



## Efficacy of Planned Teaching on Methods of Contraception Among Eligible Women Residing in Rural Areas

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### Abstract

Family Planning plays a crucial role in safeguarding the health of women in developing countries where they are often forced to carry an unplanned & unwanted pregnancy. Family planning, despite its many limitations, has universally been accepted as the most direct intervention to reduce fertility & hence population growth. Contraceptives provide women with a safe and effective means to avoid unwanted pregnancies or pregnancies that may place their health at risk. These pregnancies can have serious consequences, including illness, disability, and death. The objective of the research is to assess the knowledge regarding selected methods of contraception among eligible women. An evaluative research approach was used in this study. 60 eligible women in selected rural areas of the city were selected for the study. Self-structured knowledge questionnaires were used to collect the data. Findings show that, in the post-test, the majority of eligible women, 43(71.67%), had a very good level of knowledge score, 4(6.66%) had a good level of knowledge, and 13(21.67%) had an excellent level of knowledge. Analysis reveals that there is an association of knowledge score with the type of family and educational status among eligible women regarding selected methods of contraception.

**Key words:** knowledge; contraception; eligible women.

### INTRODUCTION

Women who can plan the number and timing of their births enjoy improved health, experience fewer unwanted pregnancies and births, and have lowered rates of induced and unsafe abortion. Planned pregnancies are best for mother and child. By preventing closely spaced births, family planning could significantly reduce infant and child mortality. The contraceptive methods are broadly grouped into two classes: spacing methods and terminal methods. Spacing methods are further classified into physical methods, chemical methods, hormonal methods, intra-uterine devices and natural birth control methods. Terminal methods are further classified into male and female sterilisation.

India has a crude birth rate of 25 births per 1000 inhabitants, from which it can be calculated that the number of births is approximately 30 million per year. With a maternal mortality ratio (MMR) of 2302 (numbers in deaths/100 000 live births), that equals in absolute numbers approximately 69000 deaths every year. Approximately two million pregnant women were affected by sexually transmitted diseases all over India. Estimated numbers of pregnant women who are suffering from STDS include Bacterial vaginosis: 8,00,000, Herpes simplex: 8,00,000, Chlamydia: 2,00,000; Trichomonas: 80,000; Gonorrhoea: 40,000, HIV: 8000, Syphilis: 8000. This statistical report shows that antenatal mothers are more prone to sexually transmitted diseases, and they need adequate knowledge regarding STDs during pregnancy.

### REVIEW OF LITERATURE

There are various studies done on contraception methods. In this study, the review of literature is listed under the following headings:

#### Methods of contraception:-

**Dutt Esther (2010)** conducted a study “To assess the knowledge and attitude of eligible women regarding family planning methods.” The study showed that 745 couples had good knowledge, and 59% had a good attitude towards family planning methods. There is a strong association between the ages and type of family of the women and their knowledge.

#### Impact of planned teaching:-

**Karpagam J. (2014)** conducted a study to evaluate the effectiveness of teaching programmes for the importance of birth spacing among primi post-natal mothers. An evaluation approach

with one group pre-test and post-test design was used for the study. 60 eligible women were selected using a non-probability sampling method. The present study was conducted in PSG Hospitals Coimbatore. The study findings showed that educational programmes have been an effective method of increasing the knowledge of mothers. There was a significant association between the level of knowledge and demographic variables such as age, educational status and type of family, and there was no significant association between the level of knowledge and demographic variables such as religion and Occupation.

## MATERIALS AND METHODS

This study used a pre-experimental one-group pre-test and post-test design. It was conducted in the selected rural area. The population of the study was eligible women in rural areas of the city who fulfilled the inclusion and exclusion criteria. The sampling technique used was non-probability convenience sampling. The ethical committee approved the study, and it was conducted in accordance with ethical guidelines. A self-structured knowledge questionnaire was used for data collection. The analysis was done with the help of inferential and descriptive statistics.

