EVALUATION OF THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING HEALTH PROMOTIVE SERVICES AMONG HIGH SCHOOL TEACHERS IN A SELECTED HIGH SCHOOLS UDAIPUR

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ABSTRACT

Background of the study Decades of research has reported that Promotive services has a crucial job in the optimal development, learning, and improvement of kids from infancy through adolescence. However, this need is being challenged, and so youngsters are on the right track to get all this services. The opportunity has arrived to advocate strongly on the side of services for all kids. The aim of the investigation is "to assess the effectiveness of structured teaching program on knowledge regarding health Promotive services among High School teachers in selected High Schools, Udaipur". Method: An evaluative approach with one gathering pre-test post-test configuration was utilized for the examination. The sample consisted of 50 High School teachers, selected by non-probability convenient sampling method. Data was gathered by structured knowledge questionnaire on health promotive services. After collecting demographic data and conducting the pre-test, structured teaching program was given to the subjects. Seven days after structured teaching program post-test was conducted using the same structured knowledge questionnaire utilized for collecting the pretest. The gathered data was analyzed by using distinct and inferential statistics. Findings: The findings demonstrated the significant contrast suggesting that the STP was compelling in increasing the knowledge of the High School teachers (t =29.67). The mean post-test knowledge score was (24.18) higher than the mean pre-test knowledge scores (11.36). There was no association between the pre-test knowledge scores and the selected demographic variables. Conclusion: The findings of the examination indicated that the knowledge of the High School teachers was not satisfactory before the introduction of structured teaching program, and the structured teaching program helped them to learn increasingly about health promotive services. The post-test knowledge scores indicated significant gain in knowledge. Consequently the planned teaching program was a successful strategy for providing information and improving the knowledge of subjects. Educating the High School teachers will assist them with improving the knowledge about health promotive services and its importance in the life of their youngsters.

INTRODUCTION

Health is a state of complete physical, mental, social and spiritual flourishing not just the absence of
disease or infirmities by WHO. Health of the school youths can be guaranteed if all our school become health promoting school. In India, the school health services started in 1909 as medical examination for school youths. It is a highly specialized assistance contributing to the system of education.[1]

The School Health Program diverted out in the State from July '09 as a one of a kind joint endeavor of the Departments of Health, Education, Sports, Council and Local Self Government aims to introduce an exceptional concept of a far reaching Health card, the 'School TC and Health Record', for each understudy. The medical details and personal details which have bearing upon the child's health will be recorded in this Health Record named "Minus 2 to Plus 2". This Health Record will fill in as a broad archive of each understudy as the Transfer Certificate and Conduct Certificate are also incorporated into it. Junior Public Health Nurses @ one for 2,500 underestudies will be especially selected and specifically trained to attend to the health of the school goers. The advantages of the School Health Program will be loosened up to approximately 9.50 lakh understudies, both from Government and aided sections, in 992 schools across the State (one school representing each Panchayat/Municipality and 2-3 in the Corporation area) during the primary phase. Complete health services including the services of specialist Doctors on fixed days are planned as a part of this programme.[2]

The health of a nation means something beyond the health of its population. It concerns the planning for the health of its future population. Similarly, health status isn't only an assessment of a person at a point in time, anyway an ongoing and dynamic method. Health of things to come generations is primarily shaped by the quality of maternal health and youth health. Adolescent health, in turn, is determined by various factors at home, school and on the playground. Of these factors, a large portion of an average child's wakeful life is spent in school and in academic activities, more than any other place. The school activities open the youth to other children, and to open places, for example, avenues and transports. This makes the adolescent vulnerable to a great deal of medical issues, ranging from infectious diseases, nourishment contamination, psycho-social issues and addictive behaviors, all of which are preventable. School health administration in India dates back to 1909, when because, medical examination of school kids was carried out in Baroda City, Gujarat. After independence, in the five year plans, many state governments have given school health and feeding programs to the understudies. In any case, endeavors to improve school health have not been up to our expectations. The reason may be because of the lack of initiative, asset constrains and insufficient facilities. In Kerala, there was once an area school health team comprising of specialists, medical caretakers, attendants, and so on, under health services department. Gradually the individuals from this team were redeployed for other obligations and the team became almost defunct. [3]

