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# A descriptive study to assess the knowledge regarding prevention of varicose vein among the school teachers in selected schools Jammu

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#### Abstract

Varicose veins are abnormally dilated, tortuous superficial veins caused by incompetent venous valves, commonly affecting the lower extremities. Teachers who spend prolonged periods standing are at increased risk of developing this condition due to increased venous pressure. This study aimed to assess the knowledge regarding the prevention of varicose veins among school teachers.

Varicose veins are a common venous disorder affecting the lower extremities, especially among professions requiring prolonged standing, such as teaching. Despite the prevalence of varicose veins, there is a lack of comprehensive studies focusing on the awareness and preventive measures among school teachers. This study aimed to assess the knowledge regarding the prevention of varicose veins among school teachers, with a focus on identifying gaps in knowledge and areas for potential educational interventions. A descriptive study was conducted among 80 teachers aged 30-50 years at Stephens International School, Jammu, using a self-structured knowledge questionnaire.

The questionnaire was designed to cover various aspects, including the causes, symptoms, risk factors, and preventive measures related to varicose veins. Participants were selected through purposive sampling. Data collection occurred over two months. Descriptive statistics, such as mean, median, and mode, were used to summarize the data, while inferential statistics, including chi-square tests, were employed to determine associations between knowledge levels and socio-demographic variables.

The result of the out of the total participants, 81.25% had average knowledge, 11.25% had poor knowledge, and only 7.5% had good knowledge regarding the prevention of varicose veins. A significant association was found between the level of knowledge and education status (P=0.0442), indicating that teachers with higher educational qualifications possessed better knowledge about varicose vein prevention. No significant associations were observed with other socio-demographic variables such as age, gender, and years of teaching experience.

Keywords: Varicose veins, prevention, knowledge, school teachers, occupational health

# Introduction

Varicose veins were first mentioned in Eber's papyrus, dating back to 1550 BC. Ebers papyrus is one of the earliest medical documents in recorded history. In a healthy vein, blood flows smoothly to the heart. The blood is prevented from flowing backward by a series of tiny valves that open and close to let the blood through them varicose veins are abnormally dilated, tortuous superficial veins caused by incompetent venous valves with reserved blood. Varicose veins develop when the small valves inside the veins stop working properly. It commonly occurs in the lower extremities, the saphenous vein, or the lower trunk, but can occur elsewhere in the body, such as the Esophagus. Varicose veins are very common in India, with over 10 million cases of the disease every year. Over 30% of the adults are estimated to suffer from this disease. Especially women are more likely to develop this disease than men. Varicose veins are a type of chronic venous disease, that commonly affects lower limb veins & known to have a higher prevalence among people who work in occupations requiring long standing such as among teachers, nurses, traffic police, security guards, & other Defense jobs it is the dilation of subcutaneous veins, three to four millimeter in diameter [1].

School teachers' faculties spent most of their time standing or walking. It increases pressure in the legs & veins. Therefore, there are chances of getting varicose veins due to prolonged periods of standing. & People especially female teachers who prefer high heels footwear are at high risk because there is always an additional strain on their legs due to high heels footwear. It causes blood circulation & blood pooling in their veins. The problem worsens if the person is overweight or pregnant Standing all day can cause blood to pool in the veins of your legs. They can make the veins enlarged and convolute over time. Varicose veins can become more rigorous over time and cause pain, swelling, and leg cramping. If left untreated varicose veins can lead to solemn health quandaries such as blood clots, ulcers & cell death. Standing for more than 4 hours per day at work may put professionals, such as teachers at risk for varicose veins but working in a location that requires a person to still all day can additionally increase the risk for varicose veins.

# Statement of the study

A descriptive study to assess the knowledge regarding prevention of varicose vein among the school teachers in Stephens International School Miran sahib Jammu".

- To assess the knowledge regarding the prevention of varicose veins among teachers in selected schools in Jammu.
- To find out the association with the selected demographic variables.

# Materials and Methods Research Approach

A quantitative research approach was adopted in this study.

## Research Design

A descriptive design was used in this study.

# Setting of the study

The study was conducted in Stephens international school Miran sahib Jammu, the reason for selecting Stephens International School Miran Sahib Jammu was availability of participants.

# **Population**

The population of the study was teachers.

## Sample

The teachers, who fulfils the inclusion criteria who were residing at the Stephens international school Miran sahib Jammu.

# Sample Size

The sample size was 60 teachers of Stephens International School Miran Sahib Jammu.

# **Sampling Technique**

Purposive sampling technique was used for the present study.

## Methods of data collection

- Part A: Socio-Demographic Variables In this study demographic variables. Which includes Age, Age, and Gender, marital status, education and diet.
- Part B: The Self-structured knowledge questionnaire consists of 27 questions which is used to assess the knowledge regarding the prevention of varicose veins among teachers of Stephens International School Miran Shib Jammu.

