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"A study to Assess The Knowledge Regarding Prevention and Management of Reproductive Tract Infections Among Women At Selected Urban Community of City With View To Prepare Information Booklet."

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OBJECTIVES:

- 1) To assess knowledge regarding prevention and management of RTI among women selected at urban community of city.
- 2) To find association between women knowledge regarding prevention and management of RTI and selected demographic variables.
- 3) To develop the information booklet based on their knowledge on RTI.

HYPOTHESIS:

H0: There is no significant association between knowledge regarding prevention and management of RTI and selected demographic variables.

INTRODUCTION:

In body reproductive system are play important role in health development. The reproductive system are in two categorize male reproductive system and female reproductive system. The female reproductive tract divided in upper reproductive tract (Fallopian tubes, ovary and uterus) and lower reproductive tract (Vagina, Cervix and Vulva). These system are performs the activities are normal but any type of infection, injury or physiological changes that way barrier occur in the functioning of these system. The infection of reproductive tract are common problem in female.

NEED FOR STUDY

Reproductive health is one of the fundamental human rights."Reproductive health is state of complete physical, mental and social well being and not merely the absence of disease or in finites, in all matters relating to the reproductive system and it's process," define by UN. The agenda gave a special focus on 'safe sex' and 'freedom to choose and access to family planning services' for safe motherhood. It also lays emphasis on sexual health which should improve the personal relationship to

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ensure and individual free from reproductive tract infections (RTI's) and sexual transmitted disease (STDS). Thus, reproductive health has to be looked with a holistic view

METHODS:

An descriptive approach was used in this study. The study was carried out at selected urban community of city. The descriptive research design was used. The samples comprised of 50 women from city. The women were selected by purposive sampling technique. Formal written permission was obtained from the concerned authorities to conduct the study and also informed consent was obtained from subject prior to the data collection process. Data was analyzed by using descriptive and inferential statistics. Chi square test was used to find the association between knowledge score and selected demographic variables.

RESULTS:

The results of the study showed that the women have inadequate knowledge. The knowledge score was 16.66 and the use of hospital services are statistically significant at 13.7 the level of 0.05. There was no significant association between the knowledge score regarding prevention and management of Reproductive tract infection and selected demographic variables such as Age group ($x^2 = 1.67$), Monthly family income ($x^2 = 2.17$), Educational status ($x^2 = 16.1$), Marital status ($x^2 = 0.547$), Type of family ($x^2 = 1.02$), Menstrual abnormality ($x^2 = 1.78$), Family history of RTI ($x^2 = 0.397$) and Use of hospital services ($x^2 = 13.7$).-

Distribution of samples in relation to selected demographic variables like family history of RTI and use of hospital services.

| Sr. No. | Demographic variables | Frequency | Percentage |
|---------|--------------------------|-----------|------------|
| | Family history of RTI | | |
| 1 | a) Yes | 7 | 14% |
| | b) No | 43 | 86% |
| | | | |
| | Use of hospital services | | |
| 2 | a) Private | 31 | 62% |
| | | 18 | 36% |
| | b) Government | 1 | 2% |
| | | | |
| | c) Other | | |

The above table no. 3 shows the distribution of respondents according to family history of RTI and use of hospital services.

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FAMILY HISTORY OF RTI: -

Majority of respondents 43 (86%) were not having family history of RTI and remaining 7 (14%) were having family history of RTI.

USE OF HOSPITAL SERVICES: -

Majority of respondents 31 (62%) were using private hospital, 18 (36%) were using government hospital and remaining 1 (2%) were using other

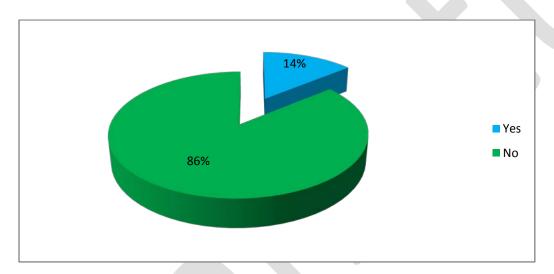


Fig 7: Distribution of samples according to their Family history of RTI.

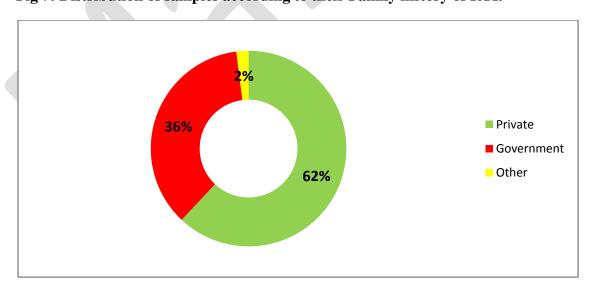


Fig 8: Distribution of samples according to their Use of hospital services.

Section 2: An analysis of knowledge score of women regarding prevention and management of RTI.

