"A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME REGARDING LIFESTYLE MODIFICATION AMONG HYPERTENSIVE PATIENTS AT SELECTED HOSPITAL, ROHTAS."

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ABSTRACT

A study was conducted to find the effectiveness of structured teaching programme regarding lifestyle modification among hypertensive patients at selected Hospital, Rohtas. **The objectives of the study were** a)To assess the level of knowledge and practice regarding life style modification among hypertensive patients before and after the structured teaching programme. b)To implement and evaluate the effectiveness of structured teaching programme on the knowledge and practice regarding lifestyle modification among hypertensive patients. c)To find out the relationship between knowledge and practice regarding life style modification among hypertensive patients.d)To find out the association between knowledge and practice among hypertensive patients with selected demographic variable,. **METHODOLOGY** The research approach used for this study was Quantitative educative and evaluative approach and the research design was **Quasi experimental - Non equalent control group before-after design**. 60 patients who are recently diagnosed with hypertension were selected for this study by using purposive sampling technique. Data were collected with the help of self structured questionnaire for assessing knowledge and practice. Descriptive statistics (frequency , percentage, mean and standard deviation) and inferential statistics (chi-square, paired 't' test, unpaired 't' test and correlation coefficient) were used to analyze the data and to test hypothesis.

CONCLUSION This study proved to be very essential as structured teaching programme play an important role in enhancing knowledge and practice regarding lifestyle modification among hypertensive patients.

KEYWORDS: Structured teaching programme, lifestyle modification, Hypertension.

INTRODUCTION

We live in a rapidly changing environment. Throughout the world, human health is being shaped by the same powerful forces: demographic ageing, rapid urbanization, and the globalization of unhealthy lifestyles. Increasingly, wealthy and resource-constrained countries are facing the same health issues. One of the most striking examples of this shift is the fact that non-communicable diseases such as cardiovascular disease, cancer, diabetes and chronic lung diseases have overtaken infectious diseases as the world's leading cause of mortality. And one of the cardiovascular diseases, by which most of the people are affected, is HYPERTENSION.

'Hypertension, or high blood pressure, is defined as a persistent systolic BP greater than or equal to 140 mm Hg, diastolic BP greater than or equal to 90mm Hg, or current use of antihypertensive mediation.' One of the key risk factors for cardiovascular disease is hypertension - or raised blood pressure. Hypertension already affects one billion people worldwide, leading to heart attacks and strokes. Researchers have estimated that raised blood pressure currently kills nine million people every year. But this risk does not need to be so high.

Globally cardiovascular disease accounts for approximately 17 million deaths a year, nearly one third of the total. Of these, complications of hypertension account for 9.4 million deaths worldwide every year. Hypertension is responsible for at least 45% of deaths due to heart disease, and 51% of deaths due to stroke. Various factors might have contributed to this rising trend, attributable to several indicators of economic progress such as increased life expectancy, urbanization and its attendant lifestyle changes including increasing salt intake and the overall epidemiologic transition India is experiencing currently. Another factor that may contribute is the increased awareness and detection.

Concerning the treatment, the goal of hypertension treatment is to prevent death and complications by achieving and maintaining the arterial blood pressure at 140/90 mm Hg or lower. This is achieved by two kinds of management strategies, they are life style modification and drug therapy.

PROBLEM STATEMENT

"A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME REGARDING LIFESTYLE MODIFICATION AMONG HYPERTENSIVE PATIENTS AT SELECTED HOSPITAL, ROHTAS."

OBJECTIVES OF THE STUDY

- To assess the level of knowledge and practice regarding life style modification among hypertensive patients before and after the structured teaching programme.
- To implement and evaluate the effectiveness of structured teaching programme on the knowledge and practice regarding lifestyle modification among hypertensive patients.
- To find out the relationship between knowledge and practice regarding life style modification among hypertensive patients.
- To find out the association between knowledge and practice among hypertensive patients with selected demographic variable,.

HYPOTHESIS

H_1 – There will be significant enhancement in the level of knowledge and practice regarding lifestyle modification among hypertensive patients after structured teaching programme.

H_2 – There will be significant relationship between knowledge and practice regarding lifestyle modification among hypertensive patients.

H_3 – There will be significant association between the level of knowledge and practice regarding lifestyle modification with selected demographic variables

METHODOLOGY

RESEARCH APPROACH

The research approach selected to accomplish the objectives of the study was **Quantitative educative and evaluative approach**.

RESEARCH DESIGN

The research design used for the present study was Non equalent control group before-after design which is a **Quasi experimental design** used to measure the effectiveness of structured teaching programme regarding lifestyle modification among hypertensive patients.

The research design used in the study was **Non equalent control group before-after design** to determine the effectiveness of intervention strategy. Diagrammatic representation of the design is given below,

Experimental group	O_1	X	O_2
Control group	O_1		O_2

Key,

O_1 – pre-test of knowledge and practice regarding lifestyle modification among hypertensive patients.

X – administration of structured teaching programme regarding lifestyle modification among hypertensive patients.

O_2 – post-test of knowledge and practice regarding lifestyle modification among hypertensive patients.

VARIABLES OF THE STUDY

Independent variable:-

The independent variable in this study was structured teaching programme regarding lifestyle modification to the experimental group of patients with hypertension.

Dependent variable:-

It is the outcome variable of interest. It is the variable that is hypothesized to depend on or caused by the other. The dependent variables in this study were knowledge and practice regarding lifestyle modification.

RESEARCH SETTING

The study was conducted **in Medical OPD Shershah Hospital, Rohtas.**

POPULATION In this study population includes Patient with hypertension who are attending

Medical OPD at Shershah Hospital, Rohtas

SAMPLE

In this study, sample comprised of patients who are recently diagnosed with hypertension and fulfills the inclusion criteria.

