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A Study to Assess the Effectiveness of Structured Teaching Programme on Knowledge Regarding Prevention of Adolescent Mental Health Problems among the Students in a Selected Higher Secondary School at Gonda, Uttar Pradesh

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ABSTRACT

Mental health is an important part of overall health for children as well as adults. For many adults who have mental disorders, symptoms were present but often not recognized or addressed in childhood and youth-early treatment can help prevent more severe, lasting problems as a child grows up. Adolescent period, 10-19 years is a unique and formative time. While most adolescents have good mental health, multiple physical, emotional and social changes, including exposure to poverty, abuse, or violence, can make adolescents vulnerable to mental health problems. Promoting psychological well-being and protecting adolescents from adverse experiences and risk factors which may impact their potential to thrive are not only critical for their well-being during adolescent, but also for their physical and mental health in adulthood. Mental illness is maladjustment in living. It produces a disharmony in the person's ability to meet human needs comfortably or effectively and function within a culture. About 10–20% of children and adolescents have a mental health problem of some type. Manifestations such as attention deficits, cognitive disturbances, lack of motivation, and negative mood all adversely affect scholastic development. It is often unclear what factors associated with school affect children's mental development and what preventive measures and interventions at school might be effective. The prevalence of hyperkinetic disorder is 1–6%. Its main manifestations are motor hyperactivity, attention deficit, impulsive behavior. Learning disorders such as dyscalculia and dyslexia affect 4–6%of children each, while 4–5% of children and adolescents suffer from depression, which is twice as prevalent in girls as in boys. The risk of developing an internalizing or externalizing mental health problem can be lessened by changes in the school environment and by the implementation of evidence-based school programs. Title of the study was "A study to assess the effectiveness of structured teaching programme on knowledge regarding prevention of adolescent mental health problems among the students in a selected higher secondary school at Gonda, Uttar Pradesh. To assess the pre-test knowledge level regarding prevention of adolescent mental health problems among the students. To develop and administer the structured teaching programme on knowledge regarding prevention of adolescent mental health problems among the students. To assess the post-test knowledge level regarding prevention of adolescent mental health problems among the students. To determine the effectiveness of structured teaching programme on knowledge regarding prevention of adolescent mental health problems among the students. To find the association between pre-test knowledge score regarding prevention of adolescent mental health problems among the students and the selected socio- demographic variables.. Methodology adopted for the study was quantitative research approach with a pre experimental design was adopted. In this study, the sample consists of 50 higher secondary school children who fulfilled the inclusion criteria for the study. The purposive sampling technique was used for this study. A structured Socio demographic variables and Knowledge questionnaire on prevention of adolescent mental health were selected based on the objectives of

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the study. The tools are prepared in two sections. Section A was socio- demographic data, and the Section – B was Knowledge questionnaire on prevention on adolescent mental health. Validity of the tool was established with experts. For the main study the data collected from higher secondary school children who fulfilled the inclusion criteria. The collected data was tabulated according to various parameters and the complete analysis was done with descriptive and inferential statistics. The study concluded STP was effective to bring good knowledge regarding prevention of adolescent mental health.

KEYWORDS: *Mental Health, Adolesent Period, Attention Deficit*

Need for the study:-

Worldwide, it is estimated that 10–20% of adolescents experience mental health conditions, yet these remain underdiagnosed and undertreated. Signs of poor mental health can be overlooked for a number of reasons, such as a lack of knowledge or awareness about mental health among health workers, or stigma preventing them from seeking help.

According to national mental health survey of India 2015-16 during the past few months, mental health has received public and media attention in an unprecedented manner. This was related to the release of the report of the national mental health survey (NMHS). Every 6th Indian needs mental health help, mental problems more in 30-49 age group or over 60; low income linked to occurrence of mental disorders, one in 24 (4.1%) has a serious mental illness, one in 12 (8.5%) has a diagnosable substance use disorder and 8% of people in Karnataka have mental illness. Prevalence and pattern of mental health problems India: findings from the National Mental Health Survey 2015-16. In this study, the survey was conducted on 3508 adults. Current and life time prevalence of any mental morbidity (excluding tobacco used disorder) was 6.08% and 7.97% respectively. Neurotic and depressive disorders were the next most common morbidity. Schizophrenia and other psychotic disorders had a current prevalence of 0.09% high risk for suicide was reported to be 0.93%.7 A reported study suggests that in Uttar Pradesh, one in 10 people suffer from some sort of mental illness. Almost 7.5% of Indian suffers from major or minor. Mental disorders that require expert interventions, which is lower than UP's alarming rate of 8.7%.

Prevention of some mental disorders in young people appears to be possible. Several small and medium randomised controlled trials show that some anxiety, affective and substance-use disorders can be prevented thus, prevention becomes more important.

With regard to the above facts and findings, along with the professional and personal experiences, the investigator felt that it is essential to bring awareness among the adolescents about the prevention of mental disorders. Hence the investigator was motivated to conduct this study among adolescents in selected schools of Gonda district, U.P.

