

Effectiveness of video assisted teaching programme on knowledge, attitude, and practice regarding Leukorrhea and its remedial measures among women within their reproductive age group (15-45 years)

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Abstract- In women, those years of life between menarche and menopause, roughly from ages 12 to 49 years. The term is imprecise, since some women can become pregnant and bear children at younger or older ages. In men, those years between the onset of puberty and loss of fertility. One group, pre-test and post-test design was adopted. A structured self-administered questionnaire was prepared. The data was collected from 60 reproductive age group women admitted in SMIH Dehradun using non-probability purposive sampling techniques. The video assisted teaching programme demonstrated significant effectiveness in improving knowledge, attitude and practices related to leukorrhea and its remedial measures among women of reproductive age. There have been changes in the practices related to leukorrhea and its remedial measure and it takes time to adopt the practice permanently.

Keywords: Knowledge, Attitude, Practice, effectiveness, video assisted teaching, Leukorrhea, Remedial measures, Reproductive age group.

INTRODUCTION

Women's reproductive health refers to the overall health of the female reproductive system. It encompasses all aspects of the female representative system, including the ovaries, fallopian tubes, uterus, Cervix Vagina, Breasts and external genitalia. Reproductive health is critical for the overall well-being of women, as it can have a significant impact on their physical, emotional and social health.

During the reproductive age, which typically starts at puberty and continues until menopause, Women experience a range of reproductive health issues. These can include menstrual problems, sexually transmitted infections, contraceptive methods, infertility, pregnancy, childbirth and menopausal issues. (1)

One of the main causes of illness in developing nations is reproductive tract infections, which can be brought on by any one of the three main causes—iatrogenic, endogenous, or sexually transmitted—or by a combination of them. Although the disease has a wide range of symptoms, abnormal vaginal discharge, also known as leukorrhea, is the one that women report experiencing the most frequently. Numerous community-based studies conducted in developing nations have demonstrated that women have been silently enduring this morbidity and general ill health due to a variety of factors, including cultural restrictions, gender inequality, a lack of women's autonomy, a lack of awareness, inadequate infrastructure, and counselling services that are specifically focused. (2)

Research has often shown that women who reported vaginal discharge lacked clinical RTI proof. Because of the stigma in the culture, the symptoms are more well-known and cause more concern. Often, women seek medical attention only in cases where there has been a noticeable increase in secretion or when they are afraid of getting a dangerous STD.

In India, a wide array of local terms are used to describe this symptom, which is taken seriously by both men and women, even in cases where the discharge is not indicative of any pathology. While there has been considerable research on genital secretions among men from anthropological, medical, and clinical perspectives, literature on women remains limited. Various local terms used in northern India for this symptom include safedpanni (white water), dhatu, dholapani, swedpradhar, sharer dhovay, and dhatjaye, often accompanied by physical symptoms like weakness, dizziness, and burning sensations in the extremities, as well as significant social stress and menstrual concerns. Factors such as depression, verbal abuse, sexual violence, worries about a husband's infidelity, low social integration, and autonomy have also been linked to this condition.(3)

Women may sometimes complain of a clear white or mucoid discharge other than prior to menses or at mid cycle. Such discharges may originate from the vagina, ovaries, fallopian tubes or most commonly the cervix. It represents desquamation of vaginal epithelial cells because of the effects of oestrogen on the vaginal mucosa. A woman who has increased whitish discharge will experience weakness and lethargy. It is seen as thick and sticky white coloured discharge from the vagina between the periods. It can also be accompanied by headache for some women. Due to frequent discharge, there may be pain in the calf muscle and in the lumbar region.(4)

Over 95% of women and all surveyed health-workers were unaware of the association between leukorrhea and STDs. 68% of women surveyed had experienced leukorrhea. Over 80% of women diagnosed with an STD sought medical treatment after waiting at least one month, citing distance, belief that the symptom would clear up, and not finding the symptom severe as reasons. All health-workers considered the husbands a significant factor preventing adequate treatment of women.(5)

MATERIAL AND METHODS

Research Approach

An quantitative research approach was adopted for this study.

