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"A Study To Assess The Effectiveness Of Structured Teaching Program On Knowledge Regarding Tuberculosis Among Adults In Selected Villages At Meerut."

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ABSTRACT: India has the highest number of TB cases in the world. Tuberculosis still remains a major public health problem despite the fact that the causative organism was discovered some 100 years back and highly effective drugs are available for its treatment. Worldwide 9.4 million cases are detected out of which half are sputum positive. India is 17th among 22 high burden countries in terms of TB incidence rate. The global annual incidence estimate is 9.4 million cases out of which it is estimated that 1.98 million cases are from India. In India, every day more than 5000 people develop tuberculosis disease and nearly 1000 die due to tuberculosis i.e. 2 deaths every 3 minutes. Deaths due to Tuberculosis exceed the combined deaths due to all other communicable disease and account for 26% of all avoidable deaths in adults. This study evaluated whether structured teaching program is effective for improving knowledge regarding tuberculosis among Adults. **OBJECTIVE:** 1. To assess the pre-test & post-test knowledge score of adult people regarding tuberculosis. 2. To evaluate the effectiveness of structured teaching program regarding tuberculosis among adult people. 3. To find out association between post-test knowledge score with selected demographic variables. **RESEARCH METHODOLOGY:** In this present study quantitative research approach is used. Pre-experimental one group pre-test post-test design was considered to be appropriate to assess the effectiveness of structured teaching program on knowledge regarding tuberculosis among adults in selected Rural area at Meerut. Sample size is 50 Adults selected by Purposive sampling technique. **RESULT:** The result of the study show that the post-test score of mean (14.26) among Adults was higher than the pre-test score of mean (8.40) after structure teaching program, and it was found to be statistically significant as evident from the obtained "t" value (9.755) at 0.05 level of significance. The Calculated t value (9.755) is greater than the table value (2.25). So, the hypothesis (H1) is accepted. Hence the structured teaching program was effective to improve knowledge regarding tuberculosis among adults. **CONCLUSION:** The

study concluded that there is no significance association between knowledge score of adults with selected demographic variable except Gender.

KEYWORDS: Assess, Effectiveness, STP, Tuberculosis, Adults.

INTRODUCTION:

India has the highest number of TB cases in the world. Tuberculosis still remains a major public health problem despite the fact that the causative organism was discovered some 100 years back and highly effective drugs are available for its treatment. Worldwide 9.4 million cases are detected out of which half are sputum positive. India is 17th among 22 high burden countries in terms of TB incidence rate. The global annual incidence estimate is 9.4 million cases out of which it is estimated that 1.98 million cases are from India. In India, every day more than 5000 people develop tuberculosis disease and nearly 1000 die due to tuberculosis i.e. 2 deaths every 3 minutes. Deaths due to Tuberculosis exceed the combined deaths due to all other communicable disease and account for 26% of all avoidable deaths in adults. Tuberculosis affects the most productive age group. Of all tuberculosis cases in India 2/3rd are male and 70% of all patients are aged between 15 and 54 years. It has been acknowledged though that TB control efforts worldwide, although impressive are not sufficient. The global TB targets- detecting 70% of TB cases and successfully treating 85% of them and halving the prevalence and mortality of the disease by 2015 as part of the Millennium Development Goals (MDGs)- are likely to be met only if current efforts are intensified.

NEED FOR THE STUDY

Infectious disease is the major public health issue for both developed and developing countries. India suffers significant population losses each year from infectious diseases. India suffers significant population losses each year from infectious diseases. Among infectious diseases, tuberculosis is the single largest killer of young and adult populations in the world. Subsequently “Stop TB strategy”, with the aim to reduce Tb burden by 2015 was also initiated by WHO in the year 2006. Unfortunately, the lack of knowledge about various aspects of tuberculosis result in poor compliance with drug therapy leading to the emergence of Extended Multi and drug resistance (TDR) tuberculosis. Improving the overall knowledge about tuberculosis may influence the attitude of the patients and their families towards treatment of tuberculosis and may result in better compliance leading to reduction of drug resistance tuberculosis and finally even elimination of tuberculosis infection. Tuberculosis is spreading worldwide day by day. Many of death causes due to tuberculosis in worldwide specially in developing country. In developing country there is lack of knowledge regarding tuberculosis is the main cause of disease. People have lack of knowledge regarding communicable disease in which tuberculosis is one of them. This study help to improve the knowledge among adult population living in rural area. This will help to increase their knowledge and help to prevent from this disease and will control to spread this disease.

