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"A Study To Assess The Effectiveness Of Structured Teaching Programme On Knowledge Regarding Prevention And Management Of Perimenopausal Symptoms Among Women In Selected Community Areas Of Indore"

Sonam Rani

Dr. Reena Thakur

ABSTRACT

Background

Perimenopause is a transitional stage before menopause characterized by hormonal changes that lead to physical, psychological, and emotional symptoms. Women commonly experience hot flushes, sleep disturbances, mood changes, fatigue, menstrual irregularities, and decreased quality of life. Lack of awareness regarding symptom management often affects health outcomes.

Objectives

1. To assess pre-test knowledge regarding prevention and management of perimenopausal symptoms among women.
2. To assess the effectiveness of a Structured Teaching Programme on knowledge regarding prevention and management of perimenopausal symptoms.
3. To determine the association between post-test knowledge scores and selected demographic variables.

Methodology

A quantitative research approach with a pre-experimental one-group pre-test post-test design was adopted. The study was conducted among women in selected community areas of Indore. The sample consisted of 100 women selected through convenient sampling technique. Data were collected using a structured knowledge questionnaire.

Results

Pre-test findings showed that 54% of women had inadequate knowledge, 36% had moderately adequate knowledge, and 10% had adequate knowledge. Post-test results demonstrated improvement where 70%

had adequate knowledge, 24% had moderately adequate knowledge, and 6% had inadequate knowledge. The mean post-test score (23.78±3.42) was significantly higher than the pre-test score (12.43±4.18). The paired t-value (17.84) was statistically significant at $p<0.001$.

Conclusion

The study concluded that the Structured Teaching Programme was effective in improving knowledge regarding prevention and management of perimenopausal symptoms among women.

Keywords: Perimenopause, Structured Teaching Programme, Knowledge, Women, Community Health

INTRODUCTION

Perimenopause is a natural transitional phase in a woman's reproductive life that occurs before menopause and is characterized by hormonal fluctuations and changes in menstrual cycles. It generally begins several years before menopause, usually during the fourth or fifth decade of life, and continues until menopause is reached. During this period, women experience significant physiological and psychological changes due to declining ovarian function and variations in estrogen and progesterone hormone levels.

Perimenopause is associated with a wide range of symptoms that vary in intensity and duration among women. Common symptoms include irregular menstruation, hot flushes, night sweats, sleep disturbances, mood swings, irritability, anxiety, depression, fatigue, memory problems, and decreased concentration. In addition, women may experience musculoskeletal discomfort, weight gain, reduced energy levels, and changes in sexual health. These symptoms can significantly affect their physical health, emotional well-being, social relationships, and quality of life.

Globally, the number of middle-aged and older women is increasing due to improvements in healthcare and life expectancy. Consequently, health problems related to menopause and perimenopause have become important public health concerns. Studies indicate that a large proportion of women experience moderate to severe symptoms during the perimenopausal period, which can adversely affect their daily activities and overall health status.

NEED FOR THE STUDY

Perimenopause is a transitional period before menopause during which women experience significant hormonal fluctuations resulting in various physical, psychological, and emotional symptoms. Common symptoms include hot flushes, irregular menstruation, sleep disturbances, mood changes, anxiety, fatigue, and decreased quality of life. These symptoms can negatively affect the physical well-being, social relationships, and daily activities of women if not managed appropriately.

Globally, women constitute a substantial proportion of the aging population, and the prevalence of perimenopausal symptoms is increasing with rising life expectancy. Studies have shown that many women lack adequate awareness regarding the physiological changes occurring during the perimenopausal period and the available preventive and management strategies. Lack of knowledge often results in delayed healthcare-seeking behavior, poor symptom management, and reduced quality of life.

In India, awareness regarding reproductive and menopausal health remains inadequate, especially among women residing in community settings. Factors such as limited access to health information, lower educational status, cultural beliefs, and misconceptions regarding menopause contribute to insufficient knowledge among women.

Structured educational interventions have proven effective in increasing awareness and improving health-related practices among women. Through educational programs, women can gain knowledge regarding healthy dietary practices, physical activity, stress management, lifestyle modification, and available healthcare services.

Therefore, considering the increasing burden of perimenopausal health problems and the importance of awareness regarding preventive measures, the investigator felt the need to conduct the present study to assess the effectiveness of a Structured Teaching Programme on knowledge regarding prevention and management of perimenopausal symptoms among women in selected community areas of Indore.

