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EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING MANAGEMENT OF STRESS AND ANXIETY AMONG WOMEN WITH INFERTILITY PROBLEM AT SELECTED INFERTILITY CLINIC, COIMBATORE

C. Chitraa*¹

¹*Department of Mental Health Nursing, Annai Meenakshi College of Nursing, Coimbatore, India.

ABSTRACT

Child bearing is typically seen as one of life's most basic accomplishments. Feelings of failure, melancholy, solitude, guilt, and rage accompany the desire for a child in those who are unable to conceive. Infertility is a challenging experience, affecting individual and couples' adjustment. Infertility may causes stress denfinitely when comparing to infertility men, infertility women report high level of stress and anxiety. Stress lowers sexual and marital adjustment and isolation compared to men. The couple's search for a solution and acceptance of the testing and therapy procedures is aided by acknowledging these deep feelings. The investigator used pre experimental design with one group pre-test and post-test 60 women who fulfilled the criteria were selected by using Purposive sampling technique and knowledge questionnaires and data was gathered before and after a systematic instruction programme. The overall calculated 't' value was *13.17 when compared to the table value (2) was found to be high and it is significant at 0.05 level.

KEYWORDS

Knowledge, Management of stress, Anxiety, Infertility problem and Women.

Author for Correspondence:

Chitraa C,
Department of Mental Health Nursing,
Annai Meenakshi College of Nursing,
Coimbatore, Tamilnadu, India.

Email: tharac4@gmail.com

INTRODUCTION

Women are god's unique creations in fact they are even considered as god because only a woman has the ability to give birth to a new soul to this world. However, some women lose this capacity due to unforeseen circumstances. These sad individuals are said to be sterile. This in conceive effect may cause women to experience psychosocial problems. In most of the cases the couple must undergo extensive and invasive investigation and treatment procedures. The failure of treatment on multiple occasions might

lead to emotional discomfort and depression. Human beings have two basic desires “to get and to be got”. Our universal dream is having own family. This dream cannot become true for the infertile couple, this issue can cause depression, very stress and difficult emotions.

WHO, (2001) reported that 1/3rd of the people affected by infertility around the world and even in developing countries. In India, 10-15% of couples in the reproductive age range suffer with infertility. Infertility is a difficult situation that affects both individuals and couples. The way the couple members believe one other, on the other hand, may have an impact on the couple's infertile experience and adjustment.

Anxiety, Difficulties, and Coping of Infertile Women, Diana Antonia Iordachescu 2021, the present study aims to highlight how women perceive and adapt to infertility difficulties. The study investigates this idea in relation to anxiety and coping in order to better understand the problems that women diagnosed with infertility face. These findings draws attention to the fact that infertile women live this experience at very high levels of anxiety, using quite a few adaptive coping mechanisms. These findings underscore the need for more research into anxiety reduction and adaptive coping mechanisms.

Rooney KL, Domar AD (Dialogues Clinic Neuroscience 2018) the relationship between stress and infertility has been debated for years. . Infertility generates stress, as evidenced by the fact that women experiencing infertility have higher levels of anxiety and despair. It's less known, though, if stress contributes to infertility. For a variety of reasons, including faulty self-report measures and emotions of enhanced optimism at the start of therapy, determining the impact of distress on treatment outcome is difficult. However, recent research has shown that psychological therapies are effective in reducing psychological distress and are linked to considerable increases in pregnancy rates. A cognitive-behavioral group approach could be the most effective way to accomplish both objectives. Given the high levels of distress experienced by

many infertile women, expanding the availability of these services is critical.

Swarna S. (2016) stated that recent year's infertility is becoming a worldwide issue. Approximately 8-10% of couples experience infertility during their reproductive life. It affects all human beings present in all the societies.

During the clinical experience the investigator observed that the infertile couple attending the infertility clinic looked very anxious and depressed. Also the investigator on reviewing the literature found that the very few studies have been done regarding the analysis of psychological and social problems experienced by the infertile women and mind-body intervention for decreasing stress and anxiety among infertile women. The investigator felt that this study would help the nursing practitioner to understand the stress rate experienced by infertile women to adapt suitable situation for reducing stress and anxiety.

Objectives

To identify the socio demographic variables of women with infertility problem.

To assess the level of knowledge regarding management of stress and anxiety among women with infertility problem.

To deliver the structured teaching programme regarding management of stress and anxiety among women with infertility problem.

To reassess the level of knowledge regarding management of stress and anxiety among women with infertility problem.

To determine the association between the post test score level of knowledge and with demographic variables.

Hypothesis

H1

There will be statistically significant difference between pre-test and post-test level of knowledge regarding management of stress and anxiety among women with infertility problem.

Assumptions

Women with infertility problem will have stress and anxiety, it may vary from one to another.

Women with infertility problem will have some techniques to manage the stress and anxiety.

Planned teaching Programme will enhance more information to manage the stress and anxiety among women with infertility problem.

MATERIAL AND METHODS

Research approach

The research approach used for this study was quantitative approach.

Research design

The investigator used pre experimental design (one group pre-test and post-test) for this study to assess the effectiveness of (STP) on knowledge regarding management of stress and anxiety among women with infertility problem.

Research setting

The study was conducted in selected infertility centre which is a Sudha Hospitals Fertility and Women Care centre, located in Coimbatore. In this centre artificial reproductive techniques like *in vitro* fertilization (IVF), intracytoplasmic sperm insemination (ICSI) and intra uterine insemination (IUI) are used to treat infertility. Approximately 800-900 patients visits to outpatient department per month. Researcher was selected this setting on the basis of feasibility and availability of samples.

