

# A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAM ON KNOWLEDGE AND PRACTICE REGARDING COLOSTOMY CARE AMONG CAREGIVERS OF PATIENTS IN SELECTED HOSPITALS OF UTTAR PRADESH.

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## Abstract

The primary objective of this study is to assess the efficacy of a structured teaching program in enhancing the knowledge and practice among care givers of colostomy patients regarding care in selected hospitals at Kanpur, Uttar Pradesh. The study employed a pre experimental research design. The samples were chosen using the simple random sampling technique using lottery method. This study included 100 care givers of colostomy patients. The interview method was employed to obtain the data pertaining the knowledge and practice regarding colostomy care among care givers of colostomy patients. The study conceived a test to evaluate the level of knowledge and practice had gained by care givers regarding care of colostomy patients. The data was analyzed with descriptive and inferential statistics by using Statistical Package for Social Sciences. The finding of the study indicates that pretest knowledge score was 25 % poor, 50 % average and 25 % good whereas in posttest 50 % good, 40 % average and 10 % poor with the level of significant at 0.05. Pretest practice score was 30 % good, 40 % and 30 % poor, whereas in posttest 60 % Good, 35 % average and 5 % poor with the level of significant at 0.05. therefore, structure teaching programme is effective in improving knowledge and practice among caregivers of colostomy patients, there was significant in household size in knowledge and living arrangement in practice and selected demographic variables at the level of 0.05.

## Introduction:

Colostomy patients undergo a complex treatment with a wide range of adjustments affecting their social and psychological functioning. The formation of the abdominal stoma represents a significant change in the person's life and results in complex emotional, social, physical, and

psychological concerns. These concerns influence persons' life satisfaction, happiness, and overall quality of life. Having a colostomy does not mean having a lifelong disability. Living well with a colostomy can be achieved through patient preparation, education, and planning. Nurses and other healthcare providers can play a key role in the perception and have a significant impact on how patients and their families adjust to colostomy. However, this role is successful only when nurses are supported by the required knowledge and skills.

Colostomy is a surgically created opening in the abdomen in which a part of the colon is brought outside the abdominal wall to create a stoma through which digested food (feces) passes out of the body into an external pouching system. The care of children with colostomy is a complex, challenging, and lengthy process, despite its temporary status in most children. After stoma formation, care has to be provided to the child by caregivers at home. Hence, caregivers need to be provided with ongoing education and support commencing from preoperative teaching to discharge from the hospital and home care.

#### **Statement of the problem:**

A study to assess the effectiveness of structured teaching program on knowledge and practice regarding colostomy care among caregivers of patients in selected hospitals of Uttar Pradesh.

#### **Objectives:**

- To assess pre-test knowledge regarding colostomy care among caregivers of patients.
- To assess pre-test practice regarding colostomy care among caregivers of patients.
- To assess the effectiveness of structured teaching program on knowledge and practice regarding colostomy care among caregivers of patients.
- To find the association of post-test knowledge regarding colostomy care among caregivers of patients with selected socio-demographic variables.
- To find the association of post-test practice regarding colostomy care among caregivers of patients with selected socio-demographic variables.

**Hypotheses:**

- H1: There will be significant change in level of knowledge regarding colostomy care at statistical significance at  $p > 0.05$ .
- H2: There will be significant change in level of practice regarding colostomy care at statistical significance at  $p > 0.05$

**Research Methodology:**

**Research Approach:** Quantitative research approach: Pre- experimental research approach

**Research design:** Pre-experimental one group pretest-posttest design

**Research variables:** Independent variables: STP

Dependent Variables: Knowledge and Practice

**Setting:** The study was conducted in Fortune hospital, Dhanvantri health care and Pratha hospital.

**Population:** Care givers of Colostomy Patients.

**Sample and sample size:** Care givers of Colostomy Patients who comes for inclusion criteria. The sample size of this study was 100.

