

ORIGINAL ARTICLE

A Pre-experimental Study to find out an Impact of Constructive Teaching Program on Knowledge Regarding Reproductive Health among Rural Adolescent Girls

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ABSTRACT

Background: Good reproductive health is a state of complete physical, mental and social well-being in all matters relating to the reproductive system. Human beings are beings, it means human beings are capable to reproduce and able to maintain reproductive health.

Objective:

1. To assesses the existing knowledge regarding reproductive health among rural adolescent girls by giving pre-test.
2. To evaluate the effectiveness of constructive teaching program regarding reproductive health as measured by gain in posttest.
3. To find out an association between pre-test knowledge scores of rural adolescent girls regarding reproductive health with their selected demographic variables.

Material and Methods: A study was conducted to assess the effectiveness of constructive teaching program on knowledge regarding reproductive health among 200 adolescent girls of selected rural PU colleges of Dharwad district. The research design used for the study was pre-experimental, one group, pre-test, post-test design. The demographic Performa were collected from the rural adolescent girls by using structured knowledge questionnaire. Data obtained in these areas were analyzed using descriptive and inferential statistics.

Results: The study revealed that, the pre-test the knowledge scores of rural girls were 17% had good knowledge, 51% of them had an average knowledge and 32% of them had poor knowledge. Where as in regards with post test, 93% of them had

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an excellent awareness and 7% of them belonged to average and none of them had poor knowledge. The paired 't' value was 29.75* which was more than that of table value. *Conclusion*-So the study proved and concluded that the constructive teaching program was an excellent tool in improving the knowledge of rural adolescent girls.

KEYWORDS

• Reproductive health • Knowledge • Rural adolescent girls • Constructive teaching program

INTRODUCTION

"Throw away all weakness, Tell your body that it is strong, Tell your mind it is strong and have unbounded faith and hope in yourself".

Swami Vivekananda

Adolescence, an age of opportunity. An adolescent is defined as an individual aged between 10-19 years by the UN. Adolescent period is unique period where there is physiological, psychological, social, emotional, adaptation. Adolescents are considered as demographic force. More than 22% of India's population is in the adolescent age group of 10-19 years; 12% are in the 10-14 year age group and 10% in the 15-19 year age group

Adolescents are adjusting to new body image, starting the process of separating from their parents and recognizing that they have a separate identity. The adolescents thinking and behavior are strongly affected by peers and these thinking and behavior patterns will lead to high risk behavior among adolescent girls which have adverse effect on the overall development and well-being of youth, or that might hinder their future success and development. The high risk behavior includes both immediate physical injury as well as behavior with cumulative negative effects these includes having antisocial romantic partners, becoming pregnant and giving birth as teen, anxiety, depression, eating disorder, drug use, delinquency, and violence which have serious effects on their reproductive health. They lack knowledge in taking care of their reproductive health.

Good reproductive health is a state of complete physical, mental and social well-being in all matters relating to the reproductive system. Human beings are beings, it means human beings are capable to reproduce and able to maintain reproductive health.

One of the study results revealed that in pre-test, 73% had poor knowledge, 26% had average knowledge and 1% had good knowledge. Whereas after administration of awareness programme the post test results were 77% had good knowledge, 18% had average knowledge and 5% had poor knowledge. The study concluded that there was lack of accurate information, absence of proper guidance, parents' ignorance, lack of skills and insufficient services from health care delivery system were the major barriers.

The personal and professional experience of the investigator and review of literature findings reveals that there was lack of knowledge about Reproductive Health among rural adolescent girls as compared to urban in taking any measures to improve their lifestyle which affected their reproductive health. Thus the researcher strongly motivated to enhance the knowledge of rural adolescent girl's. Hence the above-mentioned factors motivated the investigator to undertake the study to benefit for rural girls, their parents and also create an awareness regarding the rural services which benefits for them.

Problem statement

A pre-experimental study to find out an impact of constructive teaching program on knowledge regarding reproductive health among rural adolescent girls.

OBJECTIVES OF THE STUDY

1. To assess the existing knowledge regarding reproductive health among rural adolescent girls by giving pre-test.
2. To evaluate the effectiveness of constructive teaching program regarding reproductive health as measured by gain in post-test.

