P-ISSN: 2456-8430

A Study to Assess the Knowledge and Practice Regarding Prevention of Falls Among Elderly at Navajeevan Vruddhashramam in Tirupati

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DOI: https://doi.org/10.52403/gijash.20230404

ABSTRACT

BACKGROUND: Falls among the elderly are one of the major causes of morbidity and mortality worldwide. They constitute the second leading cause of unintentional deaths after road-traffic accidents. The aim of the study was to estimate the prevalence of falls among the elderly and to investigate the factors that contribute to this phenomenon.

AND **METHODS: MATERIALS** Ouasi experimental one group pre and post-test design was used to assess the knowledge and practice of old age people regarding prevention of recurrent falls, over the age of 60, in Navajeevan Vruddhashramam, Tirupati. The sample under scrutiny was estimated to be 30 in total. The investigator developed questionnaires to assess the effectiveness of booklet on the knowledge and practice regarding prevention of falls among elderly at Navaieevan Vruddhashramam. The collected data was organized, tabulated, analyzed and interpreted by using descriptive and inferential statistics based on the objectives of the study and effectiveness of booklet was analyzed and interpreted by using descriptive and inferential statistics. the study

RESULTS Showed that Among 30 samples in pretest 47% (14/30) had average knowledge on prevention of recurrent falls. Among 30 samples in post -test (20/30) 67% have good knowledge on prevention of recurrent falls. The mean score was observed was 9.93 and post means score is 22.3 by applying the

T test, the calculator value is 11.28 and T-value is 2.0017. So that by obtained "t" value was highly significant at p < 0.05 level. The conclusion drawn from the study information

booklet was more effective on prevention of recurrent falls among elderly people.

KEY WORDS: falls, old age people, booklet, knowledge and practice

INTRODUCTION

You must be humble enough to love, so that you will touch the hearts of others and make them think of you with love. It is better to be forgotten entirely than to be remembered without love. According to the United Nations the word old age is defined an age person as one who is 60years and above. Generally, people above age of 60 years are considered as senior citizens. Indian people between 60-75 years are categorized as "young old" between 75-85 years as "oldold" and people above the age of 85 years are classified as "very old" or inferno. There is marked difference in the health needs of these age groups. Ageing is a universal phenomenon old age is not in itself a disease but is a normal part of the human life span. Ageing is normal, universal, progressive, irreversible process. It is an inevitable physiological phenomenon. The human life span follows a recognized pattern birth to death. Then there is a gradual deterioration in physical and mental abilities. As the ageing process progress mental capabilities such as memory and physical abilities further deteriorate.

Nearly 72% of elderly live in rural and half of these are below poverty line. The remaining 28% of elderly live in urban areas. Further, about 90% of old person in

India, are from unorganized sector. Around 10% of elderly belong to organized sector that have access to some distinct benefits like service pensions and health care facilities in the shape of CGHS, etc. The implication of ageing populations is earmark lot of budgets to deal with their needs and problems. It is also adding on to dependent population in India.

STATEMENT PROBLEM:

A study to assess the knowledge and practice regarding prevention of falls among elderly at Nava Jeevan Vruddhashramam in Tirupati.

OBJECTIVES:

- 1. To assess the knowledge and practice of old age people regarding prevention of recurrent falls.
- 2. To deliver booklet information regarding prevention of recurrent falls among old age people
- 3. To re assess the knowledge and practice of old age people regarding recurrent prevention of falls
- 4. To associate the knowledge and practice scores with their selected demographic variables

Operational Definitions

- a) **Evaluation:** In this study evaluation refers to the process used to signify differences between pretest and post-test scores, of family members regarding care of old age person.
- b) **Effectiveness:** In this study effectiveness refers to the significant differences in the pretest and post-test knowledge scores on selected aspect of care of old age health problems among family members.
- c) Planned teaching programme: In this study planned teaching programme refers to a planned health education regarding knowledge on care of selected old age health problems such as hypertension, arthritis, cataract & diabetic mellitus among family members, developed by investigator.

- d) **Knowledge:** In this study knowledge refers to the correct responses given by family members about care of old age health problems.
- e) **Old Age People:** In this study, old age people refer to persons who are aged 60 years & above, of both sexes.
- f) Falls: A fall is defined as an event which results in a person coming to rest inadvertently on the ground or floor or other lower level. Fall-related injuries may be fatal or non-fatal though most are non-fatal.

HYPOTHESIS:

Null hypothesis:

Ho: There will not be statistically significant difference between the knowledge and practice regarding prevention of falls among old age people.

