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Effectiveness of planned teaching programme to assess the knowledge regarding infertility among nursing students in selected nursing schools at Vijayapura

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Abstract

Background: Female infertility may present as an ovulation, obstructed fallopian tubes, endometriosis or uterine abnormalities. Male factor in infertility is characterized by diminished production of morphologically normal, motile sperm. Genetic abnormalities, hormonal imbalances and congenital malformations of the reproductive tract are some of the common causes of male and female infertility.

Methodology: A quantitative approach with pre experimental pre-test post-test design was adopted for the study. The samples from the selected nursing schools of Vijayapura were selected using purposive sampling technique. The sample consisted of 60 nursing students. The tools used for data collection was structured knowledge questionnaire.

Results: In pre-test 33(55%) of respondents were have inadequate knowledge, 24(40%) of them have moderate knowledge and 3(5%) of respondents have adequate knowledge. In post-test 0(0%) of respondents were have inadequate knowledge, 39(65%) of them have moderate knowledge and 21(35%) of respondents have adequate knowledge. In pre-test knowledge regarding Infertility was 16.3 and post-test knowledge regarding infertility was 26.5, which is significant, so there is enough evidence that Planned Educational program is effective in enhancing the knowledge of the nursing students regarding Infertility.

Conclusion: There is a need for the awareness program on infertility among nursing student groups to improve their knowledge related to infertility.

Keywords: Structured teaching program, infertility, nursing students, effectiveness

Introduction

Reproduction is the gift of God to each and every living creations. God created this world for all his living creations to reproduce and fill and flourish it. Each human, on his birth is gifted a life. And each new day is added to his life not only to live but to bring out offspring's of him and double the happiness of him. Reproduction is that process where a living organism with the union of another of its own kind produces a new young one.

Couples with primary Infertility have never conceived and couples with secondary infertility may have conceived before but are unable to conceive again, is a global public health problem that affects more than 10% of the world's population. The risk of infertility increases with advanced age of the female partner (> 35 years).

Female infertility may present as an ovulation, obstructed fallopian tubes, endometriosis or uterine abnormalities. Male factor in infertility is characterized by diminished production of morphologically normal, motile sperm. Genetic abnormalities, hormonal imbalances and congenital malformations of the reproductive tract are some of the common causes of male and female infertility.

Worldwide, 8 to 12 % trusted Source of couples experience fertility problems. Between 45 and 50% trusted Source of cases are thought to stem from factors that affect the man. Incidence of infertility among the world wide it is estimated that one in seven couples have problems of fertility. Nearly 80% of couples achieve conception if they are trying to get pregnant within one year of having regular intercourse with adequate frequency. Another 10 percent will achieve the objective by the end of 2nd year about 10% remain infertile by the end of 3 year. In the United States, around 10 percent trusted Source of women aged 15 to 44 years are estimated to have difficulty conceiving or staying pregnant.

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Among Indian women reporting infertility and PID, STI prevalence was high. The WHO estimates the overall prevalence of primary infertility in India to be between 3.9 and 16.8%. Estimates of infertility vary widely among Indian states from 3.7% in Uttar Pradesh, Himachal Pradesh and Maharashtra¹, to 5% in Andhra Pradesh², and 15% in Kashmir³.

The investigator personally witnessed the students with infertility and has taken up the present study to create awareness and improve their knowledge and to develop a positive attitude towards infertility.

Objectives

- To assess the level of knowledge regarding infertility among nursing students in selected nursing schools.
- To prepare and administered the planned teaching program regarding Infertility.
- To evaluate the effectiveness of planned teaching program regarding infertility among the nursing students.
- To find the association between knowledge scores of students with socio demographic variables.

Hypothesis

H₁: There is significant difference between pre and post test scores regarding Infertility.

H₂: There is significant association between pre and post-test knowledge scores with Socio-demographic variables.

Methodology

Research Approach: Quantitative Research Approach.

Research Design: Pre experimental one group pre-test post-test research design.

Sampling technique: Non-Probability; purposive Sampling Technique

Target population: Nursing students in nursing schools at Vijayapura.

Sample size: 60

Setting of study: Nursing schools at Vijayapur.

Method of data collection: Structured self-report.

Tools used

Section I: Socio-demographic variables of participants.

Section II: Structured knowledge questionnaire

Structured knowledge questionnaire was prepared in the form of multiple-choice questions. It consists of 30 items regarding infertility among nursing students.

Procedure of data collection

Data was collected after obtaining administrative permission from selected nursing schools Vijayapur. The investigator personally explained the participants the need and assured them of the confidentiality of their responses. Data was collected by distributing the structured tools to all participants and it took around 60 minutes to collect data from all participants. All the participants co-operated well

with the investigator in data collection procedure.

Results

A. The findings related to socio-demographic variables of participants

Study comprised of 60 participants. The socio demographic variables are presented in following table.