- To find out an association between pre-test knowledge scores of rural adolescent girls regarding reproductive health with their selected demographic variables.

HYPOTHESES

H₁: The mean post-test knowledge scores of rural adolescent girls regarding reproductive health who has exposed to CTP will be significantly higher than the mean pre-test knowledge scores at 0.05 level of significance.

H₂: There will be statistical association between pre-test knowledge scores of rural adolescent girls regarding reproductive health with their selected demographic variables at 0.05 level of significance.

MATERIALS AND METHODS

- Research approach:** An Evaluative.
- Research design:** Pre-experimental, one group pretest, post-test.
- Variables under study:**
 - **Independent Variable:** Constructive Teaching Program on reproductive health.
 - **Dependent Variable:** Knowledge of rural adolescent girls regarding reproductive health.
- Research setting:** Rural PU colleges, Dharwad district.
- Research population:** The target population of the study were adolescent girls from rural PU Colleges.
- Sample:** Adolescent girls from rural PU colleges, Dharwad district were selected.
- Sample size:** 200 adolescent girls from rural PU colleges, Dharwad district.
- Sampling technique:** Probability: Simple random sampling technique

Criteria for selection of samples:

The criteria for selection of samples involves:

Inclusion criteria:

Adolescent girls who were:

- present during the time of data collection.
- willing and interested to participate
- who knows English and Kannada language

Exclusion criteria:

- Rural adolescent girls who were sick during the time of data collection.
- Who were not at all co-operative during the research data collection.

Description of the tool:

Section-I: Socio-demographic Data

Section-II: Structured Knowledge Questionnaire which contains totally 48 items, and those were in turn divided under the following parts:

Part A: 04 items constructed based on introduction to adolescent

Part B: 05 items were on anatomy and physiology of female reproductive system

Part C: 10 items prepared on menstrual health and hygiene

Part D: 06 items were plotted based on high risk sexual behaviors.

Part E: 10 items were prepared on Sexually Transmitted Diseases (STDs and Reproductive Tract Infections (RTIs).

Part F: 09 items were constructed on the bases of pregnancy/conception.

Part G: 04 items were prepared as regards with importance of Nutrition.

RESULTS

The data presented under the following sections:

Section I : Distribution of sample characteristics according to demographic variables of respondents.

Section II : Analysis and interpretation of knowledge scores of subjects regarding Reproductive health.

Section III : Testing hypotheses.

Section I: Distribution of sample characteristics according to demographic variables of respondents.

Table 1: Frequency and percentage distribution of rural adolescent girls according to their socio-demographic variables.

Demographic Variables	n=200	
	Frequency (F)	Percentage (%)
<i>Age (in year)</i>		
17 years	82	41
18 years	101	50.5
19 years	17	8.5

Demographic Variables	Frequency (F)	Percentage (%)
Course of the study		
P.U.C I Year	94	47
P.U.C II Year	106	53
Religion		
Hindu	134	67
Muslim	39	19.5
Christian	23	11.5
Others	04	02
Educational Status of the Mother		
No formal education	43	21.5
Primary education	32	16
Secondary education	88	44
Pre-University	29	14.5
Graduation & above	08	04
Educational Status of the Father		
No formal education	23	11.5
Primary education	31	15.5
Secondary education	78	39
Pre-University	51	25.5
Graduation & above	17	8.5

