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Research Article

A STUDY TO ASSESS THE EFFECTIVENESS OF PLANNED TEACHING ON THE KNOWLEDGE OF REPRODUCTIVE HEALTH AMONG FEMALE ADOLESCENT STUDENTS IN SELECTED COLLEGES OF PUNE CITY

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ABSTRACT

Reproductive health relates to health concerns pertaining to reproductive organs and their functions in sex and reproduction. Keeping in view educating the female adolescents during reproductive age, a study was undertaken to assess the effectiveness of planned teaching on the knowledge of reproductive health among female adolescent students in selected colleges of Pune city.

The objectives of the study were to assess the knowledge of female adolescent students regarding the reproductive health before planned teaching, to assess the knowledge of female adolescent students regarding the reproductive health after planned teaching, to compare the knowledge scores before and after planned teaching to see the effectiveness, and to associate the knowledge scores with selected demographic variables.

The study adopted "systems model" as the theoretical base for the framework of the study. A self structured questionnaire tool was developed to ascertain the knowledge scores. The validity of the tool was done by 19 experts from various fields of medicine and nursing. i.e., obstetrics and gynecology nursing, community health nursing and department of community medicine. The reliability of questionnaire was established by the method of split half method and was found to be 0.84. A pre experimental study enrolling the 200 female adolescent students of sixteen to nineteen years of age was conducted during the month of 18th August 2012 to 6th September 2012. A pre-test post-test control group design was used to evaluate effectiveness of planned teaching on knowledge of female adolescents students regarding reproductive health. The samples were selected by using convenient sampling method. The pre-test was done. On the same day planned teaching on reproductive health was given to the group and after 7 days post test was conducted to the group.

In pre-test, mean knowledge score was 14.02 and in post test 21.27. There is significant increase in the post test score which clearly indicates that there has been an increase in the knowledge level of female adolescent students regarding reproductive health after the planned teaching.

There is no significant association of the selected demographic variables i.e: age of the female adolescents, type of family and existing knowledge of the female adolescents.

Recommendations were made based on the findings of the study. Researcher recommends that a comparative study can be done between urban and rural female adolescent students, A similar study can be done on larger samples for generalisation of findings, A study also can be done among the school going children of 10-16 years of age, A comparative study can be done using different educational material like information booklet, leaflets, and A comparative study can be done between professional and non- professional colleges.

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INTRODUCTION

Adolescence is a latin word derived from the verb "adolescere" which means to grow into adulthood. Adolescence is a time of moving from the immaturity of childhood to the maturity of adulthood.^[1]

Adolescence is a time of passage signaling the end of childhood and the beginning of adulthood. Although adolescents differ in behaviours and accomplishments, they are in a period of identity formation.^[2]

Medical dictionary defines the term adolescent as "the period of life beginning with the appearance of secondary sex characteristic and terminating with the cessation of somatic growth".^[3]

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Adolescence is a period of rapid physical and emotional development. This period starts around 10 years of age and extending till 19 years. Early adolescence period is 10-13 years of age, middle adolescence period is 14-16 years of age and late adolescence period is 17-19 years of age. Adolescence is a period of intense changes which takes place within the personality of young girls and boys, who are neither an adult nor a child and find themselves in a no man's land, sandwich between the carefree life of childhood and the responsibilities of adulthood.^[4]

Adolescence is a challenging phase of life within which the individual attains physical, sexual and social maturity. One fifth of the worlds population is represented by them. Adolescents represents a major potential human resources for the overall development of a nation.

Centuries of inhabitation, taboos and female moralize have formed a barriers in which prevent in elders from freely sharing their knowledge with youngsters about all these important facts of life. These difficulties have their roots in the refusal to accept sex as a rich and positive value for a full expression of human personality.

Reproductive health relates to health concerns pertaining to reproductive organs and their functions in sex and reproduction.

METHODOLOGY

A pre experimental study enrolling the 200 female adolescent students of sixteen to nineteen years of age was conducted during the month of 18th August 2012 to 6th September 2012 from four settings. A pre-test post-test control group design was used to evaluate effectiveness of planned teaching on knowledge of female adolescents students regarding reproductive health. The samples were selected by using convenient sampling method. The pre-test was done. On the same day planned teaching on reproductive health was given to the group and after 7 days post test was conducted to the group. The collected data were analyzed by using descriptive and inferential statistics.

RESULTS AND OBSERVATION

Table 1 Frequency and percentage distribution of female adolescents by their demographic characteristics.

N = 200

Sr No	Demographic Characteristics	Frequency (f)	Percentage (%)
Age			
1	16-17 years	50	25%
	18-19 years	150	75%
Education			
2	Professional college	0	0%
	Non Professional college	200	100%
Type of Family			
3	Nuclear	150	75%
	Joint	50	25%
Any previous knowledge			
4	Yes	80	40%
	No	120	60%

The data given in Table-1 shows that 150 (75%) of the female adolescent students were with age group of 18-19 years and 50

(25%) of them with 16-17 years. In terms of the education, all the students belongs to Non-Professional college. As regard to the type of family, maximum number of students i.e. 150 (75%) are from nuclear family and 50 (25%) from joint family. As regard to any previous knowledge regarding reproductive health majority of the female adolescents students i.e. 120 (60%) are not having any previous knowledge and 80 (40%) of them are having previous knowledge of reproductive health.

