarding generic medicine among the health care workers before and after administration of Structured Teaching Program (STP).

Setting of the Study
The study was conducted in selected PHCs in Karad taluka.

Study was carried out in Primary Health Centers (PHCs) Karad, Maharashtra from December. the study duration was 25th November 2017 to 25 December 2017.

Population
In this study, the population consisted of health care workers working in selected PHCs, Karad taluka.

Sampling Technique
In the present study, health care workers from Primary Health Centers(PHC) Karad, Maharashtra from December. the study duration was 25th November 2017 to 25 December 2017.

Data collection Technique and Tool
The data is the piece of information or facts that are collected in research study. An ideal data collection procedure is one that captures a data in a way that is relevant, credible, accurate, truthful and sensitive. The most important and crucial aspect of any research is data collection, which provides answer to the questions under study.

The present study is aimed to assess the awareness regarding generic medicine among the health care workers.

Thus, a structured questionnaire was prepared and used for data collection.

Section I
This deals with demographic data of the sample there are total 6 items in this section which includes personal data of health care workers, like age in years, gender, education, Monthly income, Source of information & Year of experience.

Section II
This section has subsections A,B & C
(A) Questionnaire on knowledge of Awareness regarding generic medicine:
This sub section has 10 items questions about the efficacy and safety of generic medicine

(B) Questionnaire on knowledge of availability of generic medicine:
This sub section has 10 items questions about the efficacy and safety of generic medicine

(C) Questionnaire on knowledge about the efficacy and safety of generic medicine:

4. Procedure for Data Collection

A time scheduled was planned for collecting the data. In order to obtained free and frank response each participant was taken into confidence and assured about confidentiality of their responses. The average time taken for each data collection was approximately 30 minutes. The study followed a before and after interventional study without control group design.

a) Pre-test
The structured knowledge questionnaire was administered to assess the awareness regarding the generic medicine. The total numbers of items were 30. Each correct item carried ‘1’ score & in-correct item carried ‘0’ score.

b) Post test
The post test assess the awareness regarding awareness on generic medicine was assessed by administering structured knowledge questionnaire after 7 days. Each correct items carried ‘1’ score & the wrong answers carried ‘0’ score.

The steps used for data collection were as follows:
1) The investigator introduced herself and explained the purpose of the study to the health care workers at PHCs, Karad.
2) The investigator after taking the permission of Health officer in Health Department Panchayat Samiti, Karad. Introduced and explained the purpose of the study to the sample who were included in the study.
3) The pre test on awareness regarding awareness on generic medicine was assessed through structured knowledge questionnaire. It was conducted on 12/12/2017 to 15/12/2017
4) Structured Teaching Program(STP) was administered at the end of pre test on 12/12/2017 to 15/12/2017.
5) The post test of the study was carried out 7 days later using the same tool as that of the pre test. On 22/12/2017 to 25/12/2017.
6) Data collected was tabulated and analyzed.

Plan for data analyzes:
The data obtained was analyzed in terms of the objectives of the study using descriptive and inferential statistics.

The plan of data analyses was as
a) Tabulation of data in terms of frequency, percentage, mean, SD, median & range and x2 test.

b) Classifying knowledge score using mean & SD as follows

- \[ X + SD \] good score
- \[ X - SD \] to \[ X + SD \] average score
- \[ X - SD \] poor score.
6. Conclusion

The Structured Teaching Program (STP) was effective in improving the knowledge on awareness regarding Generic Medicine.

There is strong need to create awareness among health care workers regarding generic medicine for cost effectiveness and to reduce the mortality rate due to the economical conditions for medical treatment.

- Majority of samples (20) 40% were within the age group of 34-40.
- Majority of samples (30) 60% were female and (20) 40% were male.
- The study results showed pre test 36 (72%) health care workers had average knowledge, 3 (6%) had good knowledge and 11 (22%) had poor knowledge. Were as subsequent increase in knowledge in post test values were 38 (76%) health care workers had good knowledge, 11 (22%) had average knowledge and 1 (2%) had poor knowledge as compared to post. regarding generic medicine.
- There was significant increase in mean knowledge (mean pre 14.44 SD=4.282 to mean post 22.4 SD=3.044). The calculated paired 't' value 13.644 is greater than table value (t=1.67) at 0.05 level of significance.
- The Structured Teaching Program (STP) was effective in improving the knowledge on awareness regarding Generic Medicine.
- There is strong need to create awareness among health care workers regarding generic medicine for cost effectiveness and to reduce the mortality rate due to the economical conditions for medical treatment.

References

[6] Sharrad AK, Hassali MA. Consumer perception on generic medicines in Basrah, Iraq: preliminary findings

5. Discussion

The present study was designed to as effectiveness of structure teaching programme, effectiveness of structured teaching programme (STP) on Generic Medicine among health care workers.

My study results showed subsequent increase in knowledge as post test values were 38 (76%) health care workers had good knowledge, 11 (22%) had average knowledge and 1 (2%) had poor knowledge as compared to pre test 36 (72%) health care workers had average knowledge, 3 (6%) had good knowledge and 11 (22%) had poor knowledge regarding generic medicine, there was significant increase in mean knowledge (mean pre 14.44 SD=4.282 to mean post 22.4 SD=3.044). The calculated paired ‘t’ value 13.644 is greater than table value (t=1.67) at 0.05 level of significance. The Structured Teaching Program (STP) was effective in improving the knowledge on awareness regarding Generic Medicine among the health care workers in selected PHCs, Karad Taluka. There is significant association found in between gender (p=0.0009) and education. (p=0.0026).

Table 11: Testing of hypothesis for Effectiveness of Structured Teaching Program (STP) on awareness regarding generic medicine, N=50

<table>
<thead>
<tr>
<th>Pre Intervention</th>
<th>Post Intervention</th>
<th>Mean Difference</th>
<th>Paired ‘t’ Value</th>
<th>p Value</th>
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<tbody>
<tr>
<td>X ± S.D</td>
<td>X ± S.D</td>
<td>8.22</td>
<td>13.644</td>
<td>0.0001</td>
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<tr>
<td>14.44 ± 4.282</td>
<td>22.4 ± 3.044</td>
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</table>

<table>
<thead>
<tr>
<th>S.No</th>
<th>Socio-Demographic Variables</th>
<th>Frequency (F)</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>1</td>
<td>Age in years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a)</td>
<td>20-30</td>
<td>12</td>
<td>24</td>
</tr>
<tr>
<td>b)</td>
<td>31-40</td>
<td>20</td>
<td>40</td>
</tr>
<tr>
<td>c)</td>
<td>41-50</td>
<td>13</td>
<td>26</td>
</tr>
<tr>
<td>d)</td>
<td>51 &amp; above</td>
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<td>10</td>
</tr>
<tr>
<td>2</td>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a)</td>
<td>Male</td>
<td>20</td>
<td>40</td>
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<tr>
<td>b)</td>
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<td>Education</td>
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<tr>
<td>a)</td>
<td>ANM</td>
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<tr>
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<td>GNM</td>
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</tr>
<tr>
<td>c)</td>
<td>B.Sc</td>
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<td>4</td>
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<td>d)</td>
<td>MHW</td>
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<td>Monthly income (Rs)</td>
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<tr>
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<td>31000-40000</td>
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<td>6</td>
<td>12</td>
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<tr>
<td>c)</td>
<td>Newspaper</td>
<td>8</td>
<td>16</td>
</tr>
<tr>
<td>d)</td>
<td>Health care workers</td>
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<td>1-3 year</td>
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<tr>
<td>c)</td>
<td>above 3 years</td>
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