

A Study to Assess the Effectiveness of a Structured Teaching Programme on Knowledge of Primary Caregivers of Patients with Dementia of Alzheimer's Type (DAT) regarding Activities of Daily Living(ADL) in Different Family Settings at Tumkur

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Abstract:- The mother is mainly responsible for caring the infant and the father figure is also important. The heavy demand made by the infant is successfully fulfilled if the child is wanted & loved by both the parents. The state of affairs in which the child does not have this relationship with mothers termed a "maternal deprivation". **Method :**The research design used in the present study was descriptive research design. The study was conducted in Bapuji orphan Home Tumkur. The sample for the present study is composed of 50 orphan children residing in an orphan home. Non-probability convenient sampling technique was used to select the samples. A structured interview schedule was used to assess the anxiety level and depression level among orphan children. The tool used for collection of data was structured interview schedule, which consists of socio-demographic variables, anxiety rating scale and depression rating scale. **Results:** The findings revealed that socio-demographic variables age, sex, religion, class of study, duration of institutionalization, reason for institution, channel of admission, and information regarding orphan home were not significant to anxiety and depression level. The calculated chi- square value was less than the table at $p > 0.05$ hence there was no significant association between anxiety level and depression level and socio-demographic variables. **Interpretation and conclusion** The data was analysed by applying descriptive and inferential statistics. The results of the study indicated that there was no significant association between anxiety score and depression score and socio-demographic variables.

I. OBJECTIVES OF THE STUDY

- To assess the selected behavioural problems of orphan children.
- To identify the association between behavioural problems and selected sociodemographic variables.
- To develop comprehensive nursing intervention package for orphan children.

II. METHODOLOGY

Research methodology is a way to systematically solve the research problem. The role of methodology consists of procedures and techniques for conducting a study

A. Research Approach:

The selection of research approach is the basic procedure for the conduct of research enquiry. Research approach tells the researcher about what data to collect and how to analyze it. In view of nature of the problem selected and objectives to be accomplished, an evaluative approach was considered appropriate for the present study.

B. Research Design:

The selection of the design depends upon the purpose of the study, research approach and variables to the studied. The research design selected was descriptive research design.

C. Setting of the Study

A study was conducted in a Bapuji orphan home Tumkur. The researcher selected this setting for the following reasons.

- Availability of the samples.
- Economic feasibility for conducting the study.

D. Population

The population for this study was orphan children of selected orphan home in Tumkur.

E. Sample and sampling technique

➤ Criteria for selection of samples:

The Primary Caregivers who satisfy the inclusive criteria were selected for the study.

• Inclusion Criteria:

- ✓ Orphan children who are in the age group of 6-16 years in selected orphan home.
- ✓ Orphan children who are willing to participate in the study.
- ✓ Orphan children who speak Kannada.

Exclusion Criteria:

- ✓ Orphan children who are not available during the study.

Sampling Technique

Non-probability convenient sampling technique was used to select the samples.

Sample Size

The sample for the present study composed of 50 orphan children residing at Bapuji orphan home in Tumkur, Karnataka.

Development of the Tool

The interview technique was thought to be the best way to collect data in the present study. In interview technique person asks questions to another person. This is face to face interaction which permits to clarify certain matters on the spot and also enables the interview to modify the questions to the understanding level of the subjects. Hence a structured interview schedules is used to assess the anxiety level and depression level among orphan children.

- The structured interview schedule consists of three parts which are as follows:

Section-A: Socio-Demographic data:

Section-B: Anxiety rating scale

Section-C: Depression rating scale

III. RESULTS AND ANALYSIS

Presentation of Data

Analysis and interpretation of the data are organized under the following headings.