OBJECTIVES OF THE STUDY

1. To assess the pre-test knowledge regarding prevention and management of perimenopausal symptoms among women in selected community areas of Indore.
2. To assess the effectiveness of a Structured Teaching Programme on knowledge regarding prevention and management of perimenopausal symptoms among women.
3. To compare the pre-test and post-test knowledge scores among women regarding prevention and management of perimenopausal symptoms.
4. To determine the association between post-test knowledge scores and selected demographic variables among women.

HYPOTHESES

H1: There will be a statistically significant difference between pre-test and post-test knowledge scores regarding prevention and management of perimenopausal symptoms among women.

H2: There will be a statistically significant association between post-test knowledge scores and selected demographic variables among women.

H0: There will be no statistically significant difference between pre-test and post-test knowledge scores regarding prevention and management of perimenopausal symptoms among women.

METHODOLOGY

The present study was conducted to assess the effectiveness of a Structured Teaching Programme on knowledge regarding prevention and management of perimenopausal symptoms among women in selected community areas of Indore. The methodology adopted for the study is described below.

Research Approach

A **quantitative research approach** was adopted for the study. This approach was considered appropriate because it facilitates systematic collection and statistical analysis of data to determine the effectiveness of the educational intervention on knowledge regarding prevention and management of perimenopausal symptoms among women.

Research Design

The study employed a **pre-experimental one-group pre-test post-test research design**. The design was selected to assess the existing knowledge of participants before the intervention and to determine changes in knowledge following implementation of the Structured Teaching Programme.

The research design can be represented as:

O1 → X → O2

Where:

O1 = Pre-test assessment of knowledge
X = Structured Teaching Programme
O2 = Post-test assessment of knowledge

Setting of the Study

The study was conducted in selected community areas of **Indore, Madhya Pradesh**. The selected setting was considered appropriate because of accessibility of participants and feasibility of conducting the study.

Population

The target population of the study comprised **women aged 40–55 years residing in selected community areas of Indore**.

The accessible population consisted of women available during the period of data collection and fulfilling the inclusion criteria.

Sample Size

The sample for the study consisted of **100 women** selected from the community area. The sample size was considered adequate for assessing the effectiveness of the intervention and performing statistical analysis.

Sampling Technique

A **convenient sampling technique** was used for selecting participants. Women who fulfilled the inclusion criteria and consented to participate in the study were included.

Inclusion Criteria

Women who:

• Were aged between **40–55 years**
• Were willing to participate in the study
• Were available during the period of data collection
• Could understand Hindi or English language

Exclusion Criteria

Women who:

• Had previously attended formal educational programs regarding perimenopausal symptom management
• Were healthcare professionals
• Were seriously ill during the period of data collection

Description of the Tool

The data collection instrument consisted of a **structured questionnaire** developed by the investigator after review of literature and consultation with experts.

Section A: Demographic Variables

This section included:

• Age
• Educational status
• Occupation
• Marital status
• Family income
• Type of family
• Previous source of information regarding perimenopause

Section B: Knowledge Questionnaire

The structured questionnaire included questions regarding:

• Meaning of perimenopause
• Causes and symptoms of perimenopause
• Physical and psychological symptoms
• Preventive measures
• Lifestyle modifications
• Management strategies

Knowledge scores were categorized as:

• Inadequate knowledge: Less than 50% score
• Moderately adequate knowledge: 51–75% score
• Adequate knowledge: Above 75% score

Intervention: Structured Teaching Programme

The intervention consisted of a **Structured Teaching Programme** regarding prevention and management of perimenopausal symptoms.

The content of the teaching programme included:

• Introduction to perimenopause
• Causes and physiological changes during perimenopause
• Common symptoms
• Healthy dietary practices
• Exercise and physical activity
• Stress management techniques
• Lifestyle modifications
• Available treatment and healthcare services

Methods used for teaching:

• Lecture-cum-discussion
• Charts and flashcards
• Demonstration and explanation

Duration of intervention: **45–60 minutes**

Data Collection Procedure

Prior permission was obtained from concerned authorities before conducting the study. The investigator explained the purpose of the study to participants and obtained informed consent.

The procedure involved:

Step 1: Selection of participants according to inclusion criteria

Step 2: Administration of the pre-test using structured questionnaire

Step 3: Implementation of Structured Teaching Programme

Step 4: Administration of post-test after seven days using the same questionnaire

Statistical Analysis

The collected data were organized, coded, tabulated, and analyzed using descriptive and inferential statistics.

