Effectiveness of Planned Teaching Programme on Knowledge and Attitude regarding Sexually Transmitted Disease among Adolescents

Abstract

Background: Reproductive tract infections are the infections that affect the reproductive system. Reproductive tract infections affect both men and women. Many of the research shows that women are more susceptible to infection and often less likely to seek treatment than men. **Aims and objectives:** A study to assess the effectiveness of planned teaching programmes on knowledge and attitude regarding Sexually transmitted diseases among adolescents. **Methodology:** Quantitative research approach and Pre-experimental design was used. Samples were selected by convenient sampling technique. 106 samples were selected for this study. The study was conducted at Venkateswara Nursing College, Chennai. **Results:** This study shows the level of knowledge and attitude was improved**.** The pre-test mean score of knowledge was 7.73 and the post-test mean score of knowledge was13.98. The calculated paired 't' test value of t = 11.19 was found to be statistically highly significant at $p<0.001$ level and the pre-test mean score of attitude 36.9 and the post-test mean score was36.8. The calculated paired 't' test value of t = 0.1658 was found to be statistically highly significant at $p<0.001$ level. The calculated Karl Pearson's Correlation value of r =0.147 shows a high positive correlation between post-test knowledge and lifestyle changes. **Conclusion:** This infers that the planned teaching programme regarding Sexually transmitted disease among adolescents was found to be effective in improving post-test level of knowledge and attitude.

Keywords: Sexually Transmitted Disease, planned teaching programme, level of knowledge and attitude, Reproductive tract infection.

I INTRODUCTION

Reproductive tract infections are the infections that affect the reproductive system. Reproductive tract infections affect both men and women. Many of the research showed that women are more susceptible to infection and often less likely to seek treatment than men. Reproductive tract infections (RTIs) include Endogenous infections, iatrogenic infections and sexually transmitted infections (STIs). Reproductive tract infections may or may not be transmitted through sexual contact. In females, it can occur in the upper reproductive tract, which includes the fallopian tube and the uterus, in males it occurs in the penis, testicles and urethra.[1]

Sexually transmitted diseases are caused by certain bacteria, viruses or other microorganisms that can be passed from one person to another person through the blood, semen, vaginal fluids and other body fluids. Rather than oral anal or genital tract and unprotected sex with an infected partner. The common Sexually transmitted diseases are; Syphilis, Chlamydia, Gonorrhea and Human papilloma virus. Human papillomavirus is the most common sexually transmitted disease. In India, it is most common in women. It also causes cervical cancer. A vaccine that can help to prevent certain strains of Human papillomavirus up to the age 45 years.[2]

Chlamydia is another most common STDs. That can cause infection among both men and women. It can cause permanent damage to a woman's reproductive system. It also causes potential ectopic pregnancy. [3]

Syphilis is a bacterial infection usually spread by sexual contact. The disease starts like a painless sore typically on the genital, rectum, and mouth. Syphilis can spread from person to person via skin or mucous membrane. Syphilis can spread from a mother with syphilis to her unborn baby. You cannot get syphilis through casual contact with objects, such as toilet seats. Gonorrhea is an infection in the genitals, rectum and throat. It is a very common type of STD, especially among young adolescents.[4]

Adolescents are at high risk for reproductive tract infections. It is seen that adolescent groups have a negative attitude towards STD and it was found that they were not aware of personal hygiene on reproductive health to enable the adolescent to develop their knowledge, skills, competencies and ability to deal with varied aspects of reproductive hygiene.[5]

Statement of the problem

A pre-experimental study to assess the effectiveness of planned teaching programs on knowledge and attitude regarding Sexually transmitted diseases among adolescents at selected Nursing College, Chennai.

Objectives

- To evaluate the effectiveness of planned teaching programmes on knowledge and attitude regarding sexually transmitted diseases among adolescents.
- To correlate the post- test level of knowledge and attitude regarding STD among adolescents.
- To find out the association between the post-tests level of knowledge and attitude regarding sexually transmitted disease among adolescents with their selected demographic variables.

Hypothesis

- **NH_1-**. There is no significant effect of planned teaching program on knowledge and attitude regarding sexually transmitted disease among adolescents.
- **NH_2-** There is no significant relationship between knowledge and attitude regarding STD among adolescents.

