

Effect of Structured Teaching Programme on Prevention of Sexually Transmitted Infections in Terms of Knowledge and Attitude among Teachers of Rohtak (Haryana)

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Abstract

A pre-experimental study was conducted to evaluate the effectiveness of structured teaching programme (STP) on prevention of Sexually transmitted infections (STIs) in terms of knowledge and attitude among teachers of selected School at Rohtak, Haryana. A total of 40 teachers were selected by Convenience sampling technique. A structured questionnaire was used to collect the data. The mean pre-test knowledge score was 18.15 which increased to 28.32 in post-test and the mean pre-test attitude score was 106.35 which increased to 118.6 in post-test and there was significant association of post-test knowledge scores of subjects with selected variables such as type of family and previous information regarding STIs but there was partial significant relationship of knowledge of school teachers with selected variables. The study concludes that STP was significantly effective in enhancing the knowledge and change in attitude of subjects irrespective of sample characteristics regarding prevention of STIs.

Sexual health is an essential aspect of human health and sexually transmitted infections (STIs) are infections that are spread primarily through person-to-person sexual contact and have devastating impact on health. STIs pose a significant threat to the health and well-being of vulnerable adolescents. In 1996, the World Health Organisation estimated that more than one million people were being infected with STIs daily. In India, the prevalence of STIs is quite high.

The annual incidence of STIs in India is estimated to be five percent, or 40 million new infections every year. STIs mainly affect sexually active young people. Young adults aged 15-29 years, account for 32 percent of AIDS (Acquired Immunodeficiency Syndrome) cases reported in India and the number of young women living with HIV/AIDS is twice that of young men. Causes of the increased rates of STIs/HIV in young people are complex; however, the main reasons include biological factors, risky sexual behaviour patterns (early initiation of sex, pre-marital sex, bisexual orientation and multiple sexual partners), transmission dynamics and treatment-seeking behaviour. There was growing evidence of increased pre-marital sexual activities among young people.

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Sexually transmitted infection like Chlamydia, Gonorrhea, Syphilis, Trichomoniasis etc. are common in every society. They cause substantial morbidity and mortality that reduces productivity and earnings. STI can cause pelvic-inflammatory diseases (PID), abdominal pain, ectopic pregnancies, still births, spontaneous abortions and even cervical cancers among women and total infertility among both men and women. Babies born to parents affected with STI may suffer blinding eye infections and acute pneumonia, since young men and women in their prime working ages are affected by these infections.

The National Family Health Survey-3 (NFHS-3) estimates that 11.1 percent of women were reported to have STIs in India. The prevalence varies across states ranging from 2 percent in Goa to 25 percent of women in Assam. Among the southern states, its prevalence varies from 9-10 percent in Kerala to 2-9 percent in Karnataka.

While generalisation is difficult, studies indicate that between 20 percent and 30 percent of young men and up to 10 percent of young women have pre-marital sexual experiences. Women, have a higher incidence of STIs than men because of their greater biological susceptibility.

STIs pose a significant threat to the health and well-being of vulnerable adolescents. Schools are in a unique position to provide knowledge and skills to adolescents, which they will use to make and act upon decisions to

promote sexual health throughout their lives.

The researcher found that there is hardly any study available on school teachers towards prevention of STIs. A study was therefore conducted to evaluate the effectiveness of the structured teaching programme in terms of knowledge and attitude among teachers of Selected School at Rohtak, Haryana regarding prevention of STIs.

Objectives

The objectives of the study were to:

- Assess and compare the knowledge and attitude among school teachers regarding prevention of STIs before and after administration of structured teaching programme (STP).
- Determine the relationship between knowledge and attitude of school teachers regarding prevention of STIs.
- Determine the association of knowledge and attitude of school teachers regarding prevention of STIs with selected variables.

Assumptions

- The school teachers possess some knowledge and attitude regarding prevention of STIs.
- STP is an effective teaching strategy to enhance knowledge and develop favorable attitude of school teachers regarding prevention of STIs.

Hypotheses

H₁- The mean post-test knowledge score of school teachers regarding prevention of STIs will be significantly higher than their mean pre-test knowledge score.

H₂- The mean post-test attitude score of school teachers regarding prevention of STIs will be significantly higher than their mean pre-test attitude score.

H₃- There will be a significant relationship between the knowledge and attitude scores of school teachers regarding prevention of STIs.

H₄- There will be a significant association of post-test knowledge and attitude scores of school teachers regarding prevention of STIs with selected variables.

Methodology

To accomplish the objectives and considering the feasibility, pre-experimental one group pre-test post-test design was adopted. The independent variable was structured teaching programme on prevention of STIs and dependent variables were knowledge and attitude scores of school teachers. The school was selected by convenient sampling technique. A sample of 40 sub-

jects was selected. The total enumeration technique was used to get an adequate size of sample.