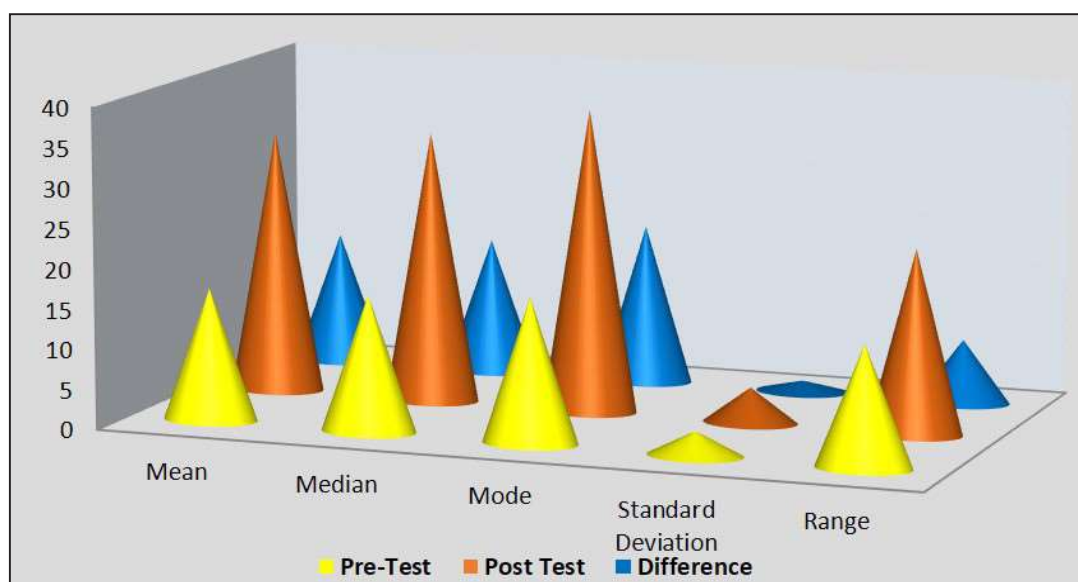
Demographic Variables	Frequency (F)	Percentage (%)
Occupation of Mother		
House-wife	103	51.5
Cooli	68	34
Job Holder	29	14.5
Occupation of Father		
Own Business	72	36
Cooli/Farmer	89	44.5
Govt/Private Job	39	19.5
Age at Menarche		
11-13 years	94	47
14-16 years	106	53
Source of Information		
Print media	43	21.5
Electronic media	32	16
New age group media	64	32
Peer group	41	20.5
Health Professional	20	10

Section II: Analysis and interpretation of knowledge scores of subjects who have exposed to Constructive Teaching Program regarding reproductive health.

Table 2: Mean, Median, Mode, Standard Deviation and Range of knowledge score of subjects regarding Reproductive health.

n=200

Area of Analysis	Mean	Median	Mode	Standard deviation	Range (H-L)
Pre-Test	16.54	17	18	3.01	15
Post-test	33.03	34	38	4.40	23
Difference	16.49	17	20	1.39	08



Graph 1: Cone graph showing Mean, Median, Mode, Standard deviation and Range of rural adolescent girls

Table 3: Frequency and percentage distribution of knowledge scores of subjects regarding Reproductive health