Table 1: Frequency & Percentage Distribution of participants according to socio demographic variables, N=60

S. No	Demographic variables	No	%
1	Age in years		
	a. 18-20 years	8	13.34
	b. 21-23 years	26	43.33
	c. 24-25 years	20	33.33
	d. 26 years and above	6	10.00
2	Religion		
	a. Hindu	34	56.67
	b. Muslim	14	23.33
	c. Christian	8	13.33
	d. Others	4	6.67
3	Marital status		
	a. Unmarried	40	66.67
	b. Married	15	25.00
	c. Separate or divorced	5	8.33
	d. Widow	0	0.0
4	Place of residence		
	a. Urban	31	51.67
	b. Rural	25	41.67
	c. Slum	4	6.66
5	Types of the family		
	a. Joint family	30	50.00
	b. Nuclear family	24	40.00
	c. Single parent family	0	0.00
	d. Extended family	6	10.00
6	Family Income in rupees		
	a. Below 10000	28	46.67
	b. 11000-15000	16	26.67
	c. 16000-20000	12	20.00
	d. 21000 and Above	4	6.66
7.	Source of Information		
	a. Books and magazines	30	50.00
	b. Family / relatives	25	41.67
	c. Mass media	5	8.33
	d. Television	0	0.00

B. Distribution knowledge scores of respondents

I. Comparison of level of knowledge

Table 1: Comparison of Level of knowledge in pretest and post-test, N=60

Level of knowledge	Score	Pre test		Post test	
		No	%	No	%
Inadequate	< 50%	33	55.0	0	0.0
Moderate	50-75%	24	40.0	39	65.0
Adequate	> 75%	3	5.0	21	35.0
Total		60	100	60	100

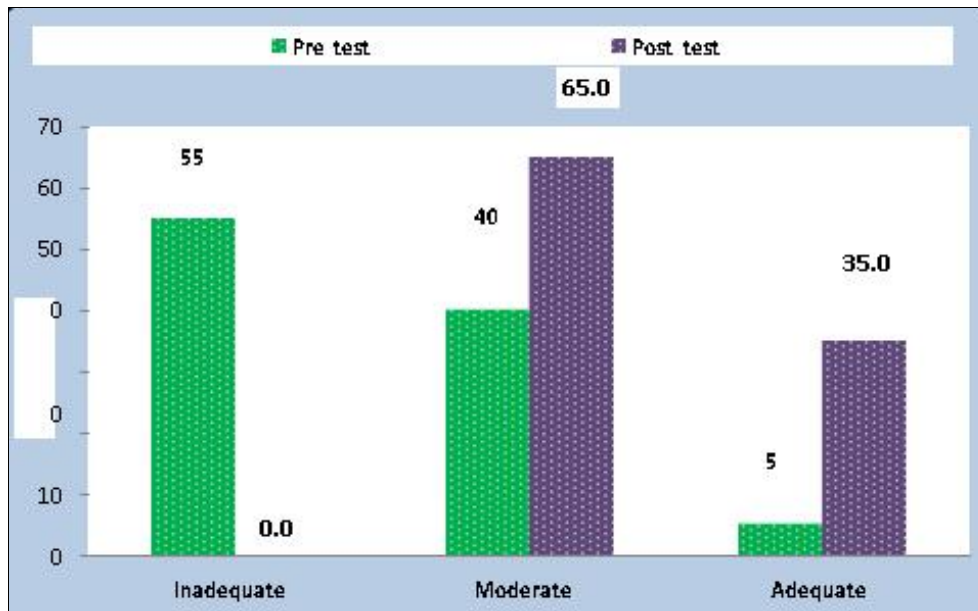


Fig 1: Pre and post-test knowledge on infertility

In pretest 33(55%) of respondents were have inadequate knowledge, 24(40%) of them have moderate knowledge and 3(5%) of respondents have adequate knowledge.

In post-test 0(0%) of respondents were have inadequate knowledge, 39(65%) of them have moderate knowledge and 21(35%) of respondents have adequate knowledge.

II. Distribution of knowledge scores in pretest and post test

Table 2: Distribution of knowledge scores in pretest and post-test, N=60

Knowledge	Max Statement	Max Score	Mean	SD	Mean %
Pre test	30	30	16.3	3.5	54.3
post test	30	30	26.5	2.7	88.3

Data presented in table 2 represents the knowledge scores of participants, it shows that, in pre-test participants mean was 16.3, standard deviation was 3.5 and mean % was 54.3. In post-test participants mean was 26.5, standard deviation was 2.7 and mean % was 88.3.

III. Comparison of knowledge scores in pretest and post test

Table 3: Comparison of knowledge scores of participants

Knowledge	Mean	SD	Mean %	T-Value
Pre test	16.3	3.5	54.3	31.6**
Post test	26.5	2.7	88.3	
Enhancement	10.2	2.5	34	

** Significant at P<0.01, (DF 59, T Value 2)

Table No 3 states that the effectiveness of Planned Educational Programme in terms of gaining knowledge score in post-test.

According to this Nursing students pre-test knowledge regarding Infertility was 16.3 and post-test knowledge regarding infertility was 26.5, which is significant, so there is enough evidence that Planned Educational program is effective in enhancing the knowledge of the nursing students regarding Infertility.

IV: Association between level of internet addiction, level of knowledge and selected socio demographic variables

Association between level of knowledge of Nursing students and selected demographic data. In that there were significant association between knowledge scores and demographic variables such as Age and place of residence. But there were not significant between knowledge scores and demographic variables such as Religion, Marital status, type of family, family income and source of information.

Conclusion

The conclusions drawn from the study were as follows

1. The overall knowledge of nursing students regarding infertility was moderate.
2. The results revealed that there is partial association between level knowledge scores with age and place of residence.
3. There was a need for awareness program regarding infertility among nursing students.

Conflict of Interest

Not available

Financial Support

Not available

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How to Cite This Article

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