## ORGANISATION OF STUDY FINDING

The findings of the study are organised in the following sections:

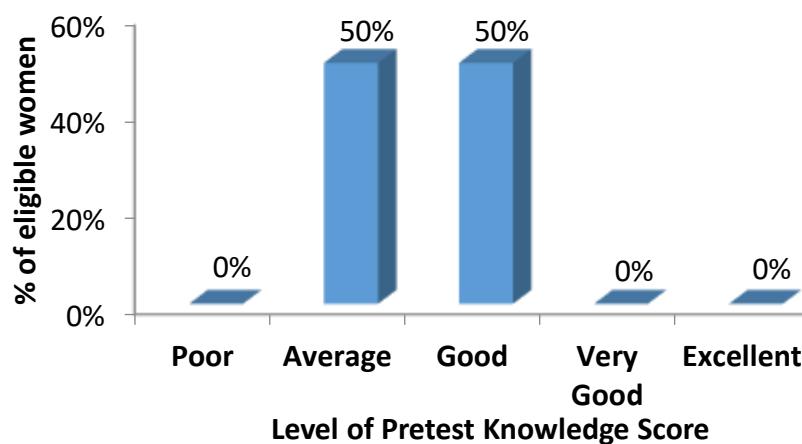
### PART I- ASSESSMENT OF PRE-TEST KNOWLEDGE OF ELIGIBLE WOMEN REGARDING SELECTED METHODS OF CONTRACEPTION

**Table No. 1: Distribution of eligible women with regard to pre-test knowledge regarding selected methods of contraception**

**n=60**

Grading	Score	Frequency	Percentage (%)	Mean	SD
<b>Poor</b>	1-6	0	0	12.40	2.94
<b>Average</b>	7-12	30	50		
<b>Good</b>	13-18	30	50		
<b>Very Good</b>	19-24	0	0		
<b>Excellent</b>	25-30	0	0		

The above table no.1 shows the frequency and percentage-wise distribution of eligible women according to the pre-test level of knowledge regarding selected methods of contraception. The levels of knowledge were divided into 5 categories: poor, average, good, very good and excellent. Among all eligible women, 30(50%) had an average level of knowledge, and 30(50%) had a good level of knowledge score. The mean knowledge score was  $12.40 \pm 2.94$ , with a knowledge score range of 7 to 17 with a mean percentage of  $41.33 \pm 9.80$ .



**Figure No. I: Distribution of eligible women with regard to pre-test knowledge regarding selected methods of contraception**

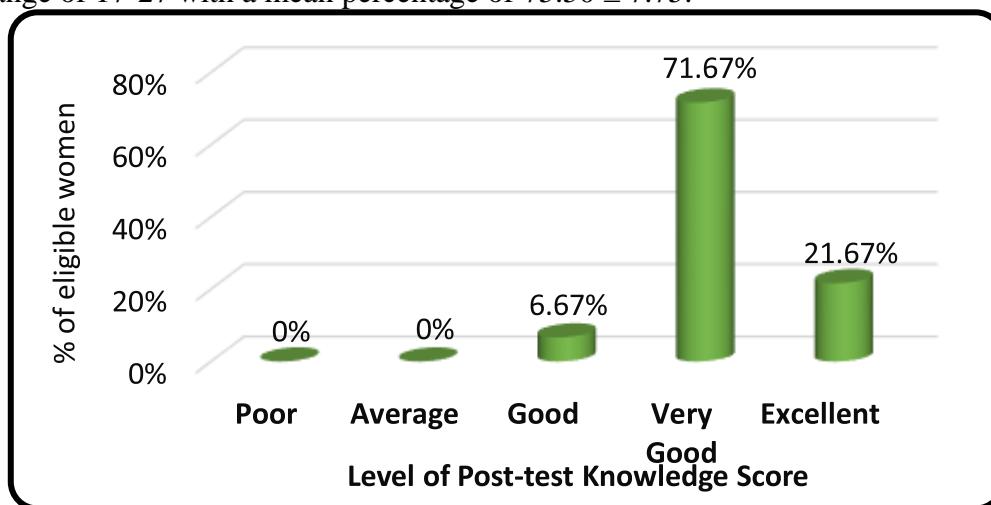
## PART II- ASSESSMENT OF POST-TEST KNOWLEDGE OF ELIGIBLE WOMEN REGARDING SELECTED METHODS OF CONTRACEPTION

**Table No.2: Distribution of eligible women with regard to post-test knowledge regarding selected methods of contraception**

**n=60**

Grading	Score	Frequency	Percentage (%)	Mean	SD
<b>Poor</b>	1-6	0	0	22.65	2.32
<b>Average</b>	7-12	0	0		
<b>Good</b>	13-18	4	6.66		
<b>Very Good</b>	19-24	43	71.67		
<b>Excellent</b>	25-30	13	21.67		

The above table no. 2 shows the frequency and percentage-wise distribution of eligible women according to post-test level of knowledge regarding selected methods of contraception. The levels of knowledge were divided into 5 categories: poor, average, good, very good and excellent. Among all eligible women, 4(6.66%) of the eligible women had a good level of knowledge, 43(71.67%) had a very good level of knowledge score, and 13(21.67%) had an excellent level of knowledge. The mean knowledge score was  $22.65 \pm 2.32$  with a knowledge score range of 17-27 with a mean percentage of  $75.50 \pm 7.75$ .



