IJCRT.ORG

ISSN: 2320-2882



INTERNATIONAL JOURNAL OF CREATIVE **RESEARCH THOUGHTS (IJCRT)**

An International Open Access, Peer-reviewed, Refereed Journal

"A STUDY TO ASSESS THE PREVALANCE AND EVALUATE THE EFFECTIVENESS OF VIRTUAL TRAINING PROGRAMME ON GENITAL TUBERCULOSIS IN TERM OF KNOWLEDGE AMONG INFERTILE WOMEN IN SELECTED COMMUNITY AREA, MEERUT."

Mrs. Archana Shankar*... Dr. Geeta parwanda**...... *PG Student, Faculty of Nursing, SVSU, Meerut. **Professor Department of community health nursing SVSU, Meerut.

RESEARCH ABSTRACT:Genital tuberculosis is the type of extra pulmonary tuberculosis which affects the genital organs. The incidence of genital tuberculosis varies widely with the socio-economic status of the patients and their environment. The incidence is high amongst the patients with infertility. With the prevalence of HIV infections, the incidence is increasing in developing country like India the incidence (18%) is more compared to the developed countries (1%) OBJECTIVES OF THE STUDY:-1.To assesses the prevalence of genital tuberculosis among infertile women 2.To assesses the level of knowledge on genital tuberculosis in experimental group and control group 3. To evaluate the effectiveness of virtual training programme on genital tuberculosis in experimental group as compared to control group 4. To find out the association between post-test level of knowledge on genital tuberculosis among infertile women with selected demographic variables in experimental group. RESEARCH METHODOLOGY: A quasi-Experimental study was done on 100 infertile women from 20-40 years 50 in both experimental and control group selected by purposive sampling technique. Data was collected by using prevalence gold standard checklist and structured knowledge questionnaire on genital tuberculosis pre-test and post- test taken both experimental and control group virtual training programme was given only to experimental group **RESULTS:** Maximum of the sample in experimental group were(26-30) age group i.e.17(34%) and control group were age group of (31-35) age group 19(38%) , (31%) among sample present with sign and symptoms of genial tuberculosis as measured by

Severe prevalence (6)Moderate (15)Low prevalence (10). The mean difference between pre-test knowledge and post-tests knowledge (8.52). The 't' value of (14.52) for df (49) was found to be statistically significant at 0.05 level. More over a near significant association was found between knowledge score the age, education status. **CONCLUSION**: In virtual training programme on genital tuberculosis was effective in enhancing the knowledge score of infertile women

INTRODUCTION:-

Tuberculosis is a major public health problem throughout the world affecting about 10.4 million people of which 3.5 million cases are from India and causing about 1.4 million deaths annually. The exact prevalence of FGTB in India is not known but varies from 1% to 19% among gynaecological patients, and it is responsible for 10% cases of infertility.

According to World Health Organisation (WHO) TB statistics for India for 2019 (the latest available) give an estimated incidence figure of 2.64 million cases .This is a rate of 193 per 100,000 population

NEED FOR THE STUDY

K .Tiwari (2020) The most common form of extra pulmonary TB is genitourinary disease, accounting for 27% (range, 14 to 41%) worldwide. In India the incidence of genital tuberculosis is nearly about 18% among women aged between 17-40 years .Study findings revealed that in Karnataka, women with a reported history of genital tuberculosis were about 3%.In females the genital organs commonly affected are as follows: fallopian tube (95-100%), endometrial (50-60%), ovaries (20-30%), cervix (5-15%), myometrium (2.5%) and vulva/vagina (1%).

STATEMENT OF THE PROBLEM

"A STUDY TO ASSESS THE PREVALANCE AND EVALUATE THE EFFECTIVENESS OF VIRTUAL TRAINING PROGRAMME ON GENITAL TUBERCULOSIS IN TERM OF KNOWLEDGE AMONG INFERTILE WOMEN IN SELECTED COMMUNITY, MEERUT"

OBJECTIVES:

- 1. To assess the prevalence of genital tuberculosis among infertile women.
- 2. To assess the level of knowledge on genital tuberculosis in experimental group and control group.
- 3. To evaluate the effectiveness of virtual training programme on genital tuberculosis in term of knowledge in experimental group as compared to control group.
- 4. To find out the association between post-test level of knowledge on genital tuberculosis with selected demographic variables in experimental group.