**NEED FOR THE STUDY**

The High School Health Program is currently being overhauled for more advantages for the understudies, renovated according to the changed occasions and repackaged in an easy to use manner. This crisp program is undertaken as a joint endeavor by the Health Services Department, National Rural Health Mission and the Education Department.[4]

High School health services are services from medical, teaching and other professionals applied in or out of High School to improve the health and prosperity of youngsters and now and again entire families. These services have been created in various ways around the globe however the fundamentals are constant: the early detection, correction, prevention or amelioration of disease, disability and abuse from which High School aged youngsters can suffer.[5]

A study was conducted Knowledge and attitude of Jordanian High School health teachers with regards to crisis management of dental trauma, The motivation behind this 4 study was to assess, by means of a self administered structured questionnaire, the degree of knowledge of High School health teachers in northern Jordan with regards to the immediate crisis management of dental trauma. The sample consisted of all school teachers in northern Jordan (220) who attended an oral health education course held by the Jordanian dental association. Only 190 were included in the review. Sixty-three percent were females, 44% were in their twenties, and 43% in their forties. Their High School health teaching experience ranged from 1 to 7 years. Only 20% were officially trained in High School health. Not exactly half of the teachers got medical aid training only once in their teaching career, not necessarily as part of High School health training. Only 10 teachers were trained in dental emergency treatment, and the greater part had a past involvement in handling dental trauma in youngsters. Overall the teachers' knowledge with regards to the crisis management of the trauma cases introduced in the report was insufficient. Chi-square test demonstrated that, the distinction in their responses to the knowledge part of the questionnaire was not statistically significant with regards to age, sexual orientation, years of teaching experience,

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medical aid training, or number of seen trauma cases. Generally, the attitude was sure, most teachers wanting further education on the theme, anyway the individuals who were trained in emergency treatment, thought they had the option to give appropriate action when required in cases of trauma (P = 0.026). Most teachers were unsatisfied with their degree of knowledge, and only 30% knew about the availability of after hour crisis services for dental trauma. The present report indicated the gross lack of knowledge among High School health teachers with regards to dental trauma crisis management. Educational programs to improve the knowledge and awareness of this gathering of adults, who are usually the main line of advice in case of dental trauma in High School is, are mandatory. These programs ought to be appropriately intended to insure that legitimate information is retained with a beneficial outcome on attitude, and self assessed competence.[6].

Above considers shows that there is close relation between teacher’s knowledge and health promotive services and teachers are care providers of kids in High School settings. So teachers ought to have adequate knowledge about relationship among health and health promotive services of kid and consequently there is have to conduct an investigation and to share information of health promotive services

STATEMENT OF THE PROBLEM
“Evaluation of the effectiveness of structured teaching programme on knowledge regarding health Promotive services among High School teachers in a selected High Schools Udaipur ”

OBJECTIVES OF THE STUDY
1. To assess the pre existing knowledge among High School Teachers, by pre-test knowledge regarding health promotive services.
2. To assess the pre existing knowledge among High School Teachers, by posttest knowledge regarding health promotive services.
3. To evaluate the effectiveness of structured teaching programme regarding health promotive services among High School teachers by comparing pre and post test knowledge scores.
4. To find the association between pre test knowledge scores with selected demographic variables.

HYPOTHESIS
H1: There will be significant difference between pre test and post test knowledge scores regarding health promotive services among High School Teachers.
H2: There will be a significant association between pre test knowledge score and selected demographic variables.

MATERIALS AND METHODS
The research design consisted of an evaluated approach with pre-experimental one group pre-test post-test design. Subjects were selected according to the selection criteria. Informed consent was obtained from the sample. The sample selected for the investigation consisted of 50 High School teachers at selected High Schools, Udaipur. Fifty subjects were selected using non probability convenient sampling method. The data was gathered using a structured knowledge questionnaire. Content validity of the questionnaire was Pre-testing and the reliability of the questionnaire were done. The apparatus was seen as reliable (r=0.85).

