

Awareness and Education Program for the Women with Urinary Incontinence: An Example of Using a Logical Framework

Shamima Islam Nipa^{1*} and Mohammad Mustafa Kamal Rahat Khan²

¹*Department of Rehabilitation Science, Bangladesh Health Professions Institute (BHPI), An Academic Institute of Centre for the Rehabilitation of the Paralyzed (CRP), Bangladesh*

²*Department of Occupational Therapy, Centre for the Rehabilitation of the Paralyzed (CRP), Bangladesh*

***Corresponding Author:** Shamima Islam Nipa, Lecturer, Department of Rehabilitation Science, Bangladesh Health Professions Institute, Centre for the Rehabilitation of the Paralyzed (CRP), Chapain, Savar, Dhaka, Bangladesh.

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Abstract

According to International Classification of Functioning, Disability and Health (ICF), the approved system of World Health Organization (WHO), (2002) nonfunctioning pelvic floor muscle is an impairment and actual leakage of urine is a disability. It affects the women's quality of life by lack of participation in physical and social activities. Several studies showed that urinary incontinence (UI) affects four domains of quality of life, which includes: physical activity, journey, social participation and psychological health. However, as it is an important sector to work with this disability, but no project is running yet on it. In addition, a logical framework is a dynamic tool which is utilized to design, implement and evaluate a project. Therefore, the present review goes through to prepare a project proposal by using log frame for the awareness and education program for the women with UI.

Keywords: *Logical Framework; Urinary Incontinence*

Introduction

Urinary incontinence UI is one of the chronic health complications of women which reduce the quality of life especially in physical activities and social participation. The aim of the pelvic floor exercise is to ensure these components of daily life which are necessary to maintain a good quality of life [1]. UI is involuntary leakage of urine from the urinary bladder [2]. In a recent research, Rosenbaum and Owens (2008) stated that urinary incontinence may be caused by thinning and drying of the skin in the vagina or urethra, especially after menopause, enlarged prostate gland or prostate surgery, after child birth due to weakened pelvic muscles, certain medications, infections, diabetes, high calcium level etc [3]. There are several types of urinary incontinence, such as stress urinary incontinence, urge incontinence, overflow incontinence, functional incontinence and mixed urinary incontinence [4].

Hunskar, *et al.* (2004) have done a research on the prevalence of urinary incontinence in women among the four European countries and found that about 35% of women address with their urinary incontinence [5]. The prevalence rate of urinary incontinence in France is about 44%, in United Kingdom 42%, in Germany 41% and in Spain 23% [5]. Among these incontinent patients, 24% of them living in Spain attended to the doctor, in the UK 25% patient, in France 33% and in Germany 40% of women with urinary incontinence attended to

the doctors for consultancy [5]. Akhtar, *et al.* (1996) have done a cross-sectional study on maternal morbidity in Bangladesh [6]. In this study they have found that about 5% women have urinary incontinence among 9 million married women in Bangladesh. There is not any systematic research on this topic regarding in Bangladesh context [6].

According to International Classification of functioning Disability and Health (ICF), the approved system of World Health Organization, (2002) a nonfunctioning pelvic floor muscle is the impairment component and the actual leakage is a disability [7]. It affects the women's quality of life by lack of participation in physical and social activities. Several studies showed that UI affect four domains of quality of life, which includes: physical activity, journey, social participation and psychological health [8]. However, as it is an important sector to work with this disability, but no project is running yet on it. Therefore, the present study would be an attempt to work on it. In that consequence, it will be possible to distinguish a project proposal by using the Logical framework.

Materials and Methods

The present project proposal was conducted through the logical framework or log-frame. It is a dynamic tool which is used to design a project. Log frame also helps to implement, monitoring and evaluation of a project as well. Log frame consisted with 4X4 table with a clear set of statements; activities, outputs, outcomes and impacts, indicators, evidence and assumptions.

Project overview

Overall goal

To promote community participation of the patients with urinary incontinence.

Project purpose:

- To aware, inform and educate about the urinary incontinence towards women.
- To motivate them about how to reduce and prevent the urinary incontinence.
- To provide evidence based physiotherapy practice in gynecological sector.
- To reduce the risk of further impairments and disability resulting from urinary incontinence of women.
- Improve the health seeking behavior.

Outputs:

- Educate the patient about the criteria of the problem and try to solve this with their own.
- Development the knowledge of the patient to whom, they might seek help.
- Promotion of clinical research.
- Improvement of communication with the patients as well as with their family.
- Development of gynecological rehabilitation system.

Inputs:

Capacity builders:

- **Long term expert:** Chief advisor 2 and operational coordinator 5.
- **Short term expert:** 20.
- **Recruited, who received the trainees:** 3.
- **Equipment purchase:** 65, 00000 taka only/5 years.
- **Accommodation cost:** 60,000000 taka only/5 years.
- **Rented office:** 12, 00000 taka only/5 years.
- **Project staff:**
 - **Output coordinator (5):** 1,05,00000 taka only/5 years.
 - **Rehabilitation team (3):** 78, 00000 taka only/5 years.
 - **Database team (1):**27, 00000 taka only/5 years.
 - **Chief advisor (2):** One is part time, so according to 10% of XYZ’s salary structure: 9, 00000 taka only/5 years.