RESEARCH HYPOTHESIS (at 0.5 level of significance)

H01: The mean post test level of knowledge among infertile women will not be significantly higher than the mean post -test knowledge scores in control group.

H02: There will not be a significant association between post test knowledge scores of infertile women in experimental group with their selected demographic variables

H1: The mean post-test level of knowledge who received virtual training programme on genital tuberculosis in experimental group will be significantly higher than the post -test level of knowledge score among infertile women in the control group.

H2 There will be a significant association between post -test levels of knowledge regarding genital tuberculosis with their selected demographic variables.

OPERATIONAL DEFINITION:-

Operational is defined as a concept or variable in terms of the procedures by which it is to be measured.

ASSESS:

In this study it means to find out the prevalence of genital tuberculosis and effectiveness of virtual training programme.

PREVALENCE:

In this study it refers to the number of infertile women affected with genital tuberculosis.

EVALUATE:

In this study it refers to kind out the knowledge among infertile women regarding genital tuberculosis.

VIRTUAL TRAINING PROGRAMME:

In this study, it refers to the systematically developed training programme designed for a group of infertile women in a community to provide information on definition, pathological involvement, clinical features, treatment modalities and complication of genital tuberculosis by lecture and discussion with a view to improve their knowledge on the same.

GENITAL TUBERCULOSIS:

In this study it refers is to infection of tuberculosis in the genital region of women.

EFFECTIVENESS:

In this study it refers to the extent of the knowledge of infertile women towards the genital tuberculosis.

KNOWLEDGE:

In this study it refers to correct responses of the infertile women to questions regarding genital tuberculosis measured by the structured knowledge schedule as evidence from their knowledge score.

INFERTILE WOMEN:

In this study infertile women refers to those not were not been pregnant even after a year of marriage.

DELIMITATIONS OF THE STUDY

The delimitations is

- Married women living with spouse and having no children residing in Meerut. District
- Virtual training programme will be given only once.
- Data collection period will be maximum of 6 weeks
- Gold standard criteria will be followed as diagnostic tool to assess the genital tuberculosis.

REVIEW OF LITERATURE:-

A literature review provides an overview of previous research on a topic that critically evaluates, classifies, and compares what has already been published on a particular topic. It allows the author to synthesize and place into context the research and scholarly literature relevant to the topic. It helps map the different approaches to a given question and reveals patterns. It forms the foundation for the author's subsequent research and justifies the significance of the new investigation.

The literature review was categorized into the following headings:

Section I: Literature regarding prevalence, clinical features, treatment of genital tuberculosis.

Section II: Literature Related to knowledge on genital tuberculosis among infertile women.

Section III: Literature related to effectiveness of virtual teaching programme on genital tuberculosis among infertile women

POPULATION/SAMPLE

In the present study the population consists of infertile married women of age group 20-40yrs

In selected in urban community areas of Meerut

Sample and sample size:

Sample size included in the study was 100 (50 in experimental group and 50 in control group) from community at Meerut

Control group: - urban area Panchali area at Meerut.

Experimental group urban area Sabun godam Nai basti area at Meerut

INCLUSION CRITERIA

- Married women having no children who are willing to participate
- Married women who can read and write
- Married women up to the forty years of age

EXCLUSION CRITERIA-

- Those who are not willing to participate in the study.
- Married women who are on contraceptive
- Women taking treatment for infertility due to medical reasons

DATA COLLECTION TOOLS-

Section I: Includes four items of demographic variables such as age, educational status, and type of family and source of information about genital tuberculosis.

Section II-2.GOLD STANDARD CHECKLIST FOR PREVALENCE FOR TB

It helps to assess the tuberculosis among infertility women

A composite gold standard was created comprising AFB culture, histopathology, and laparoscopy. A case was labelled as TB positive if either culture or histopathology tested positive or there were affirmative findings of TB on laparoscopy in patients positive with TB-PCR and Gene Expert.