SAMPLE SIZE

The size of the sample is 60. 30 will be in experimental group and 30 will be in control group.

SAMPLING TECHNIQUE:

In this study **Purposive sampling technique** was used.

CRITERIA FOR SAMPLE SELECTION:

Inclusion criteria:

✓　　Patients who are recently diagnosed as hypertensive.

✓　　Those who are willing to participate in the study

✓   Those who are available during the time of collection of data.

Exclusion criteria:

✓   Those who are deaf, dumb and blind.

✓   Those who are having critically ill.

CONSTRUCTION OF RESEARCH INSTRUMENT:

Research instruments or tools are ways of gathering data. Without them data would be impossible to put in hand which is used by the researcher to observe or measure the key variables in the research problem. The major task of the researcher is to construct instruments most accurately.The instrument used in the research is a self-structured instrument.

DATA COLLECTION METHOD   **Interview method** was used.

DESCRIPTION OF THE INSTRUMENT:

Data collection instrument used is a self structured questionnaire which has three parts -

Part A ,Part B and Part C.

Part A- consists of questionnaires to collect demographic data.

Part B- consists of questionnaire to assess the patient level of knowledge regarding lifestyle modification. The tool consisted of 30 multiple choice questions to measure the level of knowledge of patients with hypertension regarding hypertension and lifestyle modification. 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 30.

Part C- consists of questionnaire to assess practice regarding lifestyle modification. The rating scale was prepared to' assess the level of practice. It consisted of 20 items. It was 3 point scale with responses as Never do = 0, Occasionally do = 1, and Always do = 2, which consists of both positive statements. The total maximum score is 40.

SCORING INTERPRETATION:

Part – B

The interpretation of the total score was:

•   Inadequate knowledge: less than 50%

•   Moderately adequate knowledge: 50%-75%

- Adequate knowledge: greater than 75%

0 – 14	Inadequate knowledge
15 – 22	Moderately adequate knowledge
>22	Adequate knowledge

Part – C

The total score was categorize as,

- Poor practice: less than < 50%

- Moderate practice: 50-75%

- Good practice: more than > 75%

0 – 19	Poor practice
20 – 29	Moderate practice
>29	Good practice

TESTING OF THE TOOL

Content validity

The instruments were validated by 5 experts from the field of Nursing and Medicine. The experts suggested addition, deletion of certain items and re-organization of questions. Appropriate modifications were made and the tool was finalized.

Reliability

Demographic variables, self-structured questionnaire on Knowledge and practice was tested by implementing the tool on 6 patients with hypertension. "Split half method" (Spearman Brown Formula) is used to test the reliability of the tool and the tool was found to be reliable (**r^1=0.969, for knowledge questionnaire & r^2= 0.942, for practice questionnaire**).

DATA COLLECTION PROCEDURE

Data collection is the gathering of the information to address the research problem. The word "data" means information i.e. systematically collected in the course of study. Permission from the concerned authority prior to the collection of the data, permission was obtained from the Hospital,

Data collection process

Samples were selected by using simple purposive sampling technique. Hypertensive patients who met the inclusion criteria were selected for the study. Demographic data was collected by interview and medical record. The Self-structured questionnaire were administered to the control group and the experimental group to assess the level of knowledge and practice prior to the intervention. For the experimental group structured teaching programme was administered . The level of knowledge and practice were assessed for both experimental and the control group 1 week after the intervension.

DATA ANALYSIS

To assess the level of Knowledge and practice was assessed before and after Structured Teaching programme among experimental and control group, frequency and percentage was used.

To compare the effectiveness of structured teaching programme on the knowledge and practice regarding lifestyle modification among experimental and control group, **paired 't' test and unpaired 't' test** were used for analysis.

To find out the relationship between knowledge and practice regarding lifestyle modification among hypertensive patients, correlation co-efficient was used.

To find the association between post-test scores of effectiveness of structured teaching among experimental group and control group of patients with hypertension, with their demographic variables **chi-square test** was used.

FINDINGS

Major findings of the study:

✓ Mean difference between pre-test and post-test score of knowledge in experimental group was significant at 0.05 level.

✓ Mean difference between pre-test and post-test score of practice in experimental group was significant at 0.05 level

✓ Mean differencebetween post-test score of knowledge in control and experimental group was significant at 0.05 level

✓ Mean difference between post-test score of practice in control and experimental group was significant at 0.05 level

✓ There was a positive correlation found between knowledge and functional practice of patient with hypertension.

✓ There was significant association between the post-test score of knowledge in control group and marital status. **(p<0.05)**

✓ There was a significant association between the post-test score of knowledge in experimental group and B.M.I. **(P< 0.05)**

IMPLICATIONS FOR NURSING

The findings of the present study have implication in Nursing practice, Nursing Education, Nursing administration and Nursing research.

Nursing Practice

1. Nurses play a pivotal role in helping the patients by increasing the knowledge and practice regarding lifestyle modification for hypertension.

2. Structured teaching programme can be used to increase the knowledge and practice regarding lifestyle modification for hypertensive patients.

3. This structured teaching programme can be used in various settings like inpatients department,and home settings.

4. The structured teaching programme can be printed and distributed to the patients as a preventive measure of complication.

Nursing Education

➢ Nursing educator should educate the nursing professionals about the effectiveness Structured teaching programme to increase the knowledge and practice regarding lifestyle modification for hypertension.

CONCLUSION

This study proved to be very essential as structured teaching programme play an important role in enhancing knowledge and practice regarding lifestyle modification among hypertensive patients.

RECOMMENDATIONS:

➢ A similar study can be conducted on a larger sample.

➢ A similar study can be done using true experimental design.

➢ A similar study can be compared with other alternative programmes like video assisted teaching programme, self instructional module etc,.

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