- Section A: Findings related to analysis of socio-demographic variables of respondents.
- Section B: Findings related to area wise categorization of anxiety level of respondents.
- Section C: Findings related to area wise categorization of depression level of respondents.
- Section D: Findings related to anxiety level of respondents
- Section E: Findings related to depression level of respondents.
- Section F: Findings related to association between the level of anxiety with selected socio-demographic variables.
- Section G: Findings related to association between the level of depression with selected socio-demographic variables.
- SECTION-A-Distribution of the subjects according to socio-demographic Variables

Demographic variables		No. of CARE GIVERS (nos)	Percentage %
Age	31-40 years	12	40.0
	41-50 years	18	60.0
Gender	Male	9	30.0
	Female	21	70.0
Educational status	Secondary	11	36.7
	Higher secondary	6	20.0
	Diploma	3	10.0
	Degree	10	33.3
Marital status	Married	20	66.7
	Unmarried	10	33.3
Occupation	Housewife /domestic	17	56.7
	Govt.job	4	13.3
	Private company	6	20.0
	Business	3	10.0
Income per month	Less than Rs 10000	12	40.0
	Rs 10000 to15000	7	23.3
	More than Rs15000	11	36.7

Table 1:- Demographic Profile (N=30)

Table 1: shows the frequency and percentage distribution of orphan children according to socio demo graphic variables as follows. Majority 24(48%) of the respondents were having 0-2years duration of institutionalization, 14(28%) respondents were having 2-4years duration of institutionalization, 9(18%) respondents were having 4-6years duration institutionalization and 3(6%) respondents were having 6years and above duration of institutionalization.

➤ Section B: Findings related to area wise categorization of anxiety level of respondents

Areas of anxiety rating scale				
S. No	AREAS	MEAN	MEAN %	SD
I	Physical areas	11.56	64.22	2.251
II	Psychological areas	12.48	69.33	2.451
III	Social areas	7.22	60.16	1.706
	TOTAL	31.26	65.13	3.730

Table 2:- Area wise categorization of anxiety level of respondents n=50

Table 2: Depicts area wise categorization of anxiety level with respondents. An item related to physical areas has the mean % of 64.22, a psychological area has the mean % of 69.33 and in social areas the mean % was 60.16.

➤ Section C: Findings related to area wise categorization of depression level of respondents

Areas of depression rating scale				
S. No	AREAS	MEAN	MEAN %	SD
I	Physical areas	9.64	64.27	1.758
II	Psychological areas	14.58	69.42	2.516
III	Social areas	8.04	67.00	1.829
	TOTAL	32.26	67.21	3.890

Table 3:- Area wise categorization of depression level of respondents (n=50)

Table 3: Depicts area wise categorization of depression level with respondents. Items related to physical areas has mean % of 64.27; psychological areas has the mean % of 62.07 and in social mean % of 67.21%.