Research Design

Pre-Experimental Design (One group pre-test post-test design)

Setting

The current research was done in SMI Hospital Dehradun, Uttarakhand.

Population

In the present study, the population consists of all the women of reproductive age group.

Samples

The sample of present study consist of all the women of reproductive age group who comply with the requirements.

Sampling Technique

In the present study, all the samples who fulfill the inclusion criteria are recruited using the non-probability purposive sampling technique.

Sample Size

The calculated sample size was 60 women of reproductive age group.

Development and description of Tool

Section A: Demographic Data

It contains 7 items for obtaining information which includes Age, Education, Occupation, Marital status, Nutritional habits, Locality, Source of information.

Section B: Knowledge questionnaire

This section consist of questions to assess the level of knowledge regarding leukorrhea and its causes/ risk factors, clinical manifestation, management, and prevention among women of reproductive age group in selected hospital of Dehradun. The total number of questions were 30.

Scoring Procedure

For the convenience, the level of knowledge of women regarding leukorrhea was divided into Adequate, Moderate, and Inadequate.

Maximum score: 30

Minimum score: 0

The scoring for each response is: Correct response 01 mark and incorrect responses 00 marks\

Level of knowledge	score
Adequate	21-30
Moderate	11-20
Inadequate	0-10

Section C: Attitude scale

This section consists of scale questionnaire to assess the level of attitude regarding leukorrhea among women. The total number of questions is 12.

Maximum score: 60

Minimum score: 12

SCORING PROCEDURE:-

Likert scale –

Strongly positive- 5 points

Positive- 4 points

Neutral- 3 points

Negative- 2 points

Strongly negative- 1 point

Mean score interpretation

Positive attitude - 4.00-5.00

Neutral attitude – 2.50-3.99

Negative attitude – 1.00-2.49

Practice Checklist

This section consists of checklist questionnaire to assess the practice regarding leukorrhea and reproductive age group women. The total number of questions is 8.

SCORING PROCEDURE -

Yes: 1point

No: 0 point

Interpretation

- 8 score : Excellent leukorrhea management practice
- 5-7 score: Good leukorrhea management practice
- 1-4 score: Fair leukorrhea practice
- 0 score: Poor leukorrhea management practice

RESULT

The results shows that out of 100%, 46.6% were 31-38 years age group women have adequate awareness regarding leukorrhea and its remedial measures due to greater health literacy and exposure. According to education 61.66% women were graduated, 33.33% were attained secondary education, and 5% of women attained primary education, women with higher education or secondary education have better knowledge of leukorrhea. According to occupation of women 70% were unemployed, 15% were self employed and employed. According to marital status 85% were married, 13.3% were unmarried, 1.6% were separated/ divorced. According to nutritional habits 63.33% were vegetarian and 36.66% were non vegetarian. According to residence 53.33% were from rural area and 46.66% were from urban area. Based on source of information 50% of them were having friends and relatives as a source of information, 13.33% with books/posters as a source of information, 20% with mass media as a source if information, 5% with health personnel as a source of information, 11.6% of women had no source of information.

To analyze the difference in the knowledge within groups paired t test was used. The difference in knowledge scores pre Mean & SD 15.88 ± 3.39 and post Mean & SD 26.26 ± 2.35. It was found that P value was less than 0.05 which implies statistical improvement in Knowledge.

