

EUROPEAN JOURNAL OF PHARMACEUTICAL AND MEDICAL RESEARCH

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Research Article ISSN 2394-3211 EJPMR

A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING PREVENTION AND MANAGEMENT OF CONJUNCTIVITIS AMONG PEOPLE IN SELECTED COMMUNITY AREA AT PALLITHOTTAM, KOLLAM

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Article Received on 28/04/2024

Article Revised on 18/05/2024

Article Accepted on 07/06/2024

INTRODUCTION

Conjunctivitis is a common cause of eye redness and, subsequently, a common complaint in the emergency department, urgent care, and primary care clinics. It can affect people of any age, demographic, or socioeconomic status. More than 80% of all acute cases are generally diagnosed by non-ophthalmologists, such as internists, primary care providers, paediatricians, and nurse practitioners. This imparts a huge economic burden on the healthcare system, causing a large proportion of clinic visits in many medical specialties. The cost of managing bacterial conjunctivitis in the United States is 857 million US dollars annually. Although, usually self-limiting and rarely resulting in vision loss, it is essential to rule out other sight-threatening causes of red-eye when assessing for conjunctivitis. It has been reported that nearly 60% of all patients with acute conjunctivitis receive antibiotic eye drops; and the vast majority receive their prescription from a non-ophthalmologist physician. For example, 68% of patients who visited a physician at an emergency room received antibiotic eye drops while this figure dropped to 36% for those who saw an ophthalmologist. Interestingly, patients from a higher socioeconomic status were more likely to receive and fill a prescription for their conjunctivitis.

OBJECTIVES

*To assess the knowledge regarding prevention and management of conjunctivitis among people in selected community area at Pallithottam, Kollam.

* To assess the effectiveness of structured teaching programme on knowledge regarding prevention and management of conjunctivitis among people in selected community area at Pallithottam, Kollam.

* To find out the association between pretest knowledge score regarding prevention and management of conjunctivitis among people in selected community area at Pallithottam, Kollam.

Hypotheses

H1: There will be significant difference between the mean pretest knowledge score and mean post test knowledge score regarding prevention and management of conjunctivitis among people in selected community area after administrating structured teaching programme.

H2: There will be significant association between the pre test knowledge score regarding prevention and management of conjunctivitis among people and selected demographic variables.

MATERIALS AND METHODS

Research approach: Quantitative research approach Research design: Pre- experimental one group pre -test Post -test research design

Population: people in selected community area Pallithottam

Sample: 60 people at selected community area Pallithottam

Sampling technique: Purposive sampling technique Setting: Anugraha Nagar Pallithottam Kollam, kerala Data collection method: Using a self-structured knowledge questionnaire

Inclusion criteria

The people who are:

- Either male or female
- In the age group of 18-60
- Residing in Anugraha Nagar, Pallithottam, Kollam.

Exclusion criteria

The people who are:

- •Not willing to participate in the study
- Age group below 18

Data collection process

Data collection process refers to the identification of subjects and precise, systematic gathering of information relevant to the research purpose or the specific objectives, questions or hypothesis of the study. The setting for the study was done in Anugraha Nagar, Pallithottam, Kollam. The data collection began after obtaining administrative approval and consent from principal of Bishop Benziger College Of Nursing, Kollam. The data collection was done from 11/10/2023 to 13/10/2023. On the first day of data collection pretest was conducted and structured teaching programme was given. On 3rd day of data collection the post test was conducted. The subjects were selected based on inclusion and exclusion criteria using non probability purposive sampling technique. A brief introduction of the study was given to the subjects who met the criteria for the study. Written consent was obtained from the sample. The tools were given to the samples for responding and at the end of the session the investigator thanked the subjects and complied the data for analysis.

RESULT

N=60

Tool

Section A: Demographic proforma which includes information regarding demographic variables such as age, gender, educational qualification, type of family, previous history of eye infection.

Section B: Self structured knowledge questionnaire.

Reliability

The researchers established reliability of the tool by using test-retest method.