Descriptive Statistics

• Frequency
• Percentage
• Mean
• Standard deviation

Inferential Statistics

• **Paired t-test** was used to determine the effectiveness of Structured Teaching Programme by comparing pre-test and post-test knowledge scores.

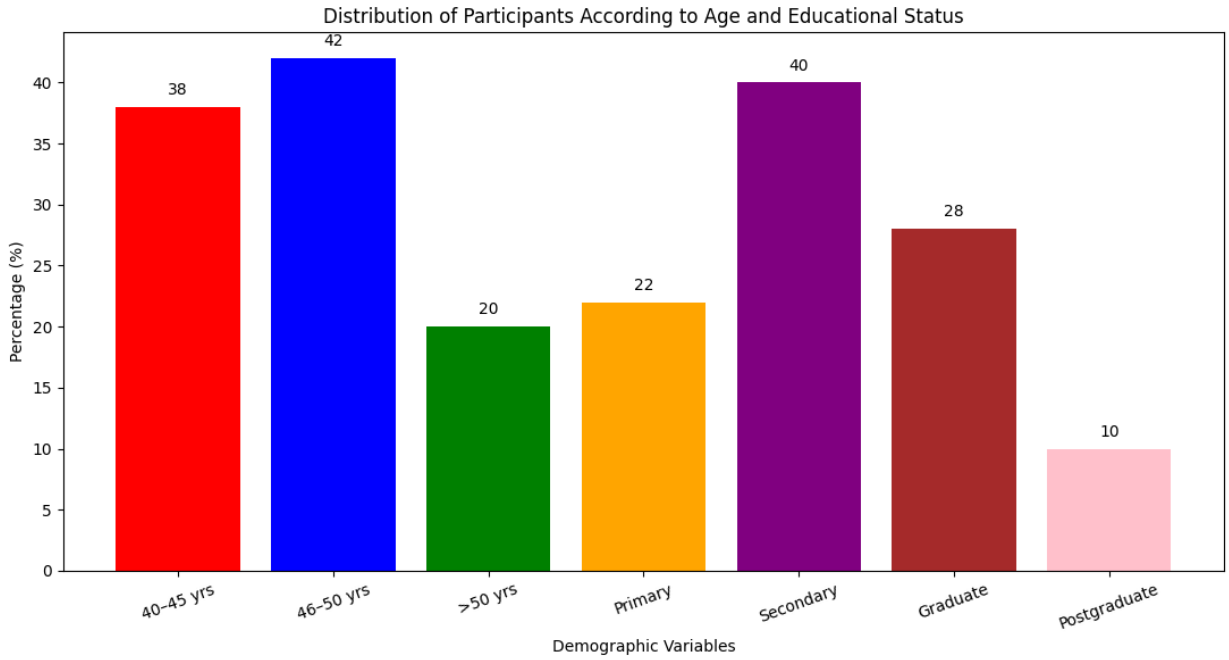
• **Chi-square test** was used to determine the association between post-test knowledge scores and selected demographic variables.

The level of significance was set at $\mathbf{p < 0.05}$.