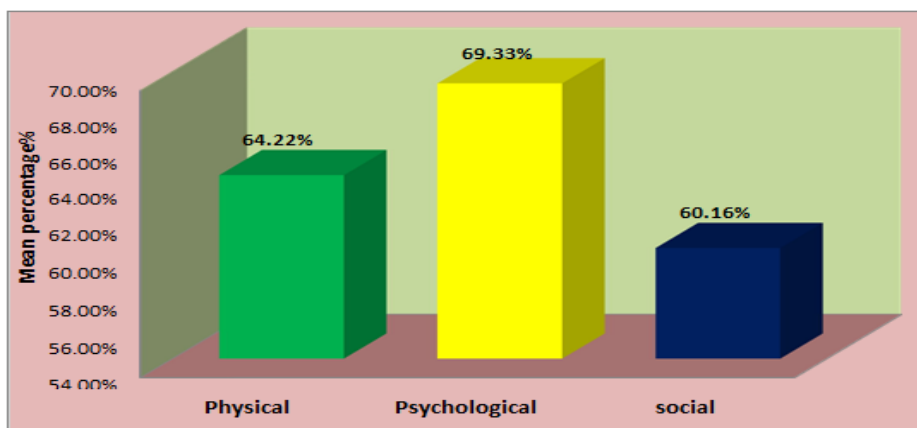


Fig 1:- Area wise categorization of anxiety level of respondents

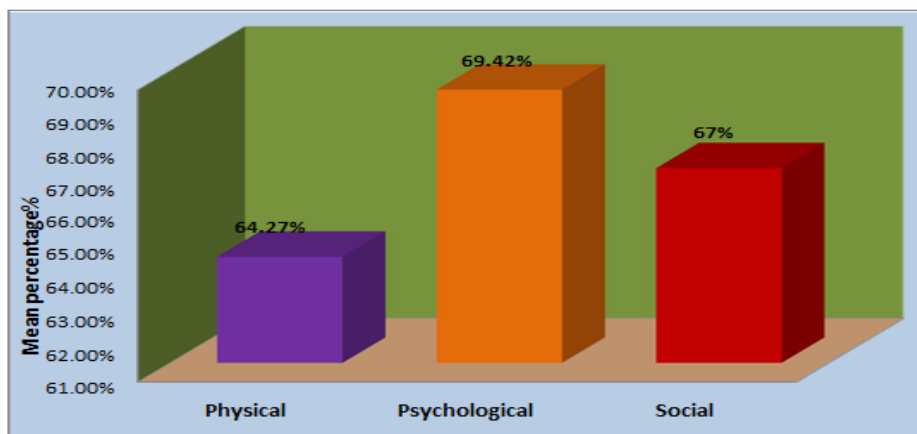


Fig 2:- Area wise categorization of depression level of respondents

➤ Section D: Findings related to anxiety level of respondents.

S. No	Category	Anxiety score	Frequency (f)	Percentage (%)
1	Mild anxiety	0-24	3	6
2	Moderate anxiety	25-36	42	84
3	Severe anxiety	>37	5	10

Table 4:- Distributions of respondents according to their anxiety level n=50

The above table shows anxiety level has categorized into mild, moderate and severe anxiety. Majority of respondents 42(84%) had moderate anxiety, 5(10%) respondents had severe anxiety and 3(6%) respondents had mild anxiety.

It was inferred that the majority of respondents were had moderate anxiety. Graphic distribution of data is presented in the form of figure – 13

➤ Section F: Findings related to depression level of respondents

S. No	Category	Depression score	Frequency (f)	Percentage (%)
1	Mild depression	0-24	2	4
2	Moderate depression	25-36	40	80
3	Severe depression	>37	8	16

Table 5:- Distributions of respondents according to their depression level n=50

The above table shows depression level has categorized into mild, moderate and severe depression. Majority of respondents 40(80%) had moderate depression, 8(16%) respondents had severe depression and 2(4%) respondents had mild depression.

It was inferred that, majority of respondents were had moderate depression. Graphic distribution of data is presented in the form of figure – 1-4

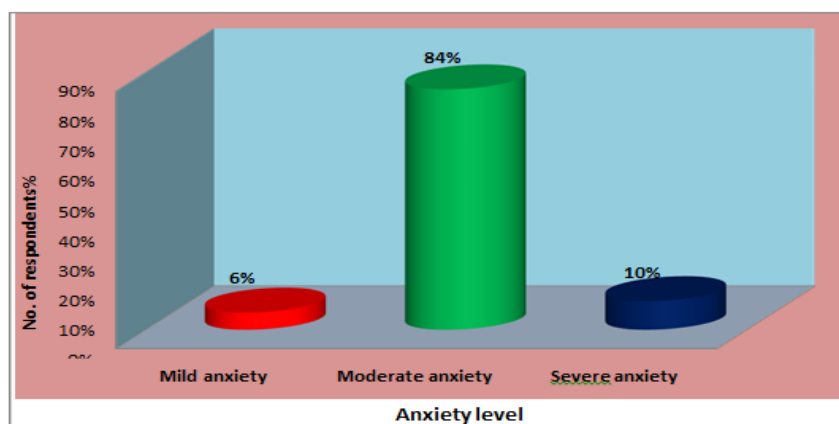


Fig 3:- Distributions of respondents according to their anxiety level

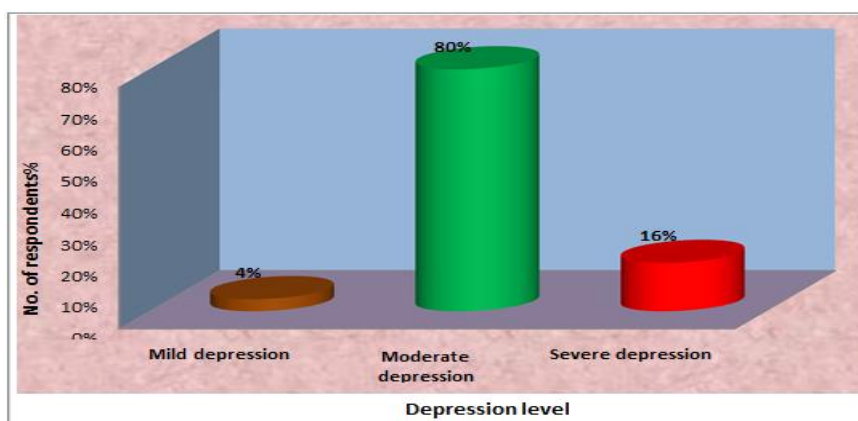


Fig 4:- Distributions of respondents according to their depression level

➤ Section F: Findings related to association between the level of anxiety with selected socio-demographic variables.