- **NH_3**- There is no significant association between the post-test level of knowledge and attitude regarding sexually transmitted disease among adolescents with their selected demographic variables.

II MATERIALS AND METHODS

A quantitative research approach with pre-experimental design one group pre-test and post-test design was adopted in the study. The independent variable was planned teaching program and the dependent variables were Level of knowledge and attitude regarding sexually transmitted disease. The study was conducted at Venkateswara Nursing College, Thalambur Chennai. The sample size was 106 college students who fulfilled the inclusion and exclusion criteria, selected using a non-probability convenient sampling technique. The samples were selected based on the following:

Inclusion Criteria:

Adolescents who were studying 1st and 2nd year B.Sc (Nursing) at Venkateswara Nursing College, Thalambur.

Exclusion Criteria:

- Adolescents who were sick at the time of data collection.
- Adolescents who were absent at the time of the data collection.
- Not willing to participate in the study.

Development and description of the tool

It consists of two sections.

Section A: Assessment of the Demographic variables

This consists of Age (in years), Gender, religion, education of the mother, education of the father, occupation of the mother, occupation of the father, family monthly income, type of family, food habits and source of information.

Only for girls- age at menarche, menstrual cycle, duration of menstrual bleeding, Frequency of Menstrual cycle.

Section B: A **Structured knowledge questionnaire** formulated by the investigator was used to assess the knowledge level of Sexually transmitted disease. It consisted of 20 questions with one correct answer each. It was categorized under the following components: mode of transmission, risk factors, clinical manifestations, diagnostic evaluation, prevention and complications. Participants were asked to select a suitable answer from the four options given.

Section C: Modified attitude likert scale consisted of 10 statements on awareness of sexually transmitted disease. Nursing students were asked to mark their confidence level on a 5-point Likert scale.

Data collection procedure:

After obtaining formal permission from the Principal, written consent from the college students and written informed consent from the parents, the investigator obtained demographic variables from the samples, following which pre – test level of knowledge and attitude of sexually transmitted disease was assessed using the above-mentioned tools. Following this, planned teaching programme was given using a PowerPoint presentation for 30mts. Post-test was conducted after 7 days of intervention.

Ethical consideration

The study proposal and plans were granted formal ethical approval by Institutional Ethical Committee of Venkateswara Nursing College, Chennai, India. Written consent from the College students and written informed consent from the parents were obtained after explaining

the study purpose, type of data required, participants, procedure, potential benefits and right to withdraw from the study was explained. Confidentiality of data and anonymity of the study participants was assured.

III RESULTS AND DISCUSSION:

Distribution of demographic variables of Adolescents

The study revealed that majority of the adolescents, 70 (66.04%) were between 19-21 years, 73(68.87%) were females, 80 (75.47%) were Hindu, 33(31.13%) adolescent's mothers had middle education, 33(31.13%) adolescent's fathers had middle education, 74(69.81%) adolescent's mothers were homemakers, 48 (45.29%) adolescent's fathers were daily wages, 38 (35.85%) had a family monthly income of 5001- 10,000, 80 (75.47%) belonged to the nuclear family, 91 (85.85%) were non-vegetarian, 53 (50%) were source of information by education, 50 (68.49%) were attained menarche at the age of 13-16 years, 63(86.3%) were regular menstrual cycle, 42 (57.53%) were 5 days duration of menstrual cycle, 35(47.95%) were 28 days cycle.

Frequency and Percentage distribution of pre and post-test level of knowledge regarding sexually transmitted disease