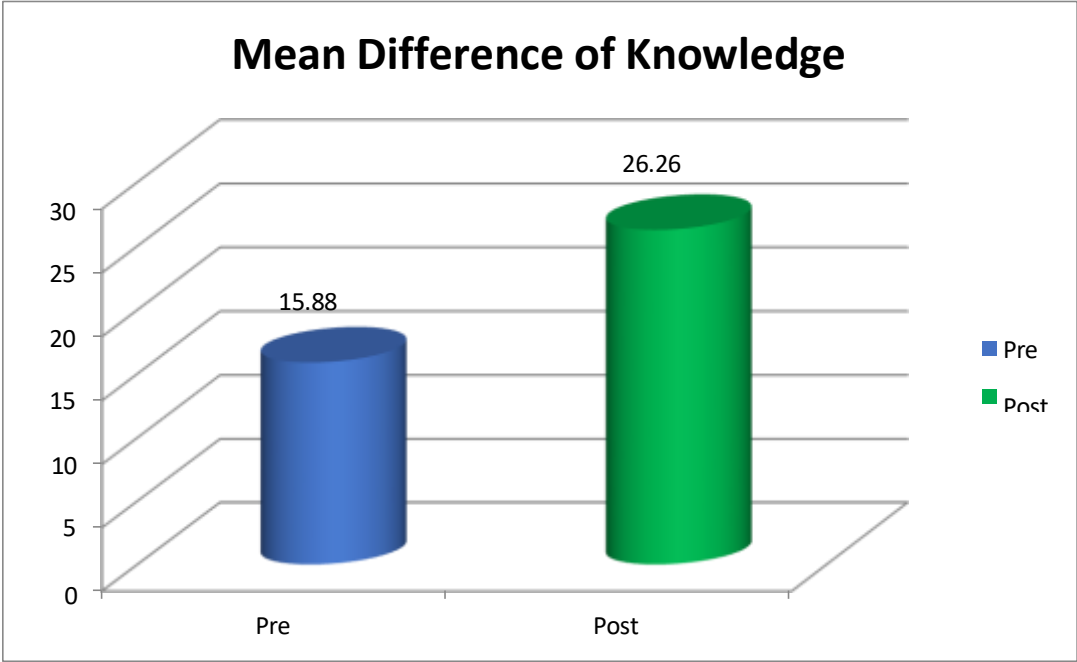


Fig 1:- A cylindrcal bar graph showing the pre-test and post-test knowledge score regarding effectiveness of video assisted teaching programme regarding leukorrhea and its remedial measures among reproductive age group women

To analyze the difference in the Attitude within groups paired t test was used. The difference in Attitude scores pre Mean & SD 41.36 ± 5.32 and post Mean & SD 51.11 ± 3.75.