Section III: It consists of total 27 items related to knowledge regarding genital tuberculosis. There were four sections

Level of knowledge Percentage

Below Average 0-9(0-35%)

Good 10-19 (35-65%)

Very good 19–27 (66 - 100%)

ANALYSIS AND INTERPRETATION OF THE DATA

Data presented in table depicts in experimental group that:-

- The data represented in table 1 shows in this group 6 (12%) were in age20-25 yrs, 17(34%) were in age 26-30 yrs, 14 (28%) were in age 31-35yrs, 13(26%) were in age 35-40.
- As per the religion 27 (54%) were Hindu, 18 (36%) were Muslim, 3(6%) were Chrisitian ,2(4%) were Sikh,
- As per the education 16(32%) were no formal education, 23(46%) were primary education, 10(20%) were secondary, 1(2%) were higher education.
- As per the occupation 43(86%) were house wife ,4(8%) were self employed,3(6%) were having private job.
- As per the previous illness 7(13%) have medical illness like hypertension. anxiety, 43(86) were not having any illness.
- As per the personal habits 10(20%) were smoking ,3(6%) were tobacco user ,3(6%) were alcoholic 34(68%) were no other bad habits.
- As per menstrual history 15(30%) were having regular menstrual, 35(70) were having in regular menstrual.
- As per the duration of menstruation 7(14%) were having 1-2 days menstruation, 15(30%) were having 3-4 days menstruation,22(44%) were having 4-5 days menstruation 8(16%) were having more than 5 days menstruation.
- As per pervious knowledge regarding genital tuberculosis 20(40%) were having knowledge 30(60%) were not having knowledge on genital tuberculosis.
- As per source of information on genital tuberculosis 15(30%) health profeesional, 18(36%) television, 10(20%) friends & family members 7(14%) newspaper.

Data presented in table depicts in control group that:-

- The data represented in table 1 shows in this group 11 (22%) were in age 20-25 yrs. 10(20%) were in age 26-30 yrs, 19 (38%) were in age 31-35yrs, 10(20%) were in age 35-40.
- As per the religion 38 (76%) were Hindu, 12 (24%) were Muslim, 0(0%) were Chrisitian ,0(0%) were Sikh,
- As per the education 18(36%) were no formal education, 22(44%) were primary education, 9(18%) were secondary, 1(2%) were higher education.
- As per the occupation 47(94%) were house wife .1(2%) were self employed.2(4%) were having private job.
- As per the previous illness 4(8%) have medical illness like hypertension, anxiety,,46(92%) were not having any illness.
- As per the personal habits 13(26%) were smoking ,4(8%) were tabbaco user ,2(4%) were alcoholic 31(62%) were no other bad habits.
- As per menstrual history 10(20%) were having regular menstrual, 40(80) were having in regular menstrual.
- As per the duration of menstruction 10(20%) were having 1-2 days menstruation, 10(20%) were having 3-4 days menstruation, 20(40%) were having 4-5 days menstruation 10(20%) were having more than 5 days menstruation.
- As per pervious knowledge regarding genital tuberculosis 17(35%) were having knowledge 33(66%) were not having knowledge on genital tuberculosis.
- As per source of information on genital tuberculosis 12(24%) health profeesional, 16(32%) television, 10(20%) friends & family members 12(24

IMPLICATIONS FOR NURSING ADMINISTRATION:-

- Nurse administrator plays a vital role in the supervision and management of nursing profession.
- The nursing administrator can plan and conduct education programmes, which are beneficial to nursing faculty, staff nurses and students. The concept of extended and expanded role of a nurse offers many opportunities for the nurse administrator to coordinate the work of her subordinates in providing holistic health care to the women suffering from genital tuberculosis.
- Planning and organizing such work requires efficient team spirit, planning for manpower, money, material, method, time and goodwill to conduct successful education programme. Nurse administrators can also take the initiative in imparting knowledge through different teaching strategies.