**Sampling technique:** Simple random sampling technique using lottery method.

**Tools:** Demographic Variables, Knowledge Questionnaire, Practice Questionnaire, Structured Teaching Programme.

**Description of the tool:**

It consists of 10 items to collect socio-demographic variables, knowledge questionnaire which consists of 30 items to assess the level of knowledge and 30 items to assess the level of practice of the care givers of colostomy patients. Each question carries 4 mark and the total score was 120. Structured Teaching Programme was taught to increase knowledge and practice level

among care givers of colostomy patients. The data will be analyzed using descriptive and inferential statistics on the basis of objectives of the study.

### Results:

#### Section: I Demographic variables:

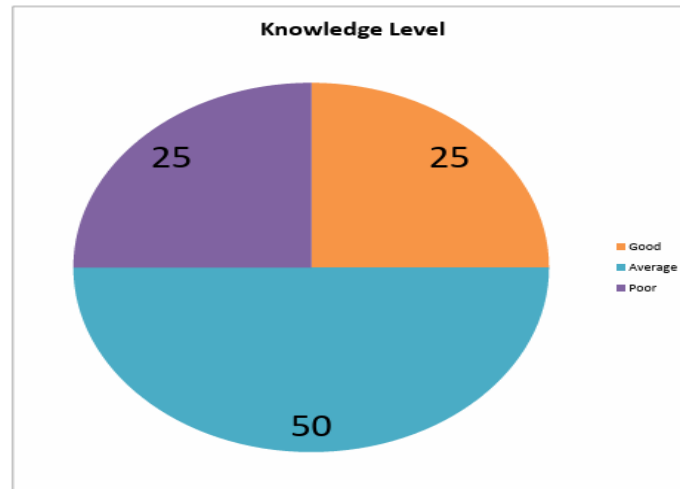
(n=100)

Sl.No.	Variables	Frequency (f)	Percentage (%)
1	<b>Gender</b>		
	Male	65	65
	Female	35	35
2	<b>Age</b>		
	18-24	15	15
	25-34	30	30
	35-44	25	25
	>45	30	30
3	<b>Marital Status</b>		
	Single	20	20
	Married	50	50
	Divorced	15	15
	Separated	15	15
4	<b>No.of children</b>		
	No child	30	30
	1-2	40	40
	>3	30	30
5	<b>Transport mode</b>		
	Personal vehicle	50	50
	Public	30	30
	Bicycle/walking	20	20

<b>6</b>	<b>Access of information</b>		
	<b>High</b>	<b>40</b>	<b>40</b>
	<b>Moderate</b>	<b>36</b>	<b>36</b>
	<b>Limited</b>	<b>24</b>	<b>24</b>
<b>7</b>	<b>Living Arrangement</b>		
	<b>Alone</b>	<b>15</b>	<b>15</b>
	<b>With partner</b>	<b>40</b>	<b>40</b>
	<b>With family</b>	<b>40</b>	<b>40</b>
	<b>With roommates</b>	<b>5</b>	<b>5</b>
<b>8</b>	<b>Education</b>		
	<b>Bachelor degree</b>	<b>45</b>	<b>45</b>
	<b>Master Degree</b>	<b>20</b>	<b>20</b>
	<b>Others</b>	<b>25</b>	<b>25</b>
<b>9</b>	<b>Religion</b>		
	<b>Hindu</b>	<b>40</b>	<b>40</b>
	<b>Muslim</b>	<b>30</b>	<b>30</b>
	<b>Christian</b>	<b>18</b>	<b>18</b>
	<b>Others</b>	<b>12</b>	<b>12</b>
<b>10</b>	<b>House hold size</b>		
	<b>1-2 members</b>	<b>25</b>	<b>25</b>
	<b>3-4</b>	<b>40</b>	<b>40</b>
	<b>5-6</b>	<b>25</b>	<b>25</b>
	<b>&gt;7</b>	<b>10</b>	<b>10</b>