Data collection tool

(a) Sample characteristics (b) structured knowledge questionnaire (c) attitude scale were selected for collecting data related to knowledge and attitude of school teachers regarding STIs.

Validity and Reliability: The content validity of the tool was established by seven experts. The reliability coefficient for the structured knowledge questionnaire was calculated by using Kuder Richardson-21 formula which was found to be 0.64 and for attitude scale test retest formula was used and found to be 0.75.

Results

Findings related to demographic data: Maximum percentage (65%) of subjects were in the age group of 36-45 years; majority (87.55%) were female and belonged to Hindu religion; 80 percent subjects were post-graduate. Subjects who had monthly income Rs. 10001-15000 were 42.5 percent, while 50 percent of subjects belonged to nuclear family. Majority of subjects (93%) were married; 60 percent had teaching experience of more than 10 years, and majority (62.50%) of subjects had previous information about STIs from Radio/TV. Majority of subjects had knowledge score below average.

Table 1 reveals that in pre-test on structured knowledge questionnaire majority of school teachers (70%) had below average knowledge and only 5 percent had good knowledge regarding prevention of STIs and none of school teacher had very good knowledge. Whereas in post-test majority of school teachers (60%) had good knowledge followed by those who had very good knowledge (25%); only 15 percent had average knowledge and none had below average knowledge. Table 2 shows that the mean post-test knowledge score of school teachers was (28.32) higher than mean pre-test knowledge score (18.15) with mean difference of 10.17. The computed t-value was found to be statistically significant at 0.05 level of significance which means that the mean difference between pre-test to post-test knowledge scores of school teachers was the true difference, not by chance

Table 3 shows that the mean post-test attitude score of school teachers was 118.6 and the mean pre-test attitude score was 106.35 with a mean difference of 12.25. Standard deviation of difference was 0.57. Computed t-value (7.52) was found to be statistically significant at 0.05 level of significance. Therefore it can be said that the mean difference between pre-test and post-test attitude score of school teachers was true difference. Table 4 shows the coefficient of correlation be-

tween pre-test and post-test knowledge score and attitude score. The computed pre-test r value (0.34) and post-test r value (0.33) was found to be statistically significant at 0.05 levels of significance indicating a low positive correlation between knowledge score and attitude score of school teachers.

The findings suggest that there was low positive significant relationship between knowledge score and attitude score of school teachers regarding prevention of STIs.

Table 5 suggests that the computed chi square value of type of family (4.91) and previous information about STIs (14.8) were found to be statistically significant at 0.05 level of significance. It means the school teachers who belonged to joint family and had previous information about STIs gain more knowledge as compared to others. So there was partial significant relationship of gain in knowledge scores of school teachers with selected variables. The change in teachers' attitude towards prevention of STIs was independent with selected variables.

Fig 1 depicts that in the post-test majority of subjects had favourable attitude whereas in pre-test 72.5 percent subjects had moderately favourable attitude towards prevention of STIs which showed that the school teachers developed favourable attitude towards prevention of STIs after administration of STP.

Result and Discussion

In relation to socio-demographic variables: Majority of subjects (65% teachers) were in the age group of 36-45 years, 87.5 percent were females; 80 percent of subjects were post Graduate. Majority of subjects had previous information about STIs and 60 of them got information about STIs from Radio/TV, 24 percent from newspaper/book/magazine. Only 4 percent had received information about STIs through health personnel.

In relation to knowledge: the data revealed that majority of school teachers (70%) had below average knowledge regarding prevention of STIs and none of school teacher had very good knowledge. Whereas in post-test majority of school teachers (60%) had good knowledge and none had below average knowledge.

Our findings revealed that the school teachers who were post graduate had higher knowledge than graduate school teachers were consistent with findings of Mandell (2008), who found that adolescents who have completed their secondary education level possessed higher knowledge and had better practices regarding their reproductive health.

Table 1: Frequency and percentage distribution of level of knowledge of school teachers in pre-test and post-test (n=40)

Level of knowledge	Percentage	Range of Score	Pre-test		Post-test	
			f	%	f	%
Below average	< 50	< 20	28	70	0	0
Average	50- 60	21 – 24	10	25	6	15
Good	61-75	25 – 30	2	05	24	60
Very good	>75	>30	0	0	10	25

Table 2: Mean, mean difference, standard deviation of difference, standard error of mean difference and 't' value of pre-test to post-test knowledge score of school teachers (n=40)

Knowledge test	Mean	Mean D	SDD	SEMD	t value
Pre-test	18.15	10.17	0.81	0.82	12.40*
Post-test	28.32				

*t' (39) = 2.02 (p > 0.05) *significant

Table 3: Mean, mean difference, standard deviation of difference, standard error of mean difference and 't' value of pre-test to post-test attitude score of school teachers (N=40)