IMPLICATIONS FOR NURSING RESEARCH:-

- Nursing practice should be based on scientific body of knowledge. There are only very few studies conducted on genital tuberculosis. More innovative teaching methods like reproductive and gynaecological health issues package can be implemented and its effectiveness can be evaluated. Further research should be conducted to create awareness.
- Nursing research need to relate the present health care system and its status in the
 nursing profession. Novelties rule the world and every novel idea need to be
 supported enough with many attempts of research. By conducting new researches and
 generating new theories, improvement occurs in knowledge, skill and practice of
 nursing and its relatedness.

NURSING IMPLICATIONS:-

The findings of the present study have implications for nursing practice, community health nursing, nursing education, nursing administration, and nursing research.

NURSING PRACTICE:

- Now a day's woman suffers infertility with the symptoms of genital tuberculosis health teaching is an integral part of nursing practice.
- This Virtual training program also helps the infertile women to recognizes the symptoms of genital tuberculosis.

NURSING EDUCATION:

• Nursing in today's world experience changes in the expectations and needs of their consumers. Majority are focusing on the aspects of holistic health care. It is one of the responsibilities of a nurse to equip herself with updated knowledge of management of diseases and the various alternative methods to prevent the spread of diseases so that she will be able to impart her knowledge to her patients and to educate them regarding the most appropriate methods to prevent the diseases like genital tuberculosis and about its treatment.

COMMUNITY HEALTH NURSING

- Infertile women after marriage they do not have proper knowledge about genital tuberculosis. So they should be able to maintain education and care.
- Organize video session and health education on genital tuberculosis and also organize camps for identification of high risk cases of genital tuberculosis

LIMITATIONS:

- 1. This study was confined to a limited samples of 100infertile women which this limits generalization of the finding.
- 2. The assessment of prevalence of genital tuberculosis was by the checklist by the researcher as no physical examination was taken regarding the same

RECOMMENDATIONS

- A comparative study can be done to see the difference in the effect of virtual training programme in term knowledge on genital tuberculosis in community areas.
- Based on the findings following recommendations were put forward for the further research.
- A similar study can be conducted on a larger sample.
- A similar study can be conducted in community area among reproductive age group women.
- A comparative study can be conducted between urban and rural college girls on Knowledge on genital tuberculosis.
- A follow up study can be conducted to determine the effect of teaching in terms of gain in knowledge on genital tuberculosis.

REFERENCES:-

- 1. Rao KN. History of tuberculosis. In: Text book of Tuberculosis 2nd Edition. Vikas Publishing house; 1981.
- 2. Konomi N, Lebwohl E, Mowbray K, Tattersall I, Zhang D. Detection of mycobacterial DNA in andeanmummies. J Clin Microbiol. 2002;40, 4738-40.
- 3. Broune AW, Williams LM. Genital tuberculosis: inrecent advances in Obstetrics/Gynaecology 2ndedition, 10th volume, London; 1962.
- 4. Tripathy SN. Genital affection in pulmonarytuberculosis. Ind J Th. 1991;38:191.
- 5. Sharma J. Current diagnosis and management offemale genital tuberculosis. J Obstet Gynecol India.2015;65(6):362-713.
- 6. Urdea M, Penny LA, Olmsted SS. Requirements forhigh impact diagnostics in the developing world. Nature. 2006;444:732.
- 7. ACOG Committee on Practice Bulletins. ACOGPractice Bulletin No. 51, Chronic Pelvic Pain. ObstetGynaecol. 2004;103:589-605.
- 8. Centers for Disease Control and Prevention Sexuallytransmitted diseases treatment guidelines. MMWRRecomm Rep. 2015;64(RR-3):11-37.
- 9. Brission-Noel A, Azner C, Chureau C, Nquyen S, Pierre C, Bartoli M, et al. Diagnosis of tuberculosisby DNA amplification in clinical practice. Lancet.1991;338:364.
- 10. Singh N, Sumana G, Mittal S. Genital tuberculosis aleading cause for infertility in women seekingassisted conception in North India. L Arch GynaecolObstet. 2008;278:325-.