Sample

The sample selected for this study was women with infertility problem who are attending outpatient department in selected infertility centre at Coimbatore.

Sampling technique

Purposive sampling was used to selected the sample.

Sample size

The sample size was 60.

Development and description of the tool

Part –I

It consists of demographic variables such as age, educational qualification, occupation, family income per month and duration of infertility.

Part – II

Based on structured teaching programme, prepared knowledge assessment questionnaires by use of steps involved in the development of the tool with 50 questions. Each questions has four options with one correct answer. Each correct answer carries one mark, wrong answer carries zero marks. The possible

maximum score was 50 marks. The possible minimum score was zero.

Adequate knowledge-31-50

Moderately adequateknowledge-16-30

Inadequate knowledge- less than0-15

Data collection procedure

The study was conducted at Sudha Hospital fertility and women's care center in Coimbatore. Written permission was obtained from the medical officer of fertility center. The data was collected for a period of 4 weeks and selected of 60 samples. The investigator selected 60 women with infertility problem as per inclusion criteria. An introduction and then written informed consent were obtained to participate in the study. Each day 10 samples were selected, first week days data collection and pre-test was conducted for 60 women with infertility problem. The pre-test questionnaire was given to them and to assess the level of knowledge regarding management of stress and anxiety by structured questionnaires. Next 2 weeks, the investigator given structured teaching programme upto 40 minutes in the morning session for 5 women with infertility problem each day. Finally, post-test was conducted on fourth week for assessed the level of knowledge among women with infertility problem.

RESULTS AND DISCUSSION

The present study revealed that in pre-test, majority of women with infertility problems had (68%) had inadequate knowledge, (30%) had moderately adequate knowledge and (2%) had adequate knowledge regarding management of stress and anxiety. With regards to post-test 57(87%) had adequate knowledge, 8(13%) had moderately adequate knowledge and none of them had inadequate knowledge regarding management of stress and anxiety. The analysis also revealed that there was a statistically significant difference at $p < 0.05$ level. The findings showed that there was a significant improvement in the level of knowledge after administration of structured teaching programme.

The above findings were significantly consistent with the study conducted by Venkatesan, L. He assessed the impact of positive therapy on stress in

infertile women was studied through a randomized clinical trial. The infertile women were randomly allotted into the control (n=60) and experimental group (n=60) of women. Pre-test stress was measured on day 2 of the menstrual cycle of control and experimental group of infertile women and the positive therapy was administered from day 2 to 7 of the menstrual cycle only for the experimental group. Post-test stress was assessed on day 14 of the cycle in both groups. The outcome have shown that in experimental group the post-test stress level (M=164.30, SD=19.03) was less than the pre test stress level (M=247.51, SD=23.14), the difference was statistically significant at $p < .001$ level. In control group there was no statistical difference between the pre-test (M=246.65, SD=22.18) and post test (M=247.06, SD=21.89) stress levels. The results can be attributed to the effectiveness of (STP).

| Pre-test | Intervention | Post-test |
|---|--------------|----------------|
| O ₁ | X | O ₂ |
| O ₁ - Pre-test the level of knowledge regarding management of stress and anxiety. X - Structured Teaching Programme (STP). O ₂ . Post-test the level of knowledge regarding management of stress and anxiety. | | |

Table No.1: Pre-test and post-test knowledge regarding management of stress and anxiety among women with infertility problem

| S.No | Knowledge | Pre-test | | Post-test | |
|------|-------------------------------|----------|----|-----------|----|
| | | F | % | F | % |
| 1 | Inadequate | 41 | 68 | 0 | 0 |
| 2 | Moderately adequate knowledge | 18 | 30 | 8 | 13 |
| 3 | Adequate knowledge | 1 | 2 | 52 | 87 |

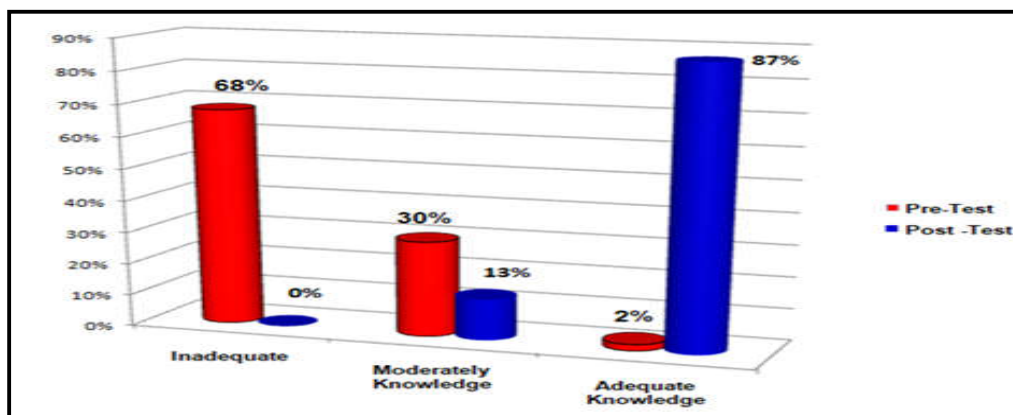


Figure No.1: Pre-test and post-test level of knowledge regarding management of stress and anxiety among women with infertility problem



Figure No.2: Mean and standard deviation of pre-test and post-test scores of knowledge among women with infertility problem

CONCLUSION

The study findings revealed that there was highly significant difference in the level of knowledge among women after of Structured Teaching Programme on knowledge regarding management of stress and anxiety among women with infertility problem and provide adequate knowledge and support will help them to overcome their problems and lead quality life.

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CONFLICT OF INTEREST

We declare that we have no conflict of interest.

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