**Section II: Distribution of pre test level of knowledge among care givers of colostomy patients.**

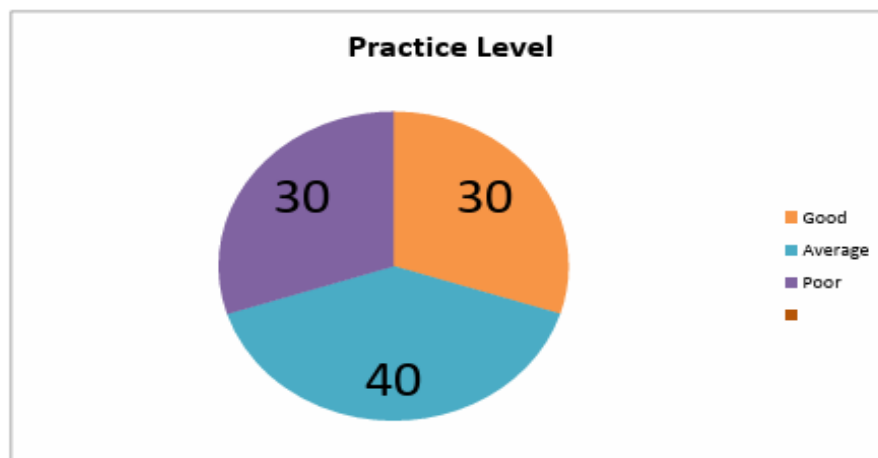
(n=100)



In terms of pretest, 25 % caregivers has good, 50 % caregivers has adequate and 25 % of care givers has poor level of knowledge regarding care of colostomy.

**Section III: Distribution of pretest level of practice among care givers of colostomy patients.**

(n=100)



In terms of pretest, 30 % caregivers has good, 40 % caregivers has adequate and 30 % of care givers has poor level of practice regarding care of colostomy.

#### Section-IV Distribution of posttest level of knowledge among caregivers of colostomy patients

(n=100)

Knowledge score					
Knowledge level	Percentage	Mean	SD	T value	Significant
Good	50	90	15	6	*
Average	40				
Poor	10				

In terms of posttest, 50 % caregivers has good, 40 % caregivers has adequate and 10 % of care givers has poor level of knowledge regarding care of colostomy with 0.05 level of significant. So it indicates that structured teaching programme is effective in care givers of colostomy patients.

#### Section- V Distribution of posttest level of practice among caregivers of colostomy patients

(n=100)

Practice score					
Practice level	Percentage	Mean	SD	T value	Significant
Good	60	85	20	-3.125	*
Average	35				
Poor	5				

In terms of posttest, 60 % caregivers has good, 35 % caregivers has adequate and 5 % of care givers has poor level of practice regarding care of colostomy with 0.05 level of significant. So it indicates that structured teaching programme is effective in care givers of colostomy patients.

## Section VI: Association of the posttest level of knowledge with selected demographic variables

(n=100)

Demographic	Options	Post test knowledge score			Association with post test knowledge			
		Good	Average	Poor	Chi square	Critical X2	Degree of freedom	Significant level
Household size	1-2 members	9	1	5	18.933	12.592	6	0.05 *
	3-4	11	10	6				
	5-6	16	5	4				
	>7	13	15	5				

The above table shows that association between posttest knowledge and household size is significant at the level of 0.05. Other demographic variables are not associated.

## Section VII: Association of the posttest level of practices with selected demographic variables

(n=100)

Demographic	Options	Post test practice score			Association with post test practice			
		Good	Average	Poor	Chi square	Critical X2	Degree of freedom	Significant level
Living arrangements	Alone	39	14	7	10.923	9.488	6	0.05 *
	With partner	11	13	6				
	With family	8	1	1				
	With roommates							



The above table shows that association between posttest practice and living arrangement is significant at the level of 0.05. Other demographic variables are not associated.

### **Discussion:**

In this study, level of knowledge regarding colostomy care among caregivers in pretest 50% average, 25% good and 25% poor. Whereas in post test 50% good, 40% average and 10% poor. Statistical significance was confirmed by t test at the level of 0.05.