Reliability co-efficient calculated was for the selfstructured knowledge questionnaire. Hence the tool was found to be reliable for the study.

Analysis

1. Descriptive statistics: Demographic variables were analyzed using frequency and percentage.

2. Inferential statistics: Chi square test was used to find out the association between pretest knowledge score and selected demographic variables. And paired 't' test was used to analyse the effectiveness of structured teaching programme.

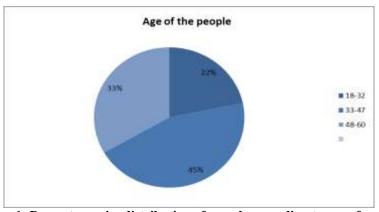
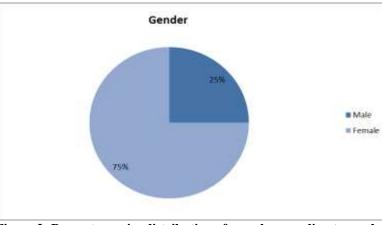


Figure 1: Percentage wise distribution of sample according to age of people.

Figure 1 shows that out of 60 samples 22% belonged to 18-32 years of age and 45% belonged to 33-47 years of age and 33% belonged to 48-60 years of age.



N=60

Figure 2: Percentage wise distribution of sample according to gender. Figure 2 shows that out of 60 sample 25% were males and 75% were females.

N=60

N=60

N=60

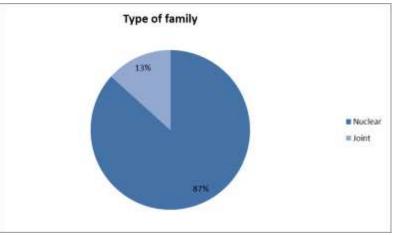


Figure 3: Percentage wise distribution of sample according to their type of family. Figure 3 shows that out of 60 samples 87% belonged to nuclear family and 13% belonged to joint family.



Figure 4: percentage wise distribution of sample according to their educational qualification.

Figure 4 shows that out of 60 sample 52% had primary education, 22% had highschool education, 20% had predegree education and 6% had degree education.

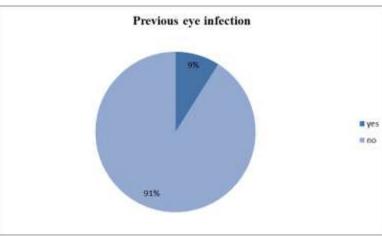


Figure 5: Percentage wise distribution of sample according to their any previous eye infection.

Figure 5 shows that out of 60 sample, 91% of people had no previous infection and 9% of people had previous eye infection.

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Mean, standard deviation	on, mean difference	, paired 't' value	on knowledge regarding	prevention and
management of conjunctiv	vitis among people in	selected community a	rea at Pallithottam, kollam.	

	Knowledge score	Mean	Standard deviation	Mean difference	Paired 't' value		
	Pretest	4.78	2.02	8.49	11.9		
	Posttest	13.27	3.80				
6*.;	5*significant loval at 0.05 loval of significance						

t=2.176*significant level at 0.05 level of significance

The data presented in this table 3 shows that the mean posttest score (13.27) was greater than mean pretest score (4.78) on knowledge regarding prevention and management of conjunctivitis among people. The mean difference between pretest and posttest knowledge score was 8.49. The paired 't' value 0.862 was greater than the table value (2.176), so the structured teaching programme was effective. Hence the hypothesis (H1)

which states that there will be significant difference between the mean pretest and mean posttest knowledge score regarding prevention and management of conjunctivitis was accepted. It shows that structured teaching programme was effective in increasing knowledge regarding prevention and management of conjunctivitis among people in selected community area at Pallithottam, Kollam.