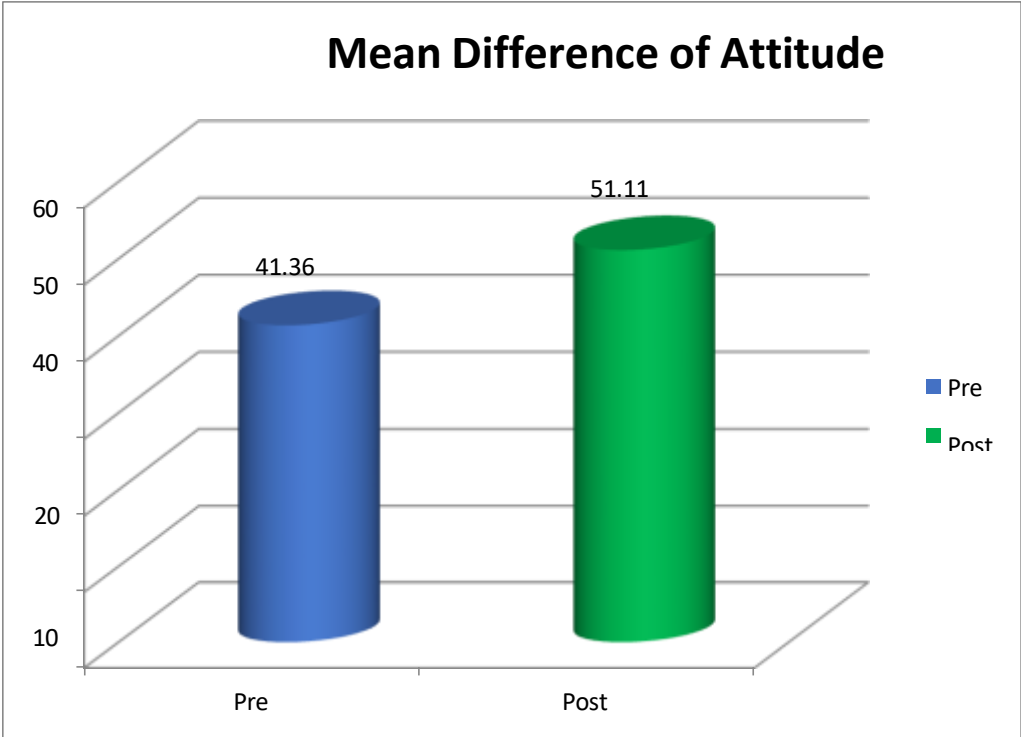


Fig. 2:- Cylindrical bar graph showing the mean difference of pre-test and post-test attitude score regarding effectiveness of video assisted teaching programme regarding leukorrhea and its remedial measures.

To analyze the difference in the Practice within groups paired t test was used. The difference in Practice scores pre Mean & SD 7.08 ± 0.979 and post Mean & SD 7.71 ± 0.523.

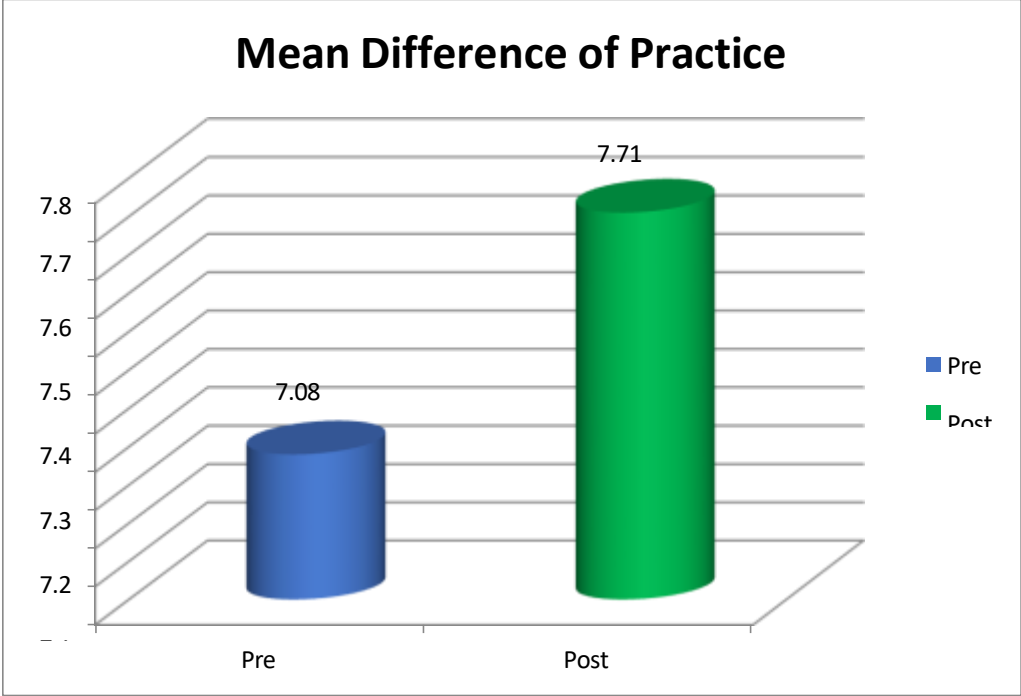


Fig 3:- Cylindrical bar graph showing the mean difference of pre-test and post-test practice score regarding effectiveness of video assisted teaching programme on leukorrhea and its remedial measures.

DISCUSSION

OBJECTIVE 1: To assess the level of knowledge on leukorrhea and its remedial measures among women within their reproductive age group.