STATEMENT OF THE PROBLEM

"A study to assess the effectiveness of structures teaching program on knowledge regarding tuberculosis among adults in selected villages at Meerut."

OBJECTIVES

1) To assess the pre-test & post-test knowledge score of adult people regarding tuberculosis.
2) To evaluate the effectiveness of structured teaching program regrading tuberculosis among adult people.
3) To find out association between post-test knowledge score with selected demographic variables.

OPERATIONAL DEFINITIONS

- **ASSESS:** It is the organized systematic continuous process of collecting data from about pre-test and post-test knowledge in rural adult population regarding tuberculosis.
- **EFFECTIVENESS:** Refers to the extent to which the structure teaching programme has achieved the desired outcome as expressed in terms of gain in knowledge score regarding tuberculosis.
- **STRUCTURED TEACHING PROGRAM:** It is an educational program which refers to teaching programme was done by using the different teaching method. In the present study rural population will get the teaching regarding tuberculosis.
- **KNOWLEDGE:** It refers to the level of understanding of facts, information and skill acquired through experience. In this study it is measured by the correct responses of rural population to the knowledge item of the questionnaires regarding tuberculosis.
- **VILLAGE:** A village or a countryside is a geographic area that is located outside towns and cities.

HYPOTHESIS (P<0.05 level of significance)

H1- There is significant difference between pre-test and post-test knowledge scores among adult people regarding knowledge of tuberculosis at 0.5 level of significance.

H2- There is significant association between knowledge of adult people regarding tuberculosis with selected demographic variables at 0.5 level of significance.

ASSUMPTIONS

Structured teaching program will have positive effect and improve the knowledge of adult people regarding tuberculosis.

DELIMITATIONS OF THE STUDY

- Study is limited to the age group of 20-40 yrs.
- The sample size is limited to 60.
- The period of the study is limited to 6 weeks.
- The study is conducted in rural area.

REVIEW OF LITERATURE

The review of literature is an extensive, systematic selection of potential sources of previous work, which acquaints the investigator with fact finding work after scrutinization.

In this chapter the researcher presents the review of literature under following headings:

Studies related to knowledge regarding tuberculosis.

Studies related to structure teaching programme.

Studies related to structured teaching programme regarding tuberculosis.