Objectives

1. To assess the pre-test knowledge level regarding prevention of adolescent mental health problems among the students.
2. To develop and administer the structured teaching programme on knowledge regarding prevention of adolescent mental health problems among the students.
3. To assess the post-test knowledge level regarding prevention of adolescent mental health problems among the students.
4. To determine the effectiveness of structured teaching programme on knowledge regarding prevention of adolescent mental health problems among the students.
5. To find the association between pre-test knowledge score regarding prevention of adolescent mental health problems among the students and the selected socio- demographic variables.

Material and method:-

Research approach and design:- Quantitative approach with pre experimental design was adopted.

Setting of the study:- Rosewood Intercollege Gonda, Uttar Pradesh

Study population:- Students

Accessible population:- Higher secondary school students of selected schools at Gonda, Uttar Pradesh.

Sample size:- 50

Sampling technique:- Purposive sampling technique.

Inclusive criteria:

1. The Students are studying in 11th and 12th standard
2. Both male and female.
3. Who are available at the time of the time of data collection
4. Who are willing to participate in the study.

Exclusion criteria

1. Those students who are not able to attend pre-test and post-test.

2. Those students who are sick at the time of study
3. The students who are expose same type of study earlier.

Variables under study

Independent variable: The independent variable is structured teaching programme on knowledge regarding prevention of adolescent mental health problems.

Dependent variable: The dependent variable is student's knowledge regarding prevention of adolescent mental health problems.

Demographic variables:- Age, gender, level of study, religion ,area of residence, type of family, monthly income of the family, education of father, occupation of father, previous knowledge regarding prevention of mental disorders.

Description of Tools

A structured Knowledge questionnaire was used to collect data for this study. The tool has 2 sections. They are;

Section A – Socio-Demographic Data

It consists of demographic variables like age, gender, level of study, religion, area of residence, type of family, monthly income of the family, education of father, occupation of father, previous knowledge regarding prevention of mental disorders.

Section B – Knowledge questionnaire on prevention of adolescent mental health.

It is a structured tool to assess the level of knowledge regarding the prevention of adolescent mental health. This comprised of 30 questions which has four options. Among four one is the correct response scored as 1 and incorrect response scored as 0.

Table.4.2. Scoring procedure for level of knowledge

Level of knowledge	Scores	Percentage of scores
Poor	0 – 7	0 – 23.33 %
Average	8 – 15	26.66 %- 50%
Good	16 – 23	53.33 - 76.66%
Excellent	24 – 30	80% - 100%

Data collection procedure:-

Permission from the concerned authority Prior to collection of data, permission was obtained from the principal Rosewood Intercollege Gonda, Uttar Pradesh.

Pre test Students were requested to complete structured questionnaire, before the structured teaching programme.

Implementation of structured teaching programme The structured questionnaire was discussed with Students once in a day for 5 days with the duration of 30 minutes

Post test After 7 days post-test was conducted. Students were requested to complete structured questionnaire, after the structured teaching programme.

Limitations of the study

The study is delimited only to:-

1. The students studying in a selected school at Gonda district, Uttar Pradesh.
2. The students studying in 11th and 12th standards.
3. A period of 4 to 6 weeks.
4. A sample size of 50 students.

Analysis and interpretations

Section I:- Base line characteristics of participants.

SECTION A: Description of samples according to their demographic variables

SL. NO	Demographic variables	Experimental group	
		Frequency	Percentage
1	**Age**		
	a) 14-15 Years	14	28%
	b) 16-17 Years	25	50%
	c) 18 Years and above	11	22%
2	**Gender**		
	a) Female	22	44%
	b) Male	28	56%
3	**Level of study**		
	a) Class XI	30	60%
	b) Class XII	20	40%
4	**Religion**		
	a) Hindu	24	48%
	b) Muslim	14	28%
	c) Other	12	24%

5	**Area of residence**		
	a) Urban	12	24%
	b) Rural	13	26%
	c) Semi-urban	20	40%
6	**Type of family**		
	a) Nuclear family	21	42%
	b) Joint family	29	58%
7	**Monthly income of the family**		
	a) Less than Rs .15,000	12	24%
	b) Rs. 15,001 – 25,000	13	26%
	c) Rs 25,001 – 50,000	16	32%
	d) Rs 50,001 and above	9	18%
8	**Education of father**		
	a) Illiterate	14	28%
	b) Primary	11	22%
	c) Secondary	8	16%
	d) Graduate and above	17	34%
9	**Occupation of father**		
	a) Professional	10	20%
	b) Skilled/Unskilled labor	20	40%
	c) Self-employed	9	18%
	d) Unemployed	11	22%
10	**Main Source of previous knowledge**		
	a) Friends	19	38%
	b) Mass Media	16	32%
	c) Health professionals	15	30%

SECTION B: Assess the level of Knowledge regarding prevention of adolescent mental health problems among the students before and after structured teaching programme.

Table 2 Frequency and percentage distribution of pre & post test scores on knowledge regarding prevention of adolescent mental health problems.