Attitude test	Mean	Mean D	SD _D	SE _{MD}	t value
Pre-test	106.35	12.25	0.57	1.63	7.52*
Post-test	118.6				

*t' (39) = 2.02 (p > 0.05) *significant

Table 4: Correlation between knowledge and attitude score obtained by school teachers (N=40)

Test	Knowledge score		Attitude score		r
	Mean	SD	Mean	SD	
Pre-test	18.15	4.08	106.35	7.01	0.34*
Post-test	28.32	3.27	118.60	7.58	0.33*

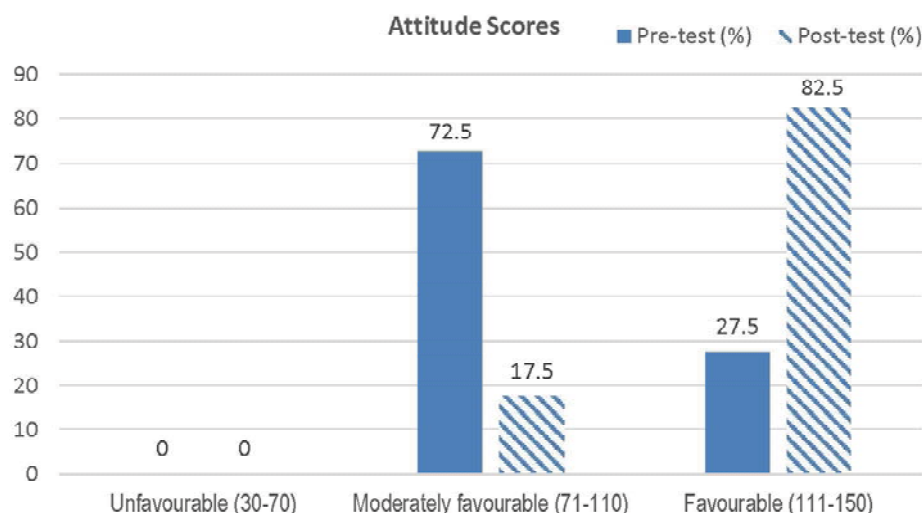
r(38) ≥ 0.304, p=0.05, *significant at 0.05 level

Table 5: Chi square value showing association of gain in post-test knowledge score of school teachers with sample characteristics (n=40)

S. No.	Sample Characteristics	Knowledge Scores		X ²	df	Table value
		Below median	Above median			
1	Type of family a. Nuclear family b. Joint family	13 06	07 14	4.91*	1	3.84
2	Any previous information about STIs a. Yes b. No	06 13	19 02	14.8*	1	3.84

The mean post-test knowledge and attitude scores of sample subjects were higher than the mean pre-test knowledge and attitude scores regarding prevention of STIs. These findings were consistent with those

Figure 1: Comparison of percentage of pre-test and post-test attitude score of school teachers in terms of unfavourable, moderately favourable and favourable attitude towards prevention of STIs



of Dhital et al (2011) Rani, Golbasi & Taskin L (2009) and Kim (2009) where effects of education on prevention of human papillomavirus were linked to cervix cancer.

Thus structured teaching programme was found effective for enhancing knowledge and change in attitude of school teachers towards prevention of STIs.

Conclusion

In this study, prior to implementation of STP, the teachers had below average knowledge regarding STIs. The effectiveness of STP was evaluated by post-test knowledge and attitude score. There was significant association of post-test knowledge scores of subjects with type of family and previous information regarding STIs and post-test attitude scores of subjects no significant association with sample characteristics. The STP was effective in enhancing the knowledge and change in attitude of subjects irrespective of sample characteristics regarding prevention of STIs. There was strong need of creating awareness among school teachers regarding prevention of STIs. Hence there is an immense need for implementation of appropriate teaching programme on prevention of STIs for schools teachers to cope up with the increasing vulnerable adolescents to STIs in India.

Recommendations

A similar study may be replicated using a larger sample to generalise the findings. A similar study can be conducted (a) with an experimental approach of pre-test – post-test control group design; (b) using other teaching strategies like PTP, SIM, computer-assisted instructions and video teaching programme. A comparative study can be conducted to compare the level of

knowledge and attitude of teachers regarding prevention of STI in rural and urban areas.

Implications

The findings of the study have implication for nursing practice, nursing education, nursing administration, nursing research, Community Health Nursing, general education and mass media.

With technological advances and ever growing need of upgrading knowledge of nurses, the nurse administrators have responsibility to improve the knowledge of nurses with substantive continuing education programme opportunities.

Research work is needed to be done in the field of constructing and evaluating teaching programme that are useful to impart knowledge score in the area of symptoms experience which influence STIs-affected individuals, perception of symptom; management strategies and preventives measures regarding prevention of STIs.

Community health nurse has direct impact on community. The sensitised nurse can create awareness among various health cadres and community people.

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