The other one is full time, so salary structure would be: 42, 00000 taka only/5 years.

- **Human resource development team (1):** according to 10% of XYZ’s salary structure: 3, 00000 taka only/5 years.
- **Short term expert:** For each camping 5000 thousand for each expert: 3000000 taka only/5 years.

Awareness and Education program for the Women with Urinary Incontinence:			
Objectives	Indicators	Means of verification	Assumptions
Goal: -To promote community participation to the patients with urinary incontinence.	-Reduce the percentage of the patients with urinary incontinence.	-Records from districts clinics and hospitals. -Government records.	-There will be no disability with the women with urinary incontinence.
Outcome 1: -Aware and educate about the urinary incontinence.	-Increase the percentage of patient’s attendance.	-Project office records.	-Local leaders and other health professionals will be engaged.
Outputs: 1.1: -Improvement of patient’s knowledge about identification of urinary incontinence. 1.2: -Educate the patients about the criteria of urinary incontinence and able to solve themselves.	-Strengthen the pelvic floor muscles of women. -Reduce the percentage of urgency (Bladder diary or Pad test).	-Project database records.	-Cost will be managed. -Reduce the urgency of urinary incontinence.

<p>Activities:</p> <p>1.1: -Organize 5 community planning meetings.</p> <p>-Arrange two health camps in each district per month.</p>	<p>Inputs/ Resources:</p> <p>1.1.1: -Arrange the spaces in which meeting will be operated.</p> <p>1.1.2: -Arrange space for training.</p> <p>-Arrange computers, awareness raising materials, and projector.</p> <p>-Distribute the leaflets, booklets.</p>	<p>Costs and resources:</p> <p>-Project fund.</p> <p>-Space can be managed by liaison with the community leaders.</p>	<p>-People will not demand money for their spending time.</p>
<p>Activities:</p> <p>1.2: -Engage the facilitators for educate about criteria of urinary incontinence and pelvic floor exercise.</p>	<p>Inputs/Resources: 1.2.1: -Arrange appropriate trainers/facilitators.</p> <p>-Resource materials for pelvic floor exercise.</p>	<p>Costs and resources:</p> <p>-Project fund.</p>	<p>-People will not demand money for their spending time.</p>
<p>Outcome2:</p> <p>-Develop a systematic Rehabilitation model from medical, psychological and social point of view.</p>	<p>-Percentage of participants.</p>	<p>-Training records at project database.</p>	<p>-Trainee, their family members and other health professionals will be cooperated.</p>
<p>Outputs:</p> <p>2.1: -Improvement of communication with the patients and their families.</p> <p>2.2: -Promotion of clinical research.</p>	<p>-Percentage of referred patients.</p> <p>-Number of successful completion of health camp.</p>	<p>-Database records about the changes of severity.</p>	<p>-Patients and other family member will be cooperated.</p> <p>-Rehabilitation project for urinary incontinence will be running.</p>
<p>Activities:</p> <p>2.1: -Organize awareness raising program through lecture, leaflets, and bill-board.</p> <p>2.2: -The task should be carried out and documented properly to achieve the outputs.</p>	<p>Inputs/ Resources:</p> <p>2.1.1: -Arrange awareness raising materials.</p> <p>2.2.2: -Arrange facilitators, classrooms, and training materials.</p>	<p>Costs and resources:</p> <p>-Volunteer time.</p> <p>-Use donated space.</p>	<p>-No major conflict with the community people.</p> <p>-People will continue the training with their sufficient time.</p>
<p>Outcome 3: -Improve the health seeking behavior</p>	<p>-Percentage of self-referral.</p>	<p>-District and Thana level hospital's records.</p>	<p>-Women will be motivated to take the service.</p>
<p>Outputs: 3.1: -Development the knowledge of the patient to whom they might seek help.</p>	<p>- Number of project running.</p>	<p>-Data base records.</p> <p>-District hospital's records.</p>	<p>-Participated women and their family members will be motivated about the service.</p>
<p>Activities:</p> <p>3.1: -Give education about the different types of urinary incontinence and from where they can seek help.</p> <p>3.2: -Liaison with the other health professionals.</p>	<p>Inputs/ Resources:</p> <p>-Awareness rising about the importance of health seeking behavior.</p> <p>-Workshop/demonstrative presentation with different exercise of pelvic floor.</p>	<p>Costs and resources:</p> <p>-Project fund.</p> <p>-Donated space for training workshop.</p>	<p>-Women and other health professionals will be aware and motivated about the rehabilitative method of this project.</p>

Conclusion

The present study would be beneficial to write up the project proposal by using a logical consequence in order to measure the needs to accomplish the intended results and the quality of interventions.

Conflict of Interest

There is no conflict of interest exists.

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