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A STUDY TO ASSESS EFFECTIVENESS OF INFORMATION BOOKLET ON KNOWLEDGE AMONG STAFF NURSES REGARDING PREVENTION AND MANAGEMENT OF PERINEAL TEAR DURING NORMAL DELIVERY

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ABSTRACT

STATEMENT OF THE STUDY:- *A study to assess effectiveness of information booklet on knowledge among staff nurses regarding prevention and management of perineal tear during normal delivery*
OBJECTIVE:- *1. To assess the existing knowledge regarding prevention and management of perineal tear during normal delivery among staff nurses. 2. To assess the effectiveness of information booklet on knowledge regarding prevention of perineal tear during normal delivery among staff nurses. 3. To determine the association between pre test knowledge score of staff nurse regarding prevention and management of perineal tear during normal delivery with selected demographic variables.*
MATERIALS AND METHODS:- *The study aimed to evaluate the effect of information booklet on knowledge among staff nurses regarding prevention and management of perineal tear during normal delivery. Convenient study research design was used in 30 sample were chosen and simple random technique were chosen in selected sample. The effectiveness was assessed using self-structured questionnaire- test and post-test was conducted and assess the knowledge level regarding prevention and management of perineal tear during normal delivery.*
RESULTS:-.*The overall knowledge score, before and after the administration of Information Booklet. On an average Staff Nurses were improved their knowledge from 16.40 to 25.04 after the administration of Information Booklet. This difference is statistically significant. On an average, in posttest after having Information Booklet, Staff Nurses were gained 28.81% more knowledge score than pretest score.*

INTRODUCTION

Perineal trauma is damage to the genitalia during childbirth that occurs spontaneously or intentionally by surgical incision (episiotomy). Anterior perineal trauma is Injury to the labia, anterior vagina, urethra, or clitoris, and is usually associated with little morbidity. Posterior perineal trauma is any Injury to the posterior vaginal wall, perineal muscles, or anal sphincter. Spontaneous tears are defined as first degree when they involve the perineal skin only; second-degree tears involve the perineal muscles and skin; third-degree tears involve the anal sphincter complex (classified as 3a where less than 50% of the external anal sphincter is torn; 3b where more than 50% of the external anal sphincter is torn; 3c where the internal and external anal sphincter is torn); fourth-degree tears involve the anal sphincter complex and anal epithelium and fifth degree also called button hole tear which involves the rectal mucosa and an intact anal sphincter.[15] perineal trauma during child birth is very common, occurring in about 40% of women during their first birth and about 20% in subsequent births. Any laceration involving more than the perineal skin and the subcutaneous tissue must be regarded as an obstetric complication. Severe perineal tears which involve the anal sphincters and the rectal mucosa are identified in 0.6-0.9% of vaginal deliveries. Genital trauma during childbirth can occur either spontaneously as a laceration or intentionally as an episiotomy. Rates of trauma are estimated between 30% and 85% of child bearing women, and can lead to significant short term and long term morbidity, such as perineal pain, incontinence, sexual problems and varying degrees of functional impairment.[16]

In Australia, the average rate of episiotomy was 15%. The rate of women who had no tears or small tears that may not require stitches was on average about 55%. On a worldwide level, Australia compares quite well when it comes to performing episiotomies, considering that the episiotomy rate in the United States is currently around 35%. In some Latin American countries and also Taiwan, it is accepted practice to do an episiotomy on all first time mothers; here the rates are close to 90%. China, Spain, South Africa and Turkey also report extremely high episiotomy rates ranging from

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60% to almost 90%. Whereas Sweden's rate is a low 9.7%. New South Wales (NSW) health department actually publishes the individual statistics of every maternity hospital in the state. Episiotomy rates can vary from 3% to 43% depending on the hospital

METHODS

The study was explained to the staff nurse who were selected by non-probability Purposive sampling technique. Informed consent was taken before starting the study. Pre-test was taken to the staff nurse by applying self-assisted knowledge questionnaire with demographic questionnaire and they were requested that they must follow the instructions of the questionnaire. The information Booklet was given on 1st day. 7th day-The post test was conducted on by administering the same self-assisted knowledge questionnaire to determine the effectiveness of the Information Booklet on prevention and management of perineal tear among staff nurses. The duration of data collection for each sample was 40 50 minutes and approximately 10 samples per day were approached.

DATA ANALYSIS AND INTERPRETATION-

Table-1 depicting pre-test score with selected demographic Variable among staff nurses

Level of knowledge	No. of Staff Nurses	Percentage
Adequate Knowledge	1	3.3%
Moderate knowledge	21	70.0%
Inadequate knowledge	8	26.7%
Total	30	100%

Shows the pre test level of knowledge of prevention and management of perineal tear among staff nureses. In general 70% of staffs were having moderate knowledge and 26.7% of them having inadequate knowledge and 3.3% of them were having adequate knowledge.

Table-2 depicting post-test score with selected demographic Variable among staff nurses

Level of knowledge	No. of Staff Nurses	Percentage
Adequate Knowledge	23	76.7%
Moderately adequate knowledge	7	23.3%
Inadequate knowledge	0	0%
Total	30	100%

Shows the posttest level of knowledge of prevention and management of perineal tear among staff nurses. In general none of them were having inadequate knowledge and 23.3% of them having moderate knowledge and 76.7% of them were having adequate knowledge.

CONCLUSION

- The level of knowledge of prevention and management of perineal tear among staff nurses. Before Information Booklet, 26.7%of the girls were having inadequate level of knowledge score, 70% of them having moderate level of knowledge score and 3.33% of them were having adequate level of knowledge score.
- After Information Booklet, none of the girls were having inadequate level of knowledge score, 23.3% of them having moderate level of knowledge score and 76.7% of them were having adequate level of knowledge score.
- In each area wise pre-test percentage of knowledge of prevention and management of perineal tear among staff nureses. They were having maximum knowledge in prevention (61.66%) and minimum knowledge score in management (52.00%).
- In post-test percentage of knowledge of prevention and management of perineal tear among staff nureses. They were having maximum knowledge in management (86.23%) and minimum knowledge score in prevention (80.00%).
- The comparison of overall knowledge score, before and after the administration of Information Booklet. On an average Staff Nurses were improved their knowledge from 16.40 to 25.04 after the administration of Information Booklet. This difference is statistically significant.
- On an average, in posttest after having Information Booklet, Staff Nurses were gained 28.81% more knowledge score than pretest score. Hence the H1 is accepted.
- The result shows there is no significance association between the Pre test Level of knowledge on prevention and management of perineal tear among staff nurseand their demographic variables. Hence the H2 is rejected.

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Keywords: Perineal Tear, Prevention, Management, Knowledge, Staff Nurses, Information Booklet.

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