Result

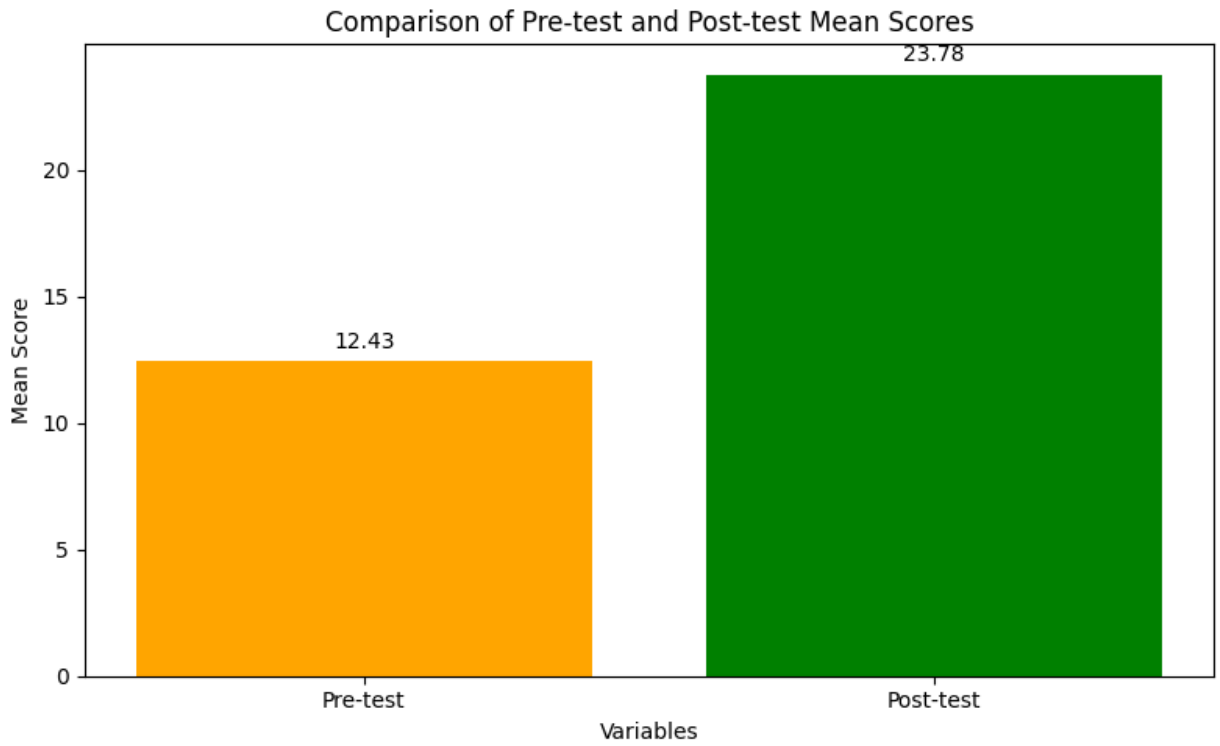
DEMOGRAPHIC DISTRIBUTION (N=100)

Variables	Frequency	Percentage
Age 40–45 years	38	38
Age 46–50 years	42	42
Above 50 years	20	20
Primary education	22	22
Secondary education	40	40
Graduate	28	28
Postgraduate	10	10



COMPARISON OF KNOWLEDGE SCORES

Variables	Mean	SD	Mean Difference	t-value	p-value
Pre-test	12.43	4.18	11.35	17.84	<0.001*
Post-test	23.78	3.42			



DISCUSSION

The present study was conducted to assess the effectiveness of a Structured Teaching Programme on knowledge regarding prevention and management of perimenopausal symptoms among women in selected community areas of Indore. The findings of the study demonstrated that the educational intervention significantly improved participants' knowledge regarding perimenopausal symptoms and their management.

The demographic findings indicated that the majority of women (42%) belonged to the age group of 46–50 years, while 38% were in the age group of 40–45 years and 20% were above 50 years of age. Regarding educational status, the majority of participants (40%) had secondary education, followed by graduates (28%), primary education (22%), and postgraduates (10%). Educational status plays an important role in understanding health information and adopting healthy practices.

The findings of the pre-test revealed that participants had inadequate baseline knowledge regarding prevention and management of perimenopausal symptoms. Many women lacked awareness regarding physiological changes during perimenopause, common symptoms, and preventive strategies. This may be due to insufficient health education, cultural misconceptions, and limited access to health-related information.

Following implementation of the Structured Teaching Programme, a marked improvement was observed in knowledge scores. The mean post-test knowledge score (23.78 ± 3.42) was considerably higher than the pre-test mean score (12.43 ± 4.18). The mean difference was 11.35. The calculated paired t-value (17.84) was found to be statistically significant at $p<0.001$, indicating that the Structured Teaching Programme was highly effective in improving knowledge among women.

The findings are consistent with previous studies indicating that educational interventions and awareness programs improve women's understanding regarding menopausal health and symptom management. Structured educational approaches facilitate better learning and encourage adoption of positive health practices.

Therefore, the present study supports the importance of community-based health education programs for improving awareness and promoting preventive health behaviors among women during the perimenopausal period.

CONCLUSION

The study concluded that women had inadequate knowledge regarding prevention and management of perimenopausal symptoms before implementation of the Structured Teaching Programme. Following the intervention, a significant improvement in knowledge scores was observed among participants.

The statistically significant difference between pre-test and post-test scores indicates that the Structured Teaching Programme was effective in enhancing knowledge regarding perimenopausal symptom prevention and management.

Educational interventions at the community level can play a vital role in improving awareness, encouraging healthy lifestyle practices, promoting early healthcare-seeking behavior, and enhancing the quality of life among women. Similar health education programs should be organized regularly to improve women's health outcomes and reduce health-related complications associated with perimenopause.

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