Research hypothesis:

H₁: There will be statistically significant effect of knowledge and practice regarding prevention of falls among old age people.

H2: There will be statistically significant association between selected demographic variables among old age people regarding prevention of falls.

DELIMITATIONS:

- The study is delimited to 6 weeks of data collection period only.
- The study is delimited to Nava Jeevan am vrudhashram, Tirupati.
- The study is delimited to 30 samples

PROJECTED OUTCOME:

The result of the study would be determining the knowledge and practice regarding prevention of falls among elderly at Navajeevan vruddhashramam

DETAILED RESEARCH PLAN

Research Approach: Descriptive Approach.

Research Design: Quasi experimental one group pre and post-test research design.

Research Setting: The setting of the study was conducted in area of Navajeevan vruddhashramam

Sampling Technique: Non probability convenience sampling techniques was adopted for selection of the subjects.

Sample Size: The sample size of the study is (30)

Data collection procedure: Pretest was done by asking questionnaires and on the day for about all one hour thirty minutes for providing the structured teaching programme (providing booklet). After one week Post test has been collected/conducted through Questionnaires.

Description of the tool

The investigator developed diabetes questionnaires to assess the effectiveness of booklet on the knowledge and practice regarding prevention of falls among elderly at Navajeevan vruddhashramam.

The tool for data collection consists of;

- a) It includes Demographic variables,
- b) It includes questionnaires

RESULTS AND DISCUSSION MAJOR FINDINGS OF THE STUDY

The study has proved that information and booklet is more effective on prevention of recurrent falls among elderly.

It indicates that the information booklet on prevention of recurrent falls among elderly hypothesis H0 is rejected and hypothesis H1 is accepted

- 1. 12 (40%) elders belong to 60 -65 years of age had the knowledge on prevention of recurrent falls.
- 2. 7 (23%) elders with primary educational status had the knowledge on prevention of recurrent falls.
- 3. 13 (43%) elders with no bad social habits had the knowledge on prevention of recurrent falls.
- 4. 5 (17%) elders with hypertension had the knowledge on prevention of recurrent falls.
- 5. 8 (27%) elders had the previous knowledge regarding falls.

Comparison of Mean and Standard deviation of Pre& Post Scores on prevention of falls among elderly. N=30

	N	Mean	Standard Deviation	T – Value
Pre-test Scores	30	9.933	3.15	P – Value
Post-test Scores				(< 0.05)
	30	22.33	4.72	Cal.11.28
				Tab. 2.007

Among 30 samples in pretest 47% (30/14) how average knowledge on prevention of recurrent falls. Among 37 samples in post-test (20/30) 67% have good knowledge on prevention of recurrent falls.

Table: Shows that three means score is observed as 9.93 and post means score is 22.3 by applying the T test calculator value is 11.2843 a T-value 2.0017

CONCLUSION

The conclusion drawn from the study information booklet was more effective on prevention of recurrent falls comparison of mean and standard deviation was found that there was a significant difference between information booklet on prevention of recurrent falls among elderly.

NURSING EDUCATION

Patient instructed on fall safety precautions includes: use assistive device for mobility at all times, make sure walkways are free of clutter, & well lit, do not walk around barefoot or in socks, avoid using rugs, use non slip rug in bath tub & use shower chair for bathing.

NURSING ADMINISTRATIONS

In administration level information booklet should be implemented in old age homes, they should take initiative to educate old age people to update the current information on improving the knowledge effects more of healthcare professionals.

NURSING PRACTICE

Nurse should extend the knowledge of prevention of recurrent falls among elderly.

NURSING RESEARCH

Nursing care is a task oriented and fragmented care but it demands the care to old age people in a scientific way selected of 30.

LIMITATIONS

- The study is limited to
- Those who will win to participate
- Elderly who could able to read and write in Telugu and English
- Those who were available during data collection

RECOMMENDATIONS

- Each old age home should develop standard step of prevention of recurrent falls among elderly
- Study can be conducted with the large sample size so that all the old age people will be able to gain more knowledge regarding prevention of recurrent falls in one time
- It is recommended that a probability sampling method should be used for further research with the view to select results that are representative of the population.

Declaration by Authors

Ethical Approval: Approved **Acknowledgement:** None **Source of Funding:** None

Conflict of Interest: The authors declare no conflict of interest

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How to cite this article: Jyothsna N. A Study to Assess the Knowledge and Practice Regarding Prevention of Falls Among Elderly at Navajeevan Vruddhashramam in Tirupati. Galore International Journal of Applied Sciences & Humanities. 2023; 7(4): 26-29. DOI: https://doi.org/10.52403/gijash.20230404