N = 106

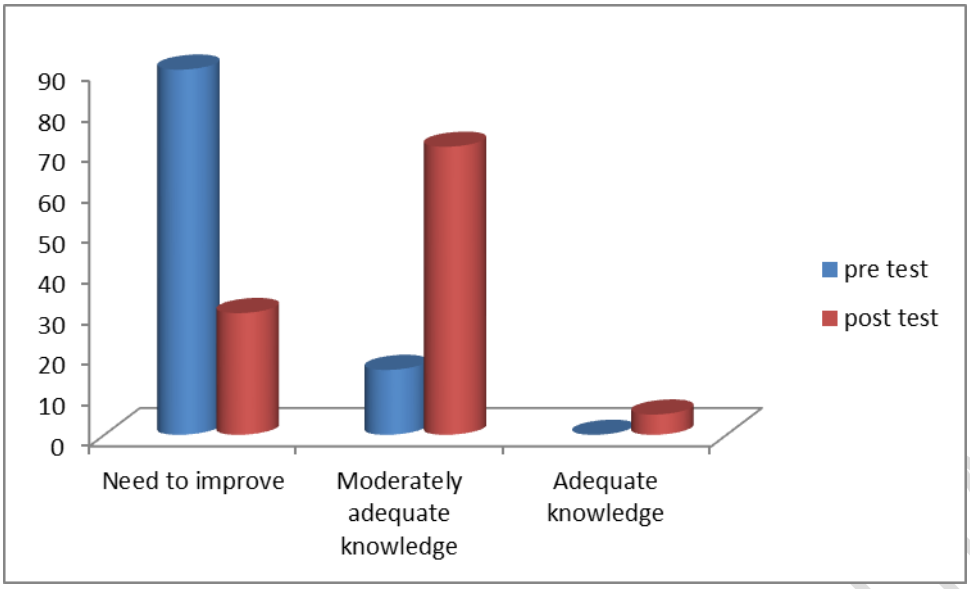

Figure 1: Percentage distribution of pre and post-test level of knowledge regarding sexually transmitted disease

Figure 1 reveals that in the pre-test level of knowledge regarding sexually transmitted disease among adolescents 85% needed to improve, 15 % had Moderately adequate knowledge, whereas in the post test, 66% moderate adequate knowledge, 30% needed to improve and 4 % had adequate knowledge.

Frequency and Percentage distribution of pre and post-test level of attitude among adolescents

N = 106

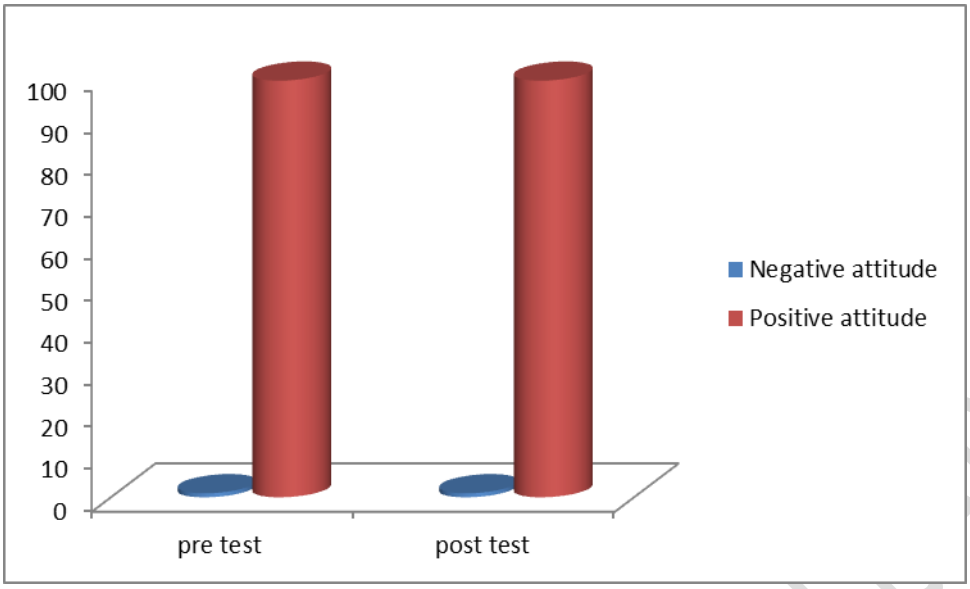

Figure 2 reveals that in the pre-test, 0.95% of adolescents had negative attitude, 99.05% had positive attitude whereas in the post-test 0.95% of adolescents had negative attitude and 99.05% had positive attitude.

Effectiveness of planned teaching programme on knowledge and attitude regarding Sexually Transmitted Disease among adolescents

Variables	Test	Mean	SD	Paired 't' Test Value
Knowledge	Pre-test	36.9	2.40	**t=11.19**

	Post-test	36.8	2.72	**p=1.796** S*
Attitude	Pre-test	36.9	2.40	**t=0.1658**
	Post-test	36.8	2.70	**p=0.596** S*

TABLE- 1: Comparison of pretest and post-test knowledge and attitude among adolescents.