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This section deals with analysis and interpretation of the data regarding knowledge score being summated using frequency and percentage.

Table 4: Knowledge score of women regarding prevention and management of RTI

| Sr. No. | Knowledge Scores | Frequency | Percentage |
|---------|-------------------------------|-----------|------------|
| | | | |
| 1 | 0 - 17(Inadequate) | 36 | 72% |
| 2 | 18 - 26 (Moderately adequate) | 12 | 24% |
| 3 | 27 - 35 (Adequate) | 2 | 4% |
| | Total | 50 | 100% |

The data presented in table 4 and figure 9 depicts that majority of the respondents 36 (72%) had inadequate knowledge, 12 (24%) had moderately adequate knowledge and 2 (4%) had possessed adequate knowledge on RTI.

A graphic distribution of the data is presented on figure

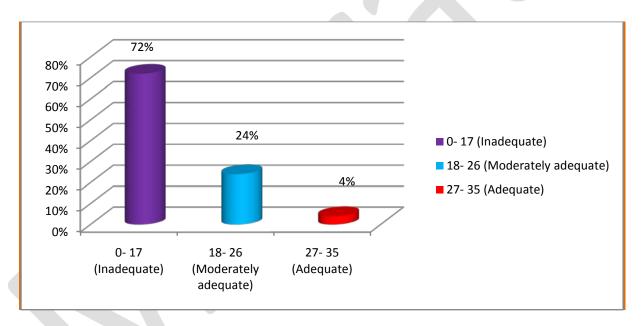


Fig 9: Figure showing the knowledge score of women regarding prevention and management of RTI.

Section 1: Distribution of women according to demographic variables.

• The data shows that the majority of the respondents 35 (70%) were the age group of 19- 45 yrs, followed by 13 (26%) respondents were the age group of 46- 60 yrs, 1 (2%) were in age group of 10- 18 yrs and 1 (2%) were in age group of above 60 yrs.



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- Among 50 majority of respondent is 26 (52%) were having 16,000- 20,000 Rs income, followed by 15 (30%) were having above 20,000 Rs income, 6 (12%) having 11,000- 15,000 Rs income and 3 (6%) having 5000- 10,000 Rs income.
- Majority of respondents is 22 (44%) were in secondary educational status, followed by 16 (32%) were graduate, 9 (18%) were having primary education and 3 (6%) were post graduate.
- Majority of respondents 44 (88%) were married and remaining 6 (12%) were unmarried.
- Majority of respondents 28 (56%) were in joint family, 20 (40%) were in nuclear family and remaining 2 (4%) were in extended family.
- Majority of respondents 43 (86%) were not having menstrual abnormality and remaining 7 (14%) were having menstrual abnormality.
- Majority of respondents 43 (86%) were not having family history of RTI and remaining 7 (14%) were having family history of RTI.
- Majority of respondents 31 (62%) were using private hospital, 18 (36%) were using government hospital and remaining 1 (2%) were using other.

Section 2: An analysis of knowledge score regarding prevention and management of reproductive tract infections

The data shows that the majority 36 (72%) of the women have inadequate knowledge regarding prevention and management of RTI, remaining 12 (24%) have moderately adequate knowledge and 2 (4%) have adequate knowledge.

Section 3: Association of knowledge with selected demographic variables.

The result of the study revealed that there is no significant association between the knowledge score regarding prevention and management and selected demographic variables such as age group ($x^2 = 1.67$), monthly family income ($x^2 = 2.17$), educational status ($x^2 = 16.1$), marital status ($x^2 = 0.547$), type of family ($x^2 = 1.02$), menstrual abnormality ($x^2 = 1.78$), family history of RTI ($x^2 = 0.397$) and use of hospital services ($x^2 = 13.7$) only this one is at the level of significance.

The study was conducted to assess the current knowledge about RTI epidemiology.

The findings of the present study were analyzed and discussed with the findings of the similar studies. This helps to the investigator to prove that the findings were true and the information booklet was effective in improving knowledge.

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CONCLUSION

From the present study, the results revealed that the majority 36 (72%) of the women have inadequate knowledge regarding prevention and management of RTI, remaining 12 (24%) have moderately adequate knowledge and 2 (4%) have adequate knowledge.

The nurse role has a key role in health care delivery system mainly emphasis on primary prevention of disease. Only nurse's work will not help in prevention of disease, it is not possible when all healthy team members work together with the goal of prevention of disease including community people. Primary prevention includes health promotion. One of the methods of health promotion is by education.

- ➤ A nurse can play and an important role in prevention and management of RTI nurse should create awareness among women, that RTI and its prevention and management.
- The nurse has motivate women to follow proper steps in prevention and management of RTI.
- Measures should be taken by the nurse to motivate the women to maintain healthy environment in and around the community.
- ➤ The women are made aware regarding prevention and management of RTI and its complications also.

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