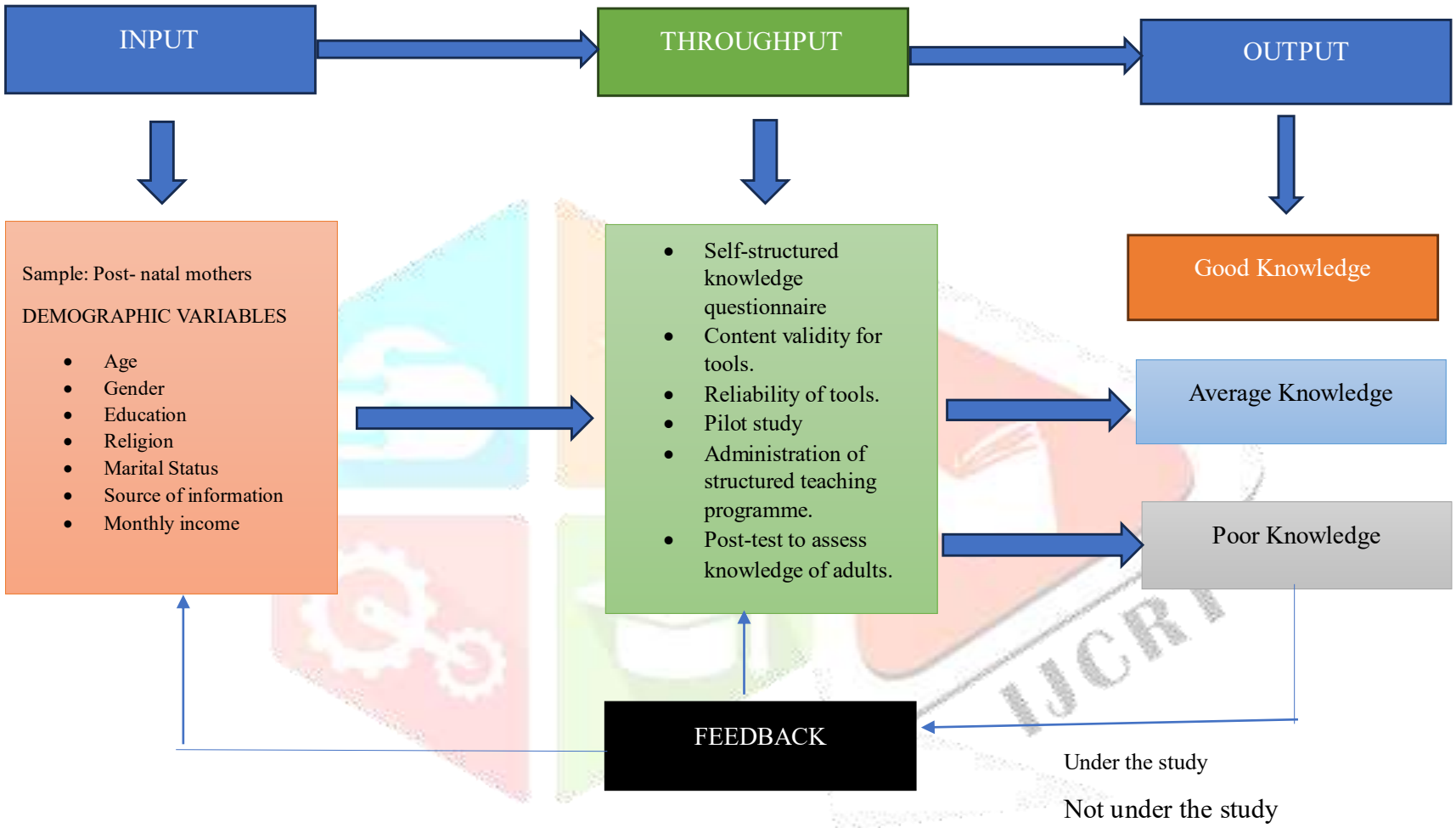

Fig.1: Conceptual framework J.W. Kenny's model to evaluate the effectiveness of structured teaching programme on knowledge regarding tuberculosis among adults in selected villages at Meerut.

SETTING OF THE STUDY

Study will be conducted in selected Rural Areas at Meerut.

SCHEMATIC PRESENTATION OF RESEARCH

Target Population

Adults

SAMPLINH

Sample

Adults who met the inclusion criteria.

Sample size

Sample size was 50 adults.

Sampling Technique

Non probability Purposive sampling technique was used in this study.

CRITERIA FOR SAMPLE SELECTION

The samples were selected based on the following inclusion and exclusion criteria:

Inclusion Criteria

The study includes

- Adults available at the time of data collection.
- Adult who was willing to participate in this study.
- The population was 20-40 years of age group.

Exclusion Criteria

The study excludes the

- Adult who refuse to give consent for participation in the study.
- Adult who has taken any other teaching programme.

DEVELOPMENT OF TOOL

Two tools were used in this study

TOOL 1. Demographic variable of the samples

It included variables like age (in years), gender, education, marital status, monthly income, source of information regarding tuberculosis.