N=106

* Significant at p< 0.05, S – Significant, NS – Non-Significant

Table 1 reveals that the pre-test mean score of knowledge was 36.9 with a standard deviation of 2.40 and the post-test mean score was 36.8 with a standard deviation of 2.72. The calculated paired "t" test value t = 11.19 was found to be statistically significant at p<0.05 level. The pretest mean score of attitude was 36.9 with a standard deviation of 2.40 and the post-test mean score of attitude was 36.8 with a standard deviation of 2.70. The calculated paired "t" test value of t=0.17 was found to be statistically significant at p<0.05 level.

TABLE- 2 Correlate the post-test level of knowledge and attitude regarding sexually transmitted disease among adolescents

N=106

VARIABLES	**TEST**	**MEAN**	**S.D**	**KARL PEARSON'S CORRELATION**
Knowledge	Post test	11.35	2.40	**r = 0.147** **P=0.05** **S**
Attitude	Post test	39.46	6.10	

Table 2 shows that the knowledge mean score of the post test was 32.98. The calculated Karl Pearson's correlation value of r=0.147 shows a high positive correlation, which was found

to be statistically significant at p=<0.05. The study clearly shows that the knowledge and attitude was increased among adolescents regarding sexually transmitted disease.

Association between post-test level of knowledge and attitude regarding sexually transmitted disease among adolescents.

The demographic variable shows the type of family and food habits had shown statistically significant association with post-test level of knowledge among adolescents at p<0.05 level and the demographic variable shows only age in years had statistically significant association with post-test level of attitude among adolescents at p<0.05 level.

IV DISCUSSION

With regard to the demographic variables of adolescents, 70 (66.04%) were between 19-21 years, 73(68.87%) were females, 80 (75.47%) were Hindu, 33(31.13%) adolescent's mothers had middle education, 33(31.13%) adolescent's fathers had middle education, 74(69.81%) adolescent's mothers were homemakers, 48 (45.29%) adolescent's fathers were daily wages, 38 (35.85%) had a family monthly income of 5001- 10,000, 80 (75.47%) belonged to the nuclear family, 91 (85.85%) were non-vegetarian, 53 (50%) were source of information by education, 50 (68.49%) were attained menarche at the age of 13-16 years, 63(86.3%) were regular menstrual cycle, 42 (57.53%) were 5 days duration of menstrual cycle, 35(47.95%) were 28 days cycle.

Comparison of pre-test mean score of knowledge was 36.9 with a standard deviation of 2.40 and the post-test mean score was 36.8 with a standard deviation of 2.72. The calculated paired "t" test value t = 11.19 was found to be statistically significant at p<0.05 level. The pretest mean score of attitude was 36.9 with a standard deviation of 2.40 and the post-test mean score of attitude was 36.8 with a standard deviation of 2.70. The calculated paired "t" test value of t=0.17 was found to be statistically significant at p<0.05 level.

Correlate the post-test level of knowledge mean score was 32.98. The calculated Karl Pearson's correlation value of r=0.147 shows a high positive correlation, which was found to be statistically significant at p=<0.05. The study clearly shows that the knowledge and attitude was increased among adolescents regarding sexually transmitted disease.

The association of selected demographic variables of adolescents with the mean differed level of knowledge and attitude showed that type of family and food habits were significantly associated, indicating that higher knowledge and attitude in age in years had statistically significant. The other demographic variables were not associated with mean differed level of knowledge and attitude of school adolescents.

V CONCLUSION

The study concluded that there is a significant difference in the level of knowledge and attitude of adolescents after a planned teaching programme. Thus, the study findings revealed that this intervention was found to be effective in improving the knowledge and attitude among adolescents. Hence the researchers recommend utilizing this planned teaching programme in various educations in various settings to create awareness among adolescents to initiate the students to teach about the health hazards of sexually transmitted disease and its prevention.

VI REFERENCES

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VII SOURCE OFSUPPORT: None

VIII CONFLICT OF INTEREST: None declared

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