# Validity

"Validity refers to the degree to which an instrument measures what is to be supposed to be measuring" ~Polit and Hungler

The content of the instrument was validated by nursing and medical experts from the field of obstetrics and gynecology. To ensure the content validity of the tool, a self-structured questionnaire to assess the level of knowledge regarding the prevention of varicose veins among teachers in Stephens International School was submitted to experts. Self-structured tools were validated by the faculty of obstetrical and medical surgical department of Stephens College of Nursing Miran sahib Jammu. The tool was modified based on the suggestions given by the experts.

# Reliability

A tool can only be considered reliable if it measures an attribute with similar results on repeated use. Brown formula and calculated by Karl Pearson's co-efficient of correlation and this reliability is of half test. In this study reliability was checked by Spearmen's correlation reliability and reliability found for knowledge "self-structured questionnaire" values of r=0.727509.

# **Results and Discussion**

Table is showing the frequency and percentage distribution according to socio-demographic variables

According to the age, 66% of subjects were in the age group of 30-35 years, 21% were in the age group of 36-40 years, 9% of subjects were in the age group of 41-45 years, 9% were in the age group of 46-50 years. It can be seen that 87.5% of subjects were female and 12.5% were male. Distribution of subjects in relation to marital status, revealed that 21% were unmarried, 75% were married and 4% were widow. About 74% subjects were post graduate and 26% were graduate. About 36% were vegetarian and 64% were non-vegetarian. Majority of subjects i.e. 90% were not having any habit of alcoholism and smoking. About 36% subjects were having less than 5 year of teaching experience, 37.5% subjects were having 5-10 year of teaching experience, 17.5% subjects were having 11-15 year of teaching experience, 9% subjects were having more than 15 year of teaching experience. About 2% of subjects were taking class in sitting position while 98% were taking class in standing position. About 4% of subjects were acquire knowledge from family, 86% subjects acquire knowledge from mass media, 5% subjects acquire knowledge from health professional and 5% were having no information.

**Table 1:** Frequency and percentage distribution according to socio-demographic variables

	1	N=80				
S. No.	Socio-demographic data	Frequency (F)	Percentage (%)			
	Age (years)					
	30-35	53	66%			
1	36-40	17	21%			
	41-45	7	9%			
	46-50	3	4%			
	Gender					
	Male	10	12.5%			
2	Female	70	87.5%			
	Both genders equally	0	0%			
	Others	0	0%			
	Marital status					
	Unmarried	17	21%			
3	Married	60	75%			
	Widow	3	4%			
	Divorced	0	0%			
		Education				
4	Post graduate	59	74%			
· –	Graduate	21	26%			
	Diet					
5	Vegetarian	29	36%			
	Non-vegetarian	51	64%			
	Personal habits					
	Alcoholism	4	5%			
6	Smoking	2	2.5%			
	Both (a) and (b)	2	2.5%			
	None	72	90%			
		f teaching experience	7070			
	Less than 5 years	29	36%			
7	5 to 10 years	30	37.5%			
, <u> </u>	11 to 15 years	14	17.5%			
	More than 15 years	7	9%			
		used while taking class	770			
8	Sitting	2	2%			
·	Standing	78	98%			
		ce of information	7 0,0			
-	Family	3	4%			
9	Mass media	69	86%			
	Health professional	4	5%			
	No information	4	5%			