TOOL 2. Self-structured knowledge questionnaire

In this part Self structured questionnaire knowledge regarding Tuberculosis. It consists of 25 questions.

Table: Data collection tools and techniques

S.No.	Tool	Purpose	Data collection technique
1	Structured questionnaire • Part 1 (Demographic characteristics)	1. To determine the socio-demographic data of sample.	Self-administered questionnaire (demographic data)
2	Part 2- Self-structured questionnaire	2. To assess the knowledge regarding Tuberculosis.	Self-administered questionnaire

DATA ANALYSIS AND INTERPRETATION

1. **Description of the demographic variable of sample**

- The majority of samples 27 (54%) were in the age group of 20-24 years, 11 (22%) of the sample belongs to the age group of (25-29 years). 12 (24%) of the sample belongs to the age group (30-34 years).
- As per gender is 39 (78%) are male & 11 (22%) are female.
- As per educational status of samples, 24 (48%) were high school, 14 (28%) were uneducated, 12 (24%) of samples were intermediate.
- As per religion 31 (62%) of the samples were Hindu and 19 (38%) of the samples were Muslim.
- As per marital status 30 (60%) participants were single, 18 (36%) were married.
- Majority of the samples 22 (44%) got information from friends and colleagues and 14 (28%) of participants got from books.
- Majority of the samples 20 (40%) participants monthly income were 16000-26000, 19 (38%) participants monthly income were <15000.

2. **Effectiveness of self-structured knowledge questionnaire**

- Data depicted that 29 (58%) that is majority of adults had poor knowledge, 15 (30%) of adults had average knowledge and 6 (12%) had good knowledge in pre-test. But in post-test 28 (56%) had average knowledge, 15 (30%) of adults had good knowledge and 07 (14%) in poor knowledge after administrating the structured teaching program.
- This indicated that the structured teaching program among adults was effective and improve the knowledge regarding tuberculosis among adult.

3. **Association of KMC Lappet with physiological parameters**

- There was no significant association between post-test level of quality of life with the selected demographic variables (Age group, education, religion, marital status, source of information, monthly income). This indicated that their demographic variable of adults and their knowledge did not have the significant association and were independent of each other.
- There was significant association between post-test level of knowledge regarding tuberculosis with the gender.
- So, the hypothesis (H2) is accepted.

NURSING IMPLICATIONS

The results of the present study have implications for nursing education, Nursing administration, nursing practice and nursing research.

NURSING EDUCATION

Nurse educators have to specially train to educate people regarding tuberculosis. Nurse educator must update knowledge about tuberculosis.

The nursing students who are specializing in their masters in medical surgical can be trained specially to give a qualitative care.

The nurse educator can create awareness about tuberculosis to the family members of terminally ill.

Nurse educator should teach nursing students to gain skills in identifying the disease condition and can be given effective nursing care to improve the patient's condition.

Nurse educator should recommend the curriculum committee to insist the importance of knowledge about tuberculosis to improve the health status of people in the nursing curriculum.

NURSING PRACTICE:

Nurse should play a vital role in recognizing the condition of patient. Nurse can provide an effective care to make health of ill person.

Nurses can teach the community about tuberculosis and its benefits in order to make better health status in the rural area.

A good communication and more opportunities for interaction between the nursing personnel and client and family members can be enhanced.

NURSING ADMINISTRATION

Nurse administrator should plan to conduct any alternative therapies to increase the health status in rural people.

Nurse administrator should recommend allocating funds for educational materials like pamphlets, models, slides, flexes which contain information about tuberculosis and it's prevention.

The nurse administrator should arrange for education program to disseminate the research fin dings and emphasis for good and useful effect of teaching program.

The Nurse administrator can prepare skilled nurses who can spend time with people in solving psychological and physiological disequilibrium in patient.

LIMITATIONS

- The study limited to selected rural area at Meerut.
- The intervention is limited to six days only.
- The study is limited to adult sample only.
- The sample size is limited to 50.

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