(n=50)

Level of knowledge	Scores	Pre test		Post test	
		Frequency (N)	Percentage (%)	Frequency (N)	Percentage (%)
Poor	0 – 7	18	36%	0	0%
Average	8 – 15	32	64%	5	10%
Good	16 –23	0	0%	43	86%
Excellent	24– 30	0	0%	2	4%

Table 2 shows the frequency and percentage distribution of pre and post test scores of students. The result depicts that in pre-test 36% of students had poor knowledge, 64% of students had average knowledge and no one had good level of knowledge. In post-test 10% of students had average knowledge, 86% of students had good knowledge and 4% of students had excellent knowledge regarding prevention of adolescent mental health problems.

SECTION C: Assess the effectiveness of structured teaching programme on Knowledge regarding prevention of adolescent mental health problems among the students

Table 3. Mean, SD, and Mean percentage of pre and post test scores of students.

Purposively selected students	Mean	SD	Mean Percentage	Difference in mean percentage
Pre-test	7.88	± 2.29	26.26	36%
Post test	18.68	± 2.59	62.26	

Table 3 shows Mean, SD, and Mean percentage of pre and post test scores of students in experimental group. The result shows that the pre-test mean was 7.88 ± 2.29 whereas in post-test 18.68 ± 2.59 and the difference in mean percentage was 20%. The result shows that there was a significant difference between pre and post-test knowledge scores.

Table 4 Paired "t" test value of pre and post-test knowledge scores of students

Purposively selected students	Calculated Paired 't' value	Degree of freedom	Table value	Level of significance
Pre test	7.71	29	2.04	Significant
Post test				

*** P < 0.05 Significance**

Table.4 shows that paired "t" test was calculated to analyse the effectiveness between pre and post-test knowledge scores of students. The paired "t" test score was 7.71. When compared to table value (2.04) it was high. It seems that the structured teaching programme was most effective on effectiveness on knowledge regarding prevention of adolescent mental health problems among students.

SECTION D:

The association between the post test scores of Knowledge regarding prevention of adolescent mental health problems among the students and their selected demographic variable among students.

Table 5 Chi -square value of association between the post test scores of Knowledge and their selected demographic variable among students.

SL. No	Demographic variables	No.	%	≤ Median	> Median	Chi-square
1	**Age**					
	a) 14-15 Years	14	28%	10	4	df=2 5.83, NS
	b) 16-17 Years	25	50%	8	17	
	c) 18 Years and above	11	22%	6	5	
2	**Gender**					
	a) Female	22	44%	14	14	df=1 0.086, NS
	b) Male	28	56%	10	12	
3	**Level of study**					
	a) Class XI	30	60%	2	28	df=1 27.95, S
	b) Class XII	20	40%	16	4	
4	**Religion**					
	a) Hindu	24	48%	12	12	df=2 4.2, NS
	b) Muslim	14	28%	9	5	
	c) Other	12	24%	3	9	
5	**Area of residence**					
	a) Urban	12	24%	10	2	df=2 14.25, S
	b) Rural	13	26%	10	8	
	c) Semi-urban	20	40%	14	6	
6	**Type of family**					
	a) Nuclear family	21	42%	13	8	df=1 2.25, S
	b) Joint family	29	58%	11	18	
7	**Monthly income of the family**					
	a) Less than Rs .15,000	12	24%	7	5	df=3 2.53, NS
	b) Rs. 15,001 – 25,000	13	26%	4	9	
	c) Rs 25,001 – 50,000	16	32%	9	7	
	d) Rs 50,001 and above	9	18%	4	5	
8	**Education of father**					
	a) Illiterate	14	28%	7	7	df=3 1.02, NS
	b) Primary	11	22%	5	6	
	c) Secondary	8	16%	5	3	
	d) Graduate and above	17	34%	7	10	
9	**Occupation of father**					
	a) Health Professional	10	20%	6	4	df=3 1.19, NS
	b) Skilled/Unskilled labour	20	40%	12	8	
	c) Self-employed	9	18%	6	3	
	d) Unemployed	11	22%	6	5	

10	**Main Source of previous knowledge**					
	a) Relatives/ Friends	19	38%	4	15	df=2 7.26, S
	b) Mass Media	16	32%	10	6	
	c) Health professionals	15	30%	4	11	

*** P < 0.05 Significance**

Chi square test was calculated to find out the association between the pre-test scores of students with their demographic variables. A statistically significant association found between the demographic variables such as level of study, area of residence, and main source of previous knowledge with their pre-test knowledge scores. There is no statistically significant association found between the demographic variables such as age, gender, religion, type of family, monthly income of the family, education of father, occupation of father with their pre-test knowledge scores. Hence it can be interpreted that significant association found between the demographic variables such as level of study, area of residence, and main source of previous knowledge with their pre-test knowledge scores and there is non-significant association between pre-test scores of students with the demographic variables such as age, gender, religion, type of family, monthly income of the family, education of father and occupation of father.

Conclusion:-

After administering structured teaching program on prevention on adolescent mental health. The post level of knowledge among higher secondary school children revealed that all 50 students belong to good knowledge category.

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