**H<sub>1</sub>:** There will be a significant change in the level of knowledge regarding colostomy care at statistical significance at  $P > 0.05$ .

In this study, level of practice regarding colostomy care among caregivers in pretest 40% average, 30% good and 30% poor. Whereas in post test 60% good, 35% average and 5% poor. Statistical significance was confirmed by t test at the level of 0.05.

**H<sub>2</sub>:** There will a significant change in level of practice regarding colostomy care at statistical significance at  $P > 0.05$

To find the association of post-test knowledge regarding colostomy care among caregivers of patients with selected socio-demographic variables.

- House hold size was significant at the level of 0.05. Other demographic variables are not significant.
- To find the association of post-test practice regarding colostomy care among caregivers of patients with selected socio-demographic variables. In this study, living arrangement was significant at the level of 0.05.
- Other demographic variables are not significant.

### **Conclusion:**

The caregivers had gained knowledge and practice about care of colostomy. In this study the investigator selected 100 samples according to criteria and gave structured teaching programme on care of colostomy. They gave free and frank response regarding care of

colostomy. From the data analysis and findings of the present study is concluded that there was significant differences between pretest and posttest knowledge and practice scores.

### Bibliography:

1. Geleta, Tensae. Assessment of Knowledge and Associated Factors Regarding Colostomy Care among Staff Nurses Working in Surgical, ICU and Oncology Units at Selected Public Hospitals, Addis Ababa, Ethiopia, 2017. Masters thesis, Addis Ababa University.
2. Sinha A, Goyal A, Singh S, Rana SP. Quality of life of colostomates with the selected factors in a selected hospital Delhi with view to develop guidelines for the health professionals. *India J Palliat Care*. 2009;15:11–4.
3. Berndtsson I, Carlson E, Hallen AM, Lindholm E. Stoma-related complications and stoma size—a 2 year follow up. *Colorectal Dis*. 2010;12:971–6.
4. Ibrahim K, Priambodo AP, Nur'aeni A, Hendrawati S. Quality of life and characteristics of colostomy patients. *J Ners*. 2017;12:239–46.
5. Cheng F, Xu Q, Dai XD, Yang LL. Evaluation of the expert patient program in a Chinese population with permanent colostomy. *Cancer Nurs*. 2012 JanFeb;35(1):E27-33. doi: 10.1097/NCC.0b013e318217cbe9. PMID: 21558846.
6. Yan, Ming-hui BN, RN; Lv, Lin MSN, RN; Zheng, Mei-chun BN, RN; Jin, Ying BN, RN; Zhang, Jun-e PhD, RN. Quality of Life and Its Influencing Factors Among Chinese Patients With Permanent Colostomy in the Early Postoperative Stage. A Longitudinal Study. 45(1):p E153-E161, 1/2 2022. | DOI: 10.1097/NCC.0000000000000893
7. Halemani K, Shashidhara YN, D'Souza SRB. An Evaluative Study to Assess the Effectiveness of a Video-Assisted Teaching Module on Knowledge and Practice Regarding Home-Based Colostomy Care of Children Among Primary Caregivers in Selected Hospital Lucknow, Uttar Pradesh. *Indian J Surg Oncol*. 2021 Mar;12(1):146-151. doi: 10.1007/s13193-020-01268-3. Epub 2021 Jan 23. PMID: 33814845; PMCID: PMC7960830.
8. Colostomy: care at home. Children; Minnesota. 2015 <https://www.childrensmn.org/educationmaterials/childrensmn/article/15610/colostomy-care-at-home/>

9. Alexander Colostomy closure: risk factors for complication 231-234. Braz Arch Dig Surg. 2017;30(4):231–234. doi: 10.1590/0102-6720201700040001.
10. Society AC. Colostomy guide. <https://www.ostomy.org/wp-content/uploads/2018/03/ColostomyGuide.pdf>

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