It illustrate that 10% of women were having inadequate knowledge in pre-test, 86% of women were having moderate knowledge, and 3% of them were having adequate knowledge. After intervention, 0% of women falls into the category of having inadequate

knowledge, 3% of women falls into the category of having moderate knowledge, and 95% of women falls into the category of adequate knowledge. The intervention led to significant increase in level of knowledge.

Supportive study:-

Sathiyabama G., et. al. 2020. This study was conducted to assess the knowledge regarding leucorrhea among women residing at Kondancheri Thiruvallu. The objectives of the study were, To assess the demographic variable of the women with leukorrhea. To assess the knowledge among women with leukorrhea. To assess the association between the demographic variables and knowledge about the women with leukorrhea. A cross sectional research design was used in the study. Total 60 samples were selected according to the age group of 30 to 60 years by using a simple random sampling technique. Data were collected using a self structured questionnaire. Results: Majority of women had inadequate knowledge among leukorrhea. The mean score (84.3) and standard deviation score (13.46) shows there was the statistically significant association between demographic variable with leukorrhea among the women.(6)

OBJECTIVE 2: To assess the attitude on leukorrhea and its remedial measures among women within their reproductive age group.

It represents that 60% of women were having positive attitude towards leukorrhea and its remedial measures, 40% of women were having neutral attitude and 0% of women having negative attitude towards leukorrhea and its remedial measures in pre-test. After intervention, 86.6% of women falls into the category of having positive attitude, 13.3% of women falls into the category of neutral attitude and 0% of women falls into the category of negative attitude. The intervention led to significant positive shift in attitudes.

Supportive study:-

Krisdayanti, Nabila et al., 2021. Conducted a study on knowledge, attitude, and personal hygiene behaviours with pathological leukorrhea in adolescent girls at SMK' Aisyiyah Palembang. According to research, 75% of women worldwide have experienced leukorrhea. This study used an analytical cross-sectional design and a simple random sampling method with 92 respondents. The results indicated a statistical significance between pathological leukorrhea and knowledge (p-value 0.004), attitude (p-value 0.001), and personal hygiene behaviour (p-value 0.001). Multivariate analysis revealed that the bad personal hygiene behaviour variable (p-value 0.018) was the most determinant associated with pathological leukorrhea (PR = 3.305, 95 per cent confidence interval. Conclusion: persistently bad personal hygiene practices may increase the risk of pathological leukorrhea in adolescence girls. Suggestion of young women to reduce reliance on pantyliners, wear sweat-absorbing underwear, and avoid tight underwear.(7)

OBJECTIVE 3: To assess the practice on leukorrhea and its remedial measure among women within their reproductive age group.

Data shows that 45% of women were practicing excellent level of hygiene to prevent from leukorrhea, 55% of women were practicing good level of practices, 0% women were practicing fair and poor practices. After intervention 76.6% of women falls into the category of performing excellent practices, 23.3% of women falls into the category of performing good hygiene practices and 0% of women falls into the category of performing fair and poor hygiene practices. This shows significant increase in the practice scores.

Supportive study:-

Rakhmilla,et.al., 2016. This study was conducted to assess Knowledge, Attitude, and Practice about Vaginal Discharge on School-Age Girls in Jatinangor Senior High School. Vaginal discharge, commonly known as leukorrhea, is a physiological condition which happens in female reproductive periods. A descriptive cross-sectional design was used with cluster sampling of 164 school-age girls taken from government school of Jatinangor on June 2013. The data of knowledge about leukorrhea on school-age girls, their attitude and practice regarding the prevention of leukorrhea were collected by using questionnaires which have been tested and validated. Based on the questionnaire, the results show that school-age girl's knowledge about leukorrhea is low. The attitudes and practice regarding the prevention issue and the management about leukorrhea are good. The conclusion in this study is that respondents lack knowledge about leukorrhea while they have a good attitude and do good practices regarding the prevention of leukorrhea diseases. Based on the results in this study, health workers are recommended to educate school-age girls about features, physiological causes, prevention, and management of leukorrhea.(8)

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