RESULTS
The analysis of the data was based on the objectives and hypotheses. Both descriptive and inferential statistics were utilized for data analysis. Descriptive statistics utilized were mean, standard deviation with tabular presentation of the data. Paired ‘t’ test was figured to test the significant contrast in the man pre-test and post-test of knowledge scores. The investigation findings revealed that majority of the teachers half (25) in age group of 21 to 24 years. The mean pre-test knowledge score was 11.36 and that of post-test was 24.16. Among the four areas of health promotive services the highest (43.09%) mean percentage knowledge score was found in the area of "General information regarding health promotive services" and the most minimal (29.64%) was found in the area of "Teachers responsibility in health promotive services". The maximum post-test mean percentage score was in the area "General information regarding health promotive services " (88%). The mean post test knowledge score (24.18%) was higher than the pre - test scores (11.36). The 't' value indicated the significant distinction in the post-test (t=29.67, P <0.05)

IMPLICATIONS
The findings of this investigation have implications for nursing practice, nursing education, nursing administration, and nursing research.

Implication to nursing practice
• Health education is an important instrument for health care. It is one of the most financially savvy interventions. It is concerned with promoting health as well as prevention of disease
• The broadened and expanded job of professional medical attendant emphasizes increasingly about the preventive and promotive aspects of the health
• Education programs with effective teaching strategies, will motivate individuals to pursue healthy practices in day-to-day life, including their changes in way of life.
Table 1: Area wise pre-test mean knowledge score and percentage mean knowledge score of teachers on health promotive services.

<table>
<thead>
<tr>
<th>Sl No.</th>
<th>Knowledge areas</th>
<th>Maximum possible Scores</th>
<th>Mean score</th>
<th>Standard deviation</th>
<th>Mean percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>General information regarding health promotive services</td>
<td>11</td>
<td>4.74</td>
<td>1.626</td>
<td>43.09</td>
</tr>
<tr>
<td>2</td>
<td>Important of health promotive services</td>
<td>3</td>
<td>1.28</td>
<td>0.701</td>
<td>42.67</td>
</tr>
<tr>
<td>3</td>
<td>Process of health promotive services</td>
<td>5</td>
<td>2.08</td>
<td>0.829</td>
<td>41.60</td>
</tr>
<tr>
<td>4</td>
<td>Teachers responsibility in health promotive services</td>
<td>11</td>
<td>3.26</td>
<td>1.337</td>
<td>29.64</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>30</td>
<td>11.36</td>
<td>4.493</td>
<td>39.25</td>
</tr>
</tbody>
</table>

The present investigation would assist the medical caretaker with developing an understanding about the knowledge of teachers regarding health promotive services.

• The attendants could further impart knowledge to the teachers regarding health promotive services.

Implications to nursing education

• The present health care delivery framework emphasizes more on preventive rather than the curative aspect.
• Nursing understudies ought to be made aware of their job in health promotion and disease prevention for the present and their future, which may help in achieving the goal of 'health for all'.
• The nursing understudy can improve the knowledge on health promotive services.
• The understudy medical caretaker can engage in providing education and conduct awareness programs among teachers regarding health promotive services.

Implications to nursing research

• The emphasis on research and clinical status is to improve the quality of nursing care. Medical attendants need to engage in multidisciplinary research with the goal that it will improve their knowledge and ability while applying it into practice, many health issues can be solved.
• The medical attendants should conduct research on various aspects of health promotive services, which provides progressively logical data and adds increasingly logical assortment of information to the nursing profession.
• Innovative strategies and methods of teaching and learning have to be executed in education, as well as clinical research, which is a challenging task in the era of improved innovation
• Nurse researcher ought to know about the health care framework and formulating new theories. Researchers can improve the knowledge, ability and attitude of medical attendants and ultimately can improve the status and standards of nursing profession.
• The nurture researchers can further plan, actualize and evaluate a planned awareness programs among teachers regarding health promotive services.

Implications to nursing administration

• The knowledge of the medical attendants may be updated through in-service education and supplemental classes regarding health promotive services.
• The nurture administrator can organize network level programs to increase awareness on health promotive services.
• The nurture administrators can collaborate with the other health care providers to organize education programs.

LIMITATIONS
The investigation was restricted to High School Teachers.

• The examination was constrained to the selected High Schools in Udaipur.

RECOMMENDATIONS

Having gotten comfortable with the issues faced during the examination and keeping the limitations in view, the following recommendations are offered for further research. The examination can be replicated among rural areas.

• A comparative investigation can be conducted to assess the knowledge of rural and urban High School Teachers.
• A large scale study should be carried out to generalize the findings.
• A similar examination may be replicated with a control group and on a larger population.
• A survey to assess the knowledge, convictions and practices of High School regarding health promotive services may be undertaken.

CONFLICT OF INTEREST
There were no conflicts of interest reported.
REFERENCES