Variables	Categories	Anxiety		(x ²)	Df	P value Significance
		Above median	Below median			
1. Age	6-9yrs	4	8	4.06	2	5.99 NS
	9-12yrs	12	6			
	12yrs and above	8	12			
2. Sex	Male	14	19	1.209	1	3.84 NS
	Female	10	7			
3. Religion	Hindu	22	22	0.588	1	3.84 NS
	Musulim	2	4			
4. Class of study	1 st - 3 rd standard	4	8	5.156	2	5.99 NS
	3 rd - 7 th standard	13	6			
	8 th - 10 th standard	7	12			
5. Duration of instutionalization	0-2yrs	13	11	3.203	3	7.82 NS
	3-4trs	7	7			
	4-6yrs	2	7			
	6yrs and above	2	1			
6. Reason for institution	Death of parents	17	20	1.509	3	7.82 NS
	Divorce of parents	3	4			
	Missing from family members	1	0			
	Poverty	3	2			
7. Chanel of admission	Voluntary	2	2	1.820	3	7.82 NS
	Friends	0	1			
	Relatives	18	21			
	Social organization	4	2			
8. Source of information	Mass media	2	4	1.367	3	7.82 NS
	Relative	17	19			
	Self reading	1	1			
	Some other source	4	2			

Table 6:- Association of level of anxiety with selected socio-demographic variables n=50
NS – not significant at P>0.05 level

The data in the above table indicates the socio-demographic variables such as age, sex, religion, class of study, Duration of institutionalization, Reason for institution, channel of admission, and information regarding orphan home were not significant to anxiety score.

The above table shows that the calculated chi- square value was less than the table at p> 0.05 hence there was no significant association between anxiety score and selected socio-demographic variables.

➤ Section G: Findings related to association between the level of depression with selected socio-demographic variables.

Variables	Categories	Depression		(x ²)	Df	P value Significance
		Above median	Below median			
1. Age	6-9yrs	8	4	0.825	1	3.84 NS
	9-12yrs	9	9			
	12yrs and above	11	9			
2. Sex	Male	16	7	2.225	1	3.84 NS
	Female	12	5			
3. Religion	Hindu	26	18	1.422	1	3.84 NS
	Musulim	2	4			
4. Class of study	1 st - 3 rd standard	8	4	1.156	1	3.84 NS
	3 rd - 7 th standard	11	8			
	8 th - 10 th standard	9	10			
5. Duration of insttutionalization	0-2yrs	14	10	0.687	3	7.82 NS
	3-4trs	8	6			
	4-6yrs	4	5			
	6yrs and above	2	1			
6. Reason for institution	Death of parents	22	15	1.976	3	7.82 NS
	Divorce of parents	3	4			
	Missing from family members	1	0			
	Poverty	2	3			
7. Chanel of admission	Voluntary	3	1	4.030	3	7.82 NS
	Friends	0	1			
	Relatives	20	19			
	Social organization	5	1			
8. Source of information	Mass media	3	3	1.736	2	5.99 NS
	Relative	18	18			
	Self reading	2	0			
	Some other source	5	1			

Table 7:- Association of level of depression with selected socio-demographic variables. (n=50)
NS – not significant at P>0.05 level

The data in the above table indicates the socio-demographic variables such as age, sex, religion, class of study, duration of institutionalization, reason for institution, channel of admission, and information regarding orphan home are not significant to level of depression.

The above table shows that the calculated chi- square value was less than the table value at p> 0.05 hence there was no significant association between depression score and selected socio-demographic variables.

IV. DISCUSSION

This chapter discusses the major findings of the study and reviews them in relation to findings from the results of other studies. The aim of this study is to assess the anxiety and depression among orphan children and to develop comprehensive nursing intervention package to relive the anxiety and depression among orphan children.

