

# “A STUDY TO ASSESS THE EFFECTIVENESS OF VIDEO ASSISTED TEACHING MODULES ON KNOWLEDGE REGARDING PREVENTIVE MEASURE OF OSTEOPOROSIS AMONG ELDERLY WOMEN AT SELECTED HOME FOR THE AGED IN GONDA”

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## ABSTRACT

Osteoporosis is a systemic skeletal disorder characterized by compromised bone strength predisposing to an increased risk of bone fracture. The normal homeostatic mechanism is altered. The rate of bone re absorption is greater than the bone turnover is altered. In osteoporosis the bone became progressively porous, brittle and fragile they fracture easily under stresses that would not break normal bone. Osteoporosis Is Not an Inevitable Part of Aging, It Is Preventable. so it is vital that all of us, of all Ages Start Taking Care of Our Bones Now, Before It Is Too Late. Old age consists of ages nearing or surpassing the average life span of human beings. Elderly people have limited regenerative abilities and are more prone to disease, syndromes, and sickness than other adults. Currently, more than half of the world's women aged 60 years and over are living in developing regions, 198 million compared with 135 million in the developed regions **Objectives:**1) To assess the knowledge among elderly women regarding preventive measures on osteoporosis. 2) To evaluate the effectiveness of video assisted teaching module regarding knowledge on preventive measures on osteoporosis among elderly women. 3). To find the association between posttest knowledge scores with the selected scores of elderly women in a selected demographic variable. **Material and methods:** Quasi experimental design approach was considered as appropriate research approach for the present study. The sample of this study comprised of 60 Women in the age group of 45 -55 years who are residing at Haripur Rural area at Gonda, UP. Non-randomized Purposive sampling technique was used to draw the sample.

**KEY WORDS:** Effectiveness, Video Assisted Teaching programme, osteoporosis, Preventive measures, elderly women, Assess

## INTRODUCTION:

Health is a fundamental human right. It is central to the concept of quality of life. Health and its maintenance is a major social investment and is World-wide social goal. Health is multi-dimensional. This health may be assessed by such indicators as death rate, infant mortality rate and expectation of life. Ideally, each piece of information should be individually useful and when combined should permit a more complete health profile of individuals and communities.

Osteoporosis is a systemic skeletal disorder characterized by compromised bone strength predisposing to an increased risk of bone fracture. The normal homeostatic mechanism is altered. The rate of bone re absorption is greater than the bone turnover is altered. In osteoporosis the bone became progressively porous, brittle and fragile they fracture easily under stresses that would not break normal bone. Osteoporosis is not an inevitable part of aging.

It Is Preventable. So it is vital that all of us, of all ages Start Taking Care of Our Bones Now, before it is Too Late. Old age consists of ages nearing or surpassing the average life span of human beings. Elderly people have limited regenerative abilities and are more prone to disease, syndromes, and sickness than other adults. Currently, more than half of the world's women aged 60 years and over are living in developing regions, 198 million compared with 135 million in the developed regions. WHO on world Health Day April 7th 1999 stated 14 with the predicted increase in the number of older people in poor conditions, the care of the elderly is a difficult problem to be tackled.

#### **NEED FOR THE STUDY:**

“It is very important that women of this country be made aware of the dangers of osteoporosis in the sense that it is a silent and invisible disease with no symptoms. “According to WHO Osteoporosis is second only to cardiovascular disease a Global Health Care problem and medical studies show a 50 years old women has a similar lifetime risk of dying from hip fracture as from breast cancer, since osteoporosis affects the elderly population and elderly women's which is growing, it will put a bigger burden to the health care system as treatment expensive unless swift activities are taken it can escape into an economic threat. World Wide statistics reveal 200 million people are affected with osteoporosis and 80% of them are women. Statistics reveals in India about 50 – 60 million Indians suffer from osteoporosis. This means that Indians problem is far more serious than of United States where only 15 million suffer from osteoporosis. 30 million women in India have osteoporosis and one in two Indian women above 45 years suffer. WHO According to the International elderly society 2006 there were more than 477 million elderly women in the world. It is estimated that by the year 2030 there will be 1.2 billion women above the age of 50 and a growing number of these women can expect to live for several decades after elderly.

#### **OBJECTIVES OF THE STUDY**

- 1.To assess the knowledge among elderly women regarding preventive measures on osteoporosis.
2. To evaluate the effectiveness of video assisted teaching module regarding knowledge on preventive measures on osteoporosis among elderly women.
3. To find the association between posttest knowledge scores with the selected scores of elderly women in a selected demographic variable.