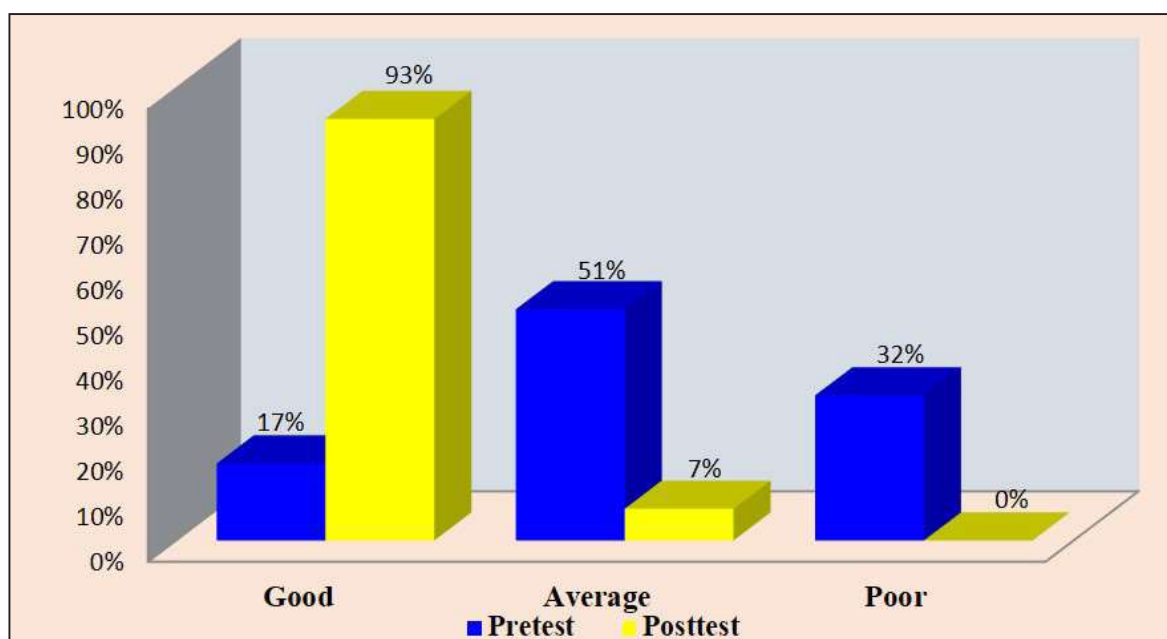
n=200

Knowledge Scores	Pre-test		Post-test	
	Frequency (f)	Percentage (%)	Frequency (f)	Percentage (%)
Good (19 & above)	34	17	186	93
Average (13-19)	102	51	14	07
Poor (13 & below)	64	32	00	00

It was found from table 3 that

The knowledge scores of rural adolescent girls regarding reproductive health reveals that, the pre-test knowledge scores were thirty four [34(17%)] good, hundred and two [102(51%)] average and sixty four [64(32%)]

poor, where as the related to post test knowledge scores seventy six [186(93%)] were good, fourteen [14(7%)] were average and none were poor.



Graph 2: The cone diagram represents the distribution of the subjects according to their level of knowledge scores.

Section III: Testing of hypotheses

H₁: The mean post-test knowledge scores of rural adolescent girls of selected Pre University colleges regarding reproductive health who

will be exposed to CTP will be significantly higher than the mean pre-test knowledge scores at 0.05 level of significance.

Table 4: Mean difference (d), standard error of difference and paired 't' values of knowledge scores of subjects regarding reproductive health

n =200

Group	Group Mean difference (d)	Standard error of difference	Paired 't' Values	Paired 't' Values	
				Cal	Tab
Rural Girls	29.7	3.05	29.75*	29.75*	2.04

* Significant at 0.05 level

H2: There will be statistical association between pre-test knowledge scores of rural adolescent girls regarding reproductive health with their selected demographic variables at 0.05 level of significance.

The calculated chi-square values were greater than the table value in two variables those were, Occupation of Father and Age at Menarche. Hence in these two variables there was statistical association. Hence H_2 was accepted. Where as in the variables like age, Course of the study, Religion, Educational Status of the Mother, Educational Status of the Father, Occupation of Mother and Source of Information, the calculated chi-square value was lesser than the table value. Hence H_2 was rejected in these variables.

DISCUSSION

The overall pretest knowledge scores of rural adolescent girls revealed that majority of subjects 102 (51%) had an average knowledge, 64 (32%) had poor knowledge and 34 (17%) had good knowledge in pre-test, where as in post-test, 186 (93%) of them had good knowledge and 102 (51%) had an average knowledge. The facts analyzed were found matched with to the findings of the research under taken by Dasgupta A, Sarkar M, who observed that most of the adolescent girls 81(84.4%) had poor knowledge, 15 (15.6%) had average knowledge and none of them had good knowledge regarding reproductive health in pretest, where as in posttest, majority 89 (92.7%) of the subjects had awesome grasping power, 06 (6.25%) held with a mainstream insight and 1(1.04%) had poor knowledge.

RECOMMENDATIONS

On the basis of study findings the following recommendations have laid;

- A same kind of quest can be carried out for huge study representatives for a lengthier period of time; hence broader generalizations would be done.
- A similar audit study would be replicated in different settings.
- A similar study can be conducted on attitude of rural adolescent girls towards selected aspects of reproductive health.
- A comparative study can be done between rural High school and PUC girls.

CONCLUSION

Based on the findings of the study, the following conclusions were drawn:

1. The overall general pre-test knowledge level regarding reproductive health was an average among the rural adolescent girls.
2. The post-test knowledge scores of girls who were exposed to constructive teaching program showed significantly improvement in the level of knowledge regarding reproductive health.
3. The overall information from the study suggested that constructive teaching program was more.

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