**Figure No. II: Distribution of eligible women with regard to post-test knowledge regarding selected methods of contraception**

## PART III-ANALYSIS OF EFFECTIVENESS OF PLANNED TEACHING PROGRAMME ON KNOWLEDGE REGARDING SELECTED METHODS OF CONTRACEPTION AMONG ELIGIBLE WOMEN

**Table No. 3: Significance of difference between knowledge scores in pre and post-test of eligible women in relation to selected methods of contraception**

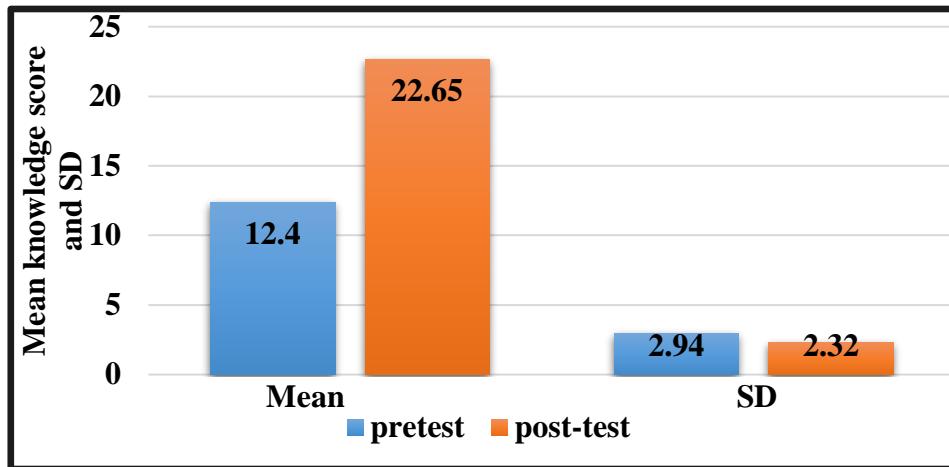
**n=60**

Knowledge	Mean	SD	Mean Percentage	t-value	p-value
<b>Pre Test</b>	12.40	2.94	41.33	22.49	0.0001*HS p<0.05
<b>Post Test</b>	22.65	2.32	75.50		

**Highly significant\*\***

Table 3 depicts the overall mean knowledge scores of the pre-test and post-test, which reveals that the post-test mean knowledge score was 22.65 with an SD of  $\pm 2.32$ , compared with the pre-test mean knowledge score value of 12.40 with an SD of  $\pm 2.94$ .

The statistical Student's paired t-test implies that the difference in the pre-test and post-test knowledge score was found to be 22.49, statistically significant at the level of 0.05. Hence, it is statistically interpreted that the planned teaching programme on knowledge of selected methods of contraception among eligible women was effective. Thus, H1 is accepted, and H0 is rejected.



**Figure No. III Significance difference between knowledge scores in pre-test and post-test of eligible women in relation to selected methods of contraception**

## DISCUSSION

The present study also found that the planned teaching programme was effective in increasing the knowledge of methods of contraception among eligible women. In the present study, there was an association with the type of family, educational status, and knowledge score of eligible women. However, similar studies were found in the literature.

## CONCLUSION

After a detailed analysis, this study leads to the following conclusion: -

The present study showed that in the pre-test, the majority of the eligible women, 30(50%), had an average level of knowledge, and 30(50%) had a good level of knowledge scores, respectively. The minimum score was found to be seven, and the maximum score was 17. The mean score was 12.40, and SD was 2.94. The post-test finding reveals that the majority of the eligible women, i.e. 43(71.67%), had an excellent level of knowledge score, 4(6.66%) of the eligible women had a good level of knowledge, and 13(21.67%) had an excellent level of knowledge the minimum score was found to be 17 and maximum score was 27. The mean score was 22.65, and SD was 2.32.

The study observes that there is a significant association between the level of knowledge score and the type of family and educational status among eligible women regarding selected methods of contraception. There is no significant association of the knowledge score with age, religion, duration of marriage, number of children, working status, monthly family income, and source of information.

After the introduction of the planned teaching programme, eligible women's knowledge significantly increased. To find the effectiveness of the planned teaching programme, a student test was applied, and a t-value was calculated. The post-test score was significantly higher at the 0.05 level than that of the pre-test score. Thus, it was concluded that the planned teaching programme on selected methods of contraception was found effective as a teaching strategy.

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