Table 2 Category of the pre-test knowledge scores of female adolescent students.

N=200

Knowledge grade	Pretest	
	f	%
Poor (score 0-10)	30	15%
Average (score 11-20)	164	82%
Good (21-30%)	6	3 %

The data represents in the Table- 2 shows that in the pre-test, majority of the samples i.e., 164 (82%) has average knowledge score, 30 (15%) has poor knowledge score and 6 (3%) has good knowledge score.

Table 3 Mean standard deviation of the pre-test knowledge score of the female adolescent students.

N=200

Pre-test knowledge score (Mean)	S.D.
14.02	3.72

The maximum possible score = 30

The data presented in Table 3 shows that mean pre-test knowledge score is 14.02. Finding also shows that the standard deviation of the pre-test knowledge score is 3.72.

Table 4 Category of the post-test knowledge scores of female adolescent students.

N=200

Knowledge grade	Post test	
	F	%
Poor (score 0-10)	0	0%
Average (score 11-20)	90	45%
Good (21-30%)	110	55 %

The data represents in the Table- 4 shows that in the post-test, majority of the samples i.e., 110 (55%) has good knowledge score, 90 (45%) has average knowledge score and no one in the poor knowledge score.

Table 5 Mean standard deviation of the post-test knowledge score of the female adolescent students.

N=200

Post-test knowledge score (Mean)	S.D.
21.27	4.22

The maximum possible score = 30

The data presented in Table 5 shows that mean post-test knowledge score is 21.27. Finding also shows that the standard deviation of the post-test knowledge score is 4.22.

Table 6 Category of the pre-test knowledge score and post- test knowledge score of female adolescent students. N=200

CATEGORY	PRE TEST	POST TEST
Poor (0-10)	30	0
Average (11-20)	164	90
Good (21-30)	6	110

The data represent in Table- 6 shows that in the pre-test, majority of the samples i.e., 164 (82%) has average knowledge score and in the post test majority of the samples i.e. 110 (55%) has good knowledge scores.

Table 7 Mean, standard deviation of pre test and post test knowledge scores of female adolescent students in the group. N=200

MEAN		STANDARD DEVIATION	
PRE TEST	POST TEST	PRE TEST	POST TEST
14.02	21.27	3.72	4.22

The maximum possible score= 30

The data in the Table 7 shows that the mean post test knowledge score (21.27) is higher than the mean pre-test knowledge score (14.02). Findings also shows that the standard deviation of the post test knowledge score (4.22) is higher than the standard deviation of the pre test knowledge score (3.72).

Table 8 Mean, standard deviation, 'z' value and 'p' value of Pre test and Post test knowledge scores of female adolescent students in the group. N=200

Knowledge scores	Mean	S.D.	'z' value	'z' value table	'p' value	Results
PRE TEST	14.02	3.72				
POST TEST	21.27	4.22	18.31	1.96	0.05	Accept H ₁

Table 9 Association between pre test knowledge scores and selected demographic variables N=200

Demographic variables	Knowledge scores						Chi X ²	df	Table value	'P' Value
	Poor	%	Average	%	Good	%				
AGE										
16-17 Years	8	4	39	5.99	4	2	5.54	2	5.99146*	0.062
18-19 Years	23	11.5	124	6	2	1				
TYPE OF FAMILY										
Joint	11	5.5	38	5.99146	1	0.5	2.25	2	5.99146*	0.324
Nuclear	20	10	125		5	2.5				
PREVIOUS KNOWLEDGE										
Yes	9	4.5	66	5.99146	5	2.5	5.94	2	5.99146*	0.0513
No	21	10.5	98		1	0.5				

*=p<0.05

The data presented in Table 8 shows that the mean post test knowledge scores of the female adolescent students is (21.27) and the mean pre test knowledge scores is (14.02) which is found to be statistically significant as evident from 'z' calculated value (18.31) is more than table value (1.96) at 5% level of significance. So there is significant increase in

knowledge score after planned teaching. This shows that the obtained mean difference between the pre-test and the post-test knowledge score is a true difference.

The data represented in Table-9 shows there is no significant association between pre test knowledge and age of the female adolescent students as calculated Chi X² value (5.54) is smaller than the table value (5.99146). There is no significant association between pre test knowledge and the type of family of the female adolescent students as calculated Chi X² value (2.25) is smaller than the table value (5.99146). Also there is no significant association between pre test knowledge and the previous knowledge of the female adolescent students as calculated Chi X² value (5.94) is smaller than the table value (5.99146)

DISCUSSION

The mean post test knowledge scores of the female adolescent students is (21.27) and the mean pre test knowledge scores is (14.02) which is found to be statistically significant as evident from 'z' calculated value (18.31) is more than table value (1.96) at 5% level of significance. So there is significant increase in knowledge score after planned teaching.

CONCLUSION

On the basis of the findings of the present study the following conclusions can be drawn:

- The knowledge regarding reproductive health of the Female adolescent students was significantly increased after the planned teaching.
- The planned teaching was effective in enhancing the knowledge of female adolescent students regarding reproductive health.

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