

# Effectiveness Of Structured Teaching Programme On Level Of Knowledge Regarding Osteoporosis Among Pre Menopausal Women

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## Abstract

Apre experimental research design was adopted to evaluate effectiveness of structured teaching programme on level of knowledge regarding osteoporosis among pre menopausal women .women were selected through convenient sampling technique. post test majority was achieved 60 (100%) of women were getting adequate knowledge that there was a significant difference ( $P<0.05$ ) between pre and post score. The mean pre t score was 13.80 (+2.09) where as in pre test was 28.07(+0.09) respectively.

**Kew words:** effectiveness, structure teaching program, premenopausal women

## INTRODUCTION

**“embrace your bone health to evade osteoporosis ”**

Osteoporosis means “porous bones”. It is the thinning of bone material as the density of the bones gets less, making them brittle. Bone tissue is constantly being renewed, and new bone replaces old and damaged bone. In this way, the body maintains bone density and the integrity of its crystals and structure. Bone density peaks when a person is in their late 20s. The bones become weaker, increasing the risk of fractures, especially in the hip, wrist, and spinal vertebrae. After the age of 35 years, the bone become starts to weaker. As age advances the bonebreaks down faster than it builds. If it happens excessively, osteoporosis occurs. (Morrison,Jan2018).

Bones are the building blocks of our body and we cannot stay strong in the absence of healthy bones. Bones work behind the scenes and most of the bone-building process is completed around age 20. Bones are the building blocks of our body and we cannot stay strong in the absence of healthy bones During perimenopause, you can start to lose some bone mass, but the risk of significantly decreased bone density is greatest right before and several years after menopause. After that, the rate of bone loss tends to level off our bones support your body, give it shape, and help you move. Your bones also help protect your heart, lungs, and brain. Even though your bones feel hard and rigid, they are living tissues that constantly rebuild themselves during your life. During your childhood and teenage years, your body adds new bone faster than it gets rid of old bone. After about age 30, you can start to lose bone faster than your body makes it, which can weaken the bones and increase the risk of breakage. Some bone loss is natural as men and women age, but women are at higher risk of significant bone loss. Throughout your adult life, it’s important to take steps to make sure you don’t lose too much bone and put yourself at risk of easily breaking a bone by falling or tripping. This becomes even more critical after menopause. When you go through menopause, your levels of estrogen and other hormones drop sharply. Because estrogen helps maintain bone density, this drop can lead to significant bone loss and, over time, to low bone density. Doctors typically use two different words to talk about low bone density: Osteopenia means you have lower-than-normal bone density. Osteopenia isn’t a disease, but it can mean that you’re at higher risk for breaking a bone. Osteoporosis is a disease and means that your bone density is so low that your bones are brittle and can break easily. White and Asian women are at highest risk for osteoporosis, but all women and men older than 50 are at risk for the disease. So we would be alert on osteoporosis before menopause . the researcher decide to give awareness to pre menopausal womens of age group above 35.

## STATEMENT OF THE PROBLEM

“A study to assess the effectiveness of structured teaching programme on level of knowledge regarding osteoporosis among pre menopausal women in rural area at Kumbakonam , in Thanjavur District”

## OBJECTIVES

The objectives of the study were to:

- To assess the existing level of knowledge regarding osteoporosis.
- To Evaluate the effectiveness of level of knowledge regarding osteoporosis.
- To Associate the effectiveness of structured teaching program on the level of knowledge regarding osteoporosis with their selected demographic variables.

## METHODOLOGY

Pre experimental research design was adopted for this study. This study was conducted among selected womens in rural community area in Kumbakonam, Thanjavur District, Tamilnadu, South India. Sixty womens were recruited for this study through non probability convenient sampling technique. The data were collected after obtaining the institutional ethical clearance, and formal administrative permission. Informed consent from the subject was obtained and the confidentiality has been assured.

A structured questionnaire was used to evaluate the knowledge of women's. The questionnaire was translated in to the vernacular language (Tamil) the appropriateness of the translation had been checked by English expert and the validity of the translation was verified by back translation. The reliability of the knowledge questionnaire was established using test – re test method ( $r = 0.7$ ). There were 30 multiple choice questions related to osteoporosis among premenopausal women.. Each correct response had given the score of one and wrong option had been given the score of zero. The total knowledge score of each subject was calculated, converted into percentage and interpreted as inadequate (<50% score); moderate (50-70%); and adequate (>70% score).

Pre test on assessment of knowledge were conducted by using the structured questionnaire. Time taken by the womens to complete the knowledge questionnaire was approximately 30 minutes. After the pre test , the girls were divided into two groups of having 10 subjects in each. Structured teaching programe about osteoporosis was administered for 30 minutes for each group. The post test was conducted after seven days of intervention.

## RESULTS AND DISCUSSION

### • Frequency and percentage distribution of pre - test and post - test of satisfactory level.

Majority of the womens 50(83.33%) were in the age group of 35-40years and most of them 36 (60%) were female are daily wages. Majority 46 (76.633%) womens had food habit of non veg. 30 (50%) women were living in rural area and most of them 50(83.33%) was speaking tamil language

S.No.	Variables	Number of Repondents	pre test		Post test		't' value
			Mean	SD	Mean	SD	
1	Level of knowledge	60	13.80	2.090	28.07	0.989	48.231

- The above diagram represent the frequency and percentage distribution of pre-test and post-test group satisfactory level.
- In finally the post test majority was achieved 60 (100%) of womens were getting adequate knowledge
- that there was a significant difference ( $P < 0.05$ ) between pre test and post test score. The mean pre test score was 13.80 (+2.09) where as in post was 28.07 (+0.989) respectively.
- The 't' value shows that structured teaching programme on level of knowledge regarding osteoporosis among pre menopausal women Association
- In pre test group there is significance association occur in all the demographic variables except gender and food item
- In post test group there is significance association occur in all the demographic variables except area of living

## NURSING IMPLICATION

The findings of the study have significant implication for nursing practice. The nurse involved in child health care should actively participate in planning and implementation of strategies to increase awareness of osteoporosis among premenopausal women. Structure teaching can be used as tool to teach the womens on various topic related to importants of bone health.

## CONCLUSION

Now-a-days almost every school children is handling bicycles and incidence of road traffic accidents are also increasing year by year. So, there is a need for strengthening of information, education and communication activities in relation to road traffic rules to all school children during school health programme. Students should refrain themselves from traffic rule violations. Finally the study concluded that the video assisted teaching was effective among middle school children in improving the knowledge on road traffic rules

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