❖ Organization of Findings

- Section A: Findings related to analysis of socio-demographic variables of respondents. Section B: Findings related to area wise categorization of anxiety level of respondents.
- Section C: Findings related to area wise categorization of depression level of respondents.
- Section D: Findings related to anxiety level of respondents Section E: Findings related to depression level of respondents.
- Section F: Findings related to association between the level of anxiety with selected socio-demographic variables.
- Section G: Findings related to association between the level of depression with selected socio-demographic variables.
- *Findings related to analysis of socio demographic variables of respondents*

- Majority of the respondents 20 (40%) were in the age group of 12 years and above, 18 (36%) respondents were between the age group of 9-12 years.
- Majority 33 (66%) of the respondents were males.
- Majority 44(88%) of the respondents were Hindu.
- Majority 19(38%) of the respondents were equally distributed in 5th-7th and 8th- 10th standard.
- Data represents that majority 24(48%) of the respondents were having 0-2years duration of institutionalization, 14(28%) respondents were having 2-4years duration of institutionalization.
- Majority of the respondents 37(74%) have come due to death of parents, 7(14%) respondents have come due to the divorce of parents, 5(10%) respondents have come because of poverty.
- Majority of the respondents 39(78%) were got admitted by their relatives, 6(12%) respondents were got admitted by social organization.
- Data indicates majority of respondents 36(72%) got information by relatives, equal distribution 6(12%) respondents got information through mass media and some other sources.

➤ *Findings related to anxiety level and depression level of respondents.*

The anxiety level has categorized into mild anxiety, moderate anxiety and severe anxiety. Majority of respondents 42(84%) had moderate anxiety, 5(10%) respondents had severe anxiety and 3(6%) respondents had mild anxiety. The depression level has categorized into mild depression, moderate depression and severe depression. Majority of respondents 40(80%) had moderate depression, 8(16%) respondents had severe depression and 2(4%) respondents had mild depression.

➤ *Findings related to association between the level of anxiety with selected socio- demographic variables.*

The present study showed that there was no significant association between anxiety level and socio-demographic variables such as age ($x^2=4.06$), sex($x^2=1.209$), religion($x^2=0.588$), class of study($x^2=5.156$), Duration of institutionalization($x^2=3.203$), Reason for institution($x^2=1.509$), channel of admission ($x^2=1.820$) and Information regarding orphan home($x^2=1.367$).

➤ *Findings related to association between the level of depression with selected socio- demographic variables.*

The present study showed that there was no significant association between depression level and socio-demographic variables such as age ($x^2=0.825$), sex ($x^2=2.225$), religion($x^2=1.422$), class of study($x^2=1.156$), Duration of institutionalization ($x^2=0.687$), Reason for institution($x^2=1.976$), channel of admission ($x^2=4.030$), and Information regarding orphanage home ($x^2=1.736$).

V. CONCLUSIONS

The present study assessed the effectiveness of a structured teaching programme on knowledge of Primary Caregivers of patients with Dementia of Alzheimer's Type regarding Activities of Daily Living. The overall knowledge of the subjects with pre test was found to be inadequate with highest mean percentage score observed was 35.22 and SD of 0.95 in general informational aspect and lowest mean percentage score was observed was 24.25 and SD was 0.97 in the area of recreation aspect and the post test highest mean percentage score observed was 65.22 and SD of 0.97 in the area related to general informational of the clients and the lowest mean percentage score was 60 and SD of 0.61 in the area related to dressing. The over all pre tests mean 15.70 and mean percentage score of 31.4 with SD of 3.19 and post test mean is 31.87 and mean percentage was 63.74 with SD of 3.51. So the knowledge of Primary Caregivers on patients with dementia has an enhancement of knowledge as observed by mean of 31.87, mean percentage score of 63.74 and SD of 3.51.

Study concluded that there was an enhancement of the knowledge of the Primary Caregivers and findings were not influenced by selected socio-demographic variables.

It concludes that Primary Caregivers feel obliged to show concern and provide maximum care at the home settings in contrary to lack of knowledge regarding the Activities of Daily Living of these clients.

This recommends a strong need towards creating awareness among Primary Caregivers of Dementia of Alzheimer's Type regarding Activities of Daily Living of the clients.

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