	Domographia	Pretest knowledge score				Chi	Tabla	Landaf
Sl.no	Demographic variables	Poor	Moderate	Good	df	Square value	Table value	Level of significance
1	Age							
	18-32	11	2	0				
	33-47	20	7	0	4	2.23	2.78	NS
	48-60	18	2	0				
2	Gender							
	Male	12	3	0	2	0	4.30	NS
	Female	37	8	0	2			
3	Education							
	Primary	24	6	0		1.53	2.45	NS
	Highschool	14	4	0				
	Predegree	8	0	0	6			
	Degree	3	1	0				
4	Type of family							
	Nuclear	42	10	0	2	0.79	4.30	NS
	Joint	7	1	0	2			
5	Previous eye infection							
	Yes	0	8	10	2	1.29	4.30	S
	No	1	25	16	2			

There was significant association between pretest knowledge score and demographic variable, previous history of any infection. There was no significant association between pretest knowledge score and demographic variables such as age, gender, educational qualification, type of family.

DISCUSSION

The present study revealed that out of 60 sample 81.66% of people had poor knowledge, 18.33% had moderate knowledge and 0% had good knowledge regarding prevention and management of conjunctivitis in pre-test. After administration of structured teaching programme, 43.33% people had good knowledge, 55% had moderate knowledge and 1.66% had poor knowledge in posttest regarding prevention and management of conjunctivitis.

The above finding is supported by an descriptive study was conducted to assess the knowledge of prevention and management of conjunctivitis among high school students in pokhara Valley of west Bengal. The method of this study was performed among six government schools in western Nepal from May 2019 to June 2019. Students from grade eight, nine and ten were included in the study. Data was collected using structured questionnaire including demographic data, knowledge regarding sign symptoms of conjunctivitis, treatment, prevention, complication of conjunctivitis. The sample size of this study was 523 students. Nearly 2/3rd of the students (61.6%) had heard of conjunctivitis. Majority of the students (87.4%) of the students mentioned that it is communicable while 80.3% of the students correctly mentioned its etiology. Majority of the students (97.9%) mentioned that it is curable with treatment as first option (97.5%). Majority of the students (98.3%) correctly responded to the preventive measures but majority of the students (83.2%) wrongly mentioned mode of transmission.

The present study shows that the mean pre-test knowledge score was 4.78 and the mean difference

between the pre-test knowledge score and post-test knowledge score was 8.49. The paired "t" test value was 11.9, it was greater than the table value. So the structured teaching programme was effective in improving the knowledge regarding prevention and management of conjunctivitis.

The above finding is supported by an cross sectional study conducted on the prevention of conjunctivitis at selected rural areas in Bhopal, Madhya Pradesh. The objective of the study were to assess the knowledge of adolescent regarding prevention of conjunctivitis. 60 adolescent were selected by convenience sampling technique. Cross sectional research designs were done. Data was gathered using a structured interviewing method. Information collected for the two portions, including socio-demographic data, a knowledge questionnaire regarding prevention of conjunctivitis The result showed that majority of adolescent 60% were prevention average knowledge regarding of conjunctivitis, 30% were poor knowledge regarding prevention of conjunctivitis and 10% were having good knowledge regarding prevention of conjunctivitis. Parents' education status significant with p value less than 0.05 level of significant.

CONCLUSION

The present study was undertaken to assess the effectiveness of structured teaching programme on knowledge regarding prevention and management of conjunctivitis among people in selected community area at Pallithottam Kollam. The study results showed that, there was a significant improvement in knowledge regarding prevention and management of conjunctivitis among people after providing a structured teaching programme. Association between pretest knowledge score and demographic variables among people was analysed using chi square test. There was significant association between pre test knowledge score and demographic variable only the previous eye infection and there was no significant association between pretest knowledge score and demographic variables such as age, gender, educational qualification and type of family.

ACKNOWLEDGEMENT

We are thankful to the principal of the college for conduct the study. This study has been done under the guidance, support, and encouragement of our guide Mr. Prince Christopher Tutor, Department of Community Health Nursing. Without his inspiration and valuable suggestions, this study would have been an incomplete work. Special thanks to Dr. Paul Kannitayil, Medical officer, Community Health Centre, Pallithottam for the timely support and guidance.

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