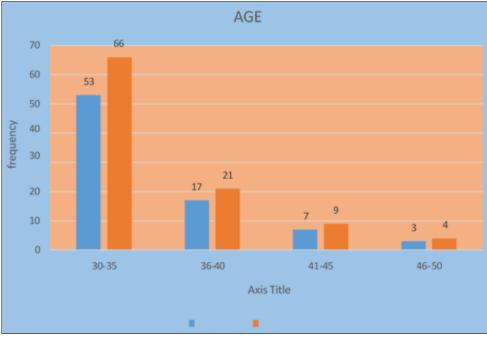


Fig 2: Showing frequency and percentage distribution of age

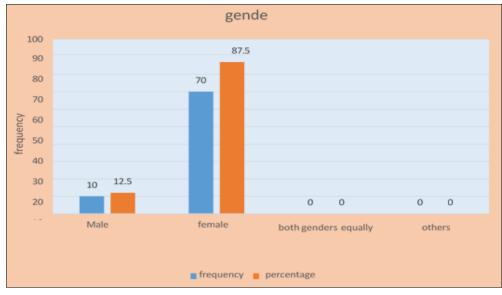


Fig 3: Showing frequency and percentage distribution of gender

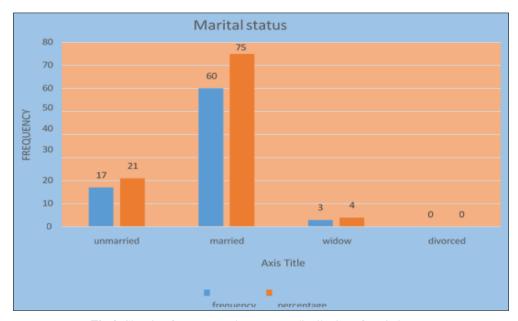


Fig 4: Showing frequency and percentage distribution of marital status

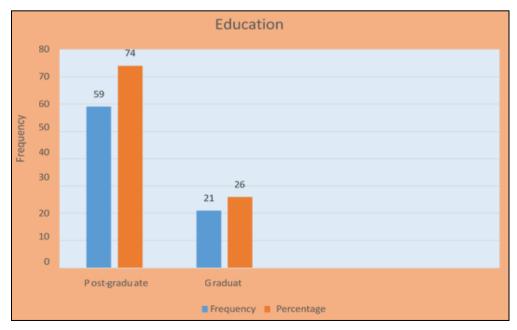
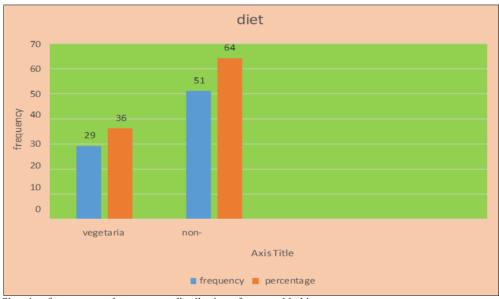


Fig 5: Showing frequency and percentage distribution of education

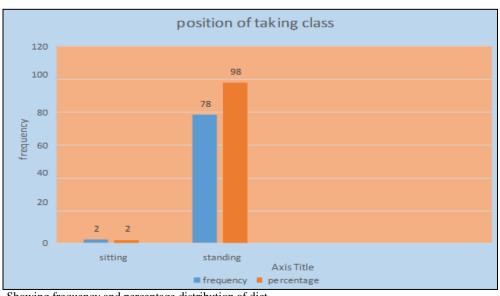


Fig 6: Showing frequency and percentage distribution of personal habit



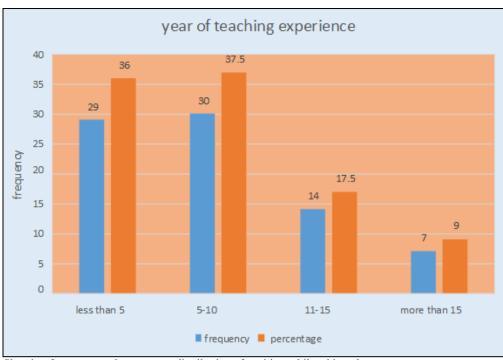
Showing frequency and percentage distribution of personal habit

Fig 7: Showing frequency and percentage distribution of diet



Showing frequency and percentage distribution of diet

Fig 8: Showing frequency and percentage distribution of position while taking class



Showing frequency and percentage distribution of position while taking class

Fig 9: Showing frequency and percentage distribution of year of teaching experience

Table 2: Association of pre-test level of knowledge score of adolescent girls with their selected socio demographic variables

S. No.	Socio-demographic variables	level of knowledge			X <sup>2</sup> , DF, P-Value
S. 1NO.		Inadequate	Moderate	Adequate	X-, DF, P- value
	Age (i				
1.	15-16	20	9	0	6.5966,
	17-18	9	17	0	2,
	19-20	3	2	0	0.036*
	Above 20	0	0	0	0.030
	Education of				
2.	10 <sup>th</sup> standard	19	8	0	
	11 <sup>th</sup> standard	7	16	0	7.9454, 2, 0.018*
	12 <sup>th</sup> standard	5	5	0	
	Educational				
3.	No formal education	1	1	0	
	Primary school	1	1	0	0.8163, 3, 0.845 <sup>NS</sup>
	Higher secondary	10	4	0	
	Graduate and above	30	12	0	
5.	Educational s				
	No formal education	0	0	0	
	Primary school	0	0	0	
	Higher secondary	40	20	0	NA
	Graduate and above	0	0	0	
5.	Hindu	50	10	0	
	Sikh	0	0	0	
	Muslim	0	0	0	
	Christian	0	0	0	NA
	Others	0	0	0	
	Туре				
6	Nuclear	10	9	0	2.4647, 1, 0.116 <sup>NS</sup>
	Joint	30	11	0	
	Extended	0	0	0	

This Table shows the computed chi-square of sociodemographic variables and the level of knowledge of adolescent girls. The data revealed that there was significant association of level of knowledge with Sociodemographic variables i.e., age (in years), education of adolescent girls, and type of residence and source of information. The data also revealed that there was significant association of level of knowledge with Sociodemographic variables i.e., educational status of father and type of family.

# Conclusion

Structured teaching program significantly increases the

knowledge regarding early marriage and early pregnancy among adolescent girls.

So, in future adolescent girls can prepare an effective structured teaching program to reduce the complications that can occur due to early marriage and early pregnancy.

Conflict of Interest: Not available

# Financial Support: Not available

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