#### **HYPOTHESIS: -**

H1: - There will be significant difference between pre and post test knowledge regarding preventive measures on osteoporosis among elderly women.

H2: - There will be association between post test knowledge scores on the role regarding preventive measures on osteoporosis among elderly women

#### **MATERIAL AND METHODS:**

##### **Research Approach**

Quantitative/experimental approach.

##### **Research Design**

Pre-test and Post-test control group (Quasi experimental design) design.

##### **Sampling Technique**

Non-randomized Purposive sampling technique was used this study.

##### **Inclusion Criteria**

- 1.Women in the age group of 45 -55 years.
2. Elderly women only.
3. Who are willing to participate in the study.
4. Those who are available during the time of data collection.

##### **Exclusion Criteria**

1. Those who are deaf and dumb.
2. Those who are critically ill.

### Tools and technique

**Section –I** Structured interview schedule for demographic profile A structured interview schedule was used to collect information regarding demographic data such as Age, marital status, education, religion, occupation, socio economic status, type of family. No score was given in this section and it was used for descriptive analysis.

**Section- II** – consists of self-structured questionnaires to assess the level of knowledge regarding osteoporosis and its prevention among elderly women. The tool consisted of 25 multiple choice questions to measure the level of knowledge of Osteoporosis and its prevention among elderly women. All the items had four response options; 1 correct and 3 wrong answers. The correct answer was given a score of 1 and wrong answer was given a score of 0. The total possible score was 25. The actual study was conducted among 60 Samples

### Data Collection Procedure:

Data collection is the gathering of information needed to address a research problem. The formal permission was obtained from the authorities selected rural area gonad Uttar Pradesh (U.P). The data was collected from 60 elderly women were selected by using Non-Randomized Purposive sampling technique. The sample was administered structure questionnaire personally by the investigator and they spent 30-45 minutes to answer questionnaires. All the samples were receptive and co-operative during data collection.

### Data Analysis:

Descriptive and inferential statistics was used for data analysis • To assess the level of Knowledge before and after Video assisted Teaching programme among experimental and control group, frequency and percentage was used. To compare the effectiveness of video assisted teaching programme on the knowledge regarding osteoporosis and its prevention among experimental and control group, Paired‘t’ test and unpaired ‘t’ test were used for analysis. • To find the association between post-test scores of effectiveness of video assisted teaching among experimental group and control group of elderly women, with their demographic variables chi-square test was used

### Distribution of sample according to selected demographic variables:

The data given in Table 1 shows that according to age, 15(50%) elderly women were in the age group of 46-50 yrs, 12(40%) were in the age group of 51-55 years and 3(10%) were in the age group of 40-45years in experimental group. Whereas 17(57%) elderly women were in the age group 46-50yrs, 9(30 %) were in the age group of 51-55 yrs and 4(10%) were in the age group of 40-45 yrs, in control group. Regarding marital status 29 (97%) elderly women were married and 1(3%) of the were unmarried, and none of them widow in experimental group. Whereas 27(90%) elderly women were married and, 3(10) % were widow none of them unmarried in control group. Regarding religion 18 elderly women (60%) of them were Hindu, 11(37%) of them were Muslim and 1(3%) of them were Christian in experimental group. Whereas 21(70%) of them were Hindu, 5(17%) of them were Christian and 4(13%) of them were Muslim In control group. None of them in the others category in both experimental and control group.

### Distribution of sample in terms of socio economic status in experimental and control group:

Majority of elderly women 21(70%) were from middle economic status 9(30%) were from low economic status in experimental group where as majority 19 elderly women (63 %) were from middle economic status and 11 (37 %) were from low economic status in control group and no one from high socio economic group in both experimental and control group

### Recommendation

On the basis of study findings, following recommendations have been made for further study.

1. A similar study can be conducted on a larger sample.
2. A similar study can be done using true experimental design.
3. A similar study can be conducted with a post-test after 4 weeks, 6 weeks' interval to evaluate the retention of knowledge.

## CONCLUSION

This study proved to be very essential as video assisted teaching Programme play an important role in enhancing knowledge regarding osteoporosis and its prevention among elderly women. The level of knowledge regarding osteoporosis was increased among Elderly women who received video assisted teaching programme.

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