A Study to Assess the Effectiveness of Structure Teaching Programme on Knowledge Regarding Depression Related to Stress among B.Sc. Nursing 2nd Semester Student in College of Nursing, Baba Educational Society Chinhat, Lucknow

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ABSTRACT

Depression is a major health problem globally. Depression is the second leading cause of death among people. Depression affects all population youth of any race, ethnicity gender identity, sexual orientation Socio economic status or community may be at risk for depression. Depression is complex but often preventable. Depression is the act of killing once owns self-voluntary. The mean post- test knowledge score (25) was greater than the mean pre-test score (14.9). The mean difference between pre-test and post-test score was (10.1). Pared 't' score was 9.73 and it was significant at $p<2.045$ level. Hence research hypothesis H1 was accepted. This indicates that the STP was effective in increasing the knowledge of nursing students regarding depression.

KEYWORDS: *Structured teaching programme, nursing students, effectiveness.*

INTRODUCTION
BACKGROUND

Depression is a major health problem globally. Depression is the second leading cause of death among people. Depression affects all population youth of any race, ethnicity gender identity, sexual orientation Socio economic status or community may be at risk for depression. depression is complex but often preventable. Depression is the act of killing once owns self-voluntary.

The word suicide is derived from two Latin Word "Sui" meaning oneself and "cudium" from caedre, to kill Hence, depression is an act of willfully ending Owens own life. Depression is a type of deliberate self-harm and is define as human act of self-intentioned and self-Inflected cessation. In U.S. depression ranks among the top ten cause of death across all ages.

The world health organization estimates that approximately 1 million people die each year from Depression What drives so many individual to take their own lives? To those who are not in the grips of suicidal depression and desire, it's difficult to understand what drives so many individuals to take their own lives. But a depression person is in so much pain that they can see no other option.

Depression has been widely deliberate in student population of university. Even though study has revealed entire depression ratio of college going students as compared to the whole population,

Silverman, Meyer, Sloane, Raffel, and Pratt (1997) since 1950 a remarkable increase in suicidal rate was noticed among this population, in particularly for those 15-24 years old (Hirsch and Ellis, 1993).

Depression is a desperate attempt to escape suffering that has become unbearable. Blinded by feelings of self-loathing, hopelessness, and isolation, a suicidal person can't see any way of finding relief except through death. But despite their desire for the pain to stop, most depression people are deeply conflicted about ending their own lives. They wish there was an alternative to depression, but they just can't see one.

More than one lakh lives are lost every year due to suicide in India. In the last two decades depression rate are increased. There are numerous reason and factor which leads to committing depression. depression is an irrational desire to die. We use the term "irrational '' here because no matter how bad a person's life is' depression is a permanent solution to what is nearly always a temporary problem. Depression is a symptom and sign of serious depression. Depression is a treatable disorder, but often the treatment takes time, energy and effort on the part of the person who's feeling depressed. Sometime, as a person who is depressed feels the energizing effects of an antidepressant medication, they will still feel depressed, but have more energy. It is during this time in treatment that many people turn to suicide and suicidal acts.

Strang and Orlofsky (1990) evaluated that about sixty one percent students of college experience a little thoughts of depression during college time. It is an upsetting figure. Furthermore, they reported poorer relationship of parents with students positively correlated with as compared to non- depression students. The students belong to families having too much rigid belief; attitude and values feels that people has too much expectation from them. These students are at greater risk to depression (Carris, Sheeber and Howe, 1998).

Depression rates differ between boys and girls. Girls think about and attempt depression about twice as often as boys, and tend to depression. The common depression includes overdosing on drugs or cutting themselves. The deaths rates are due to depression among boys are four times than girls. Perhaps the reason may be, they tend to use more lethal method such as firearms, hanging, or jumping from height.

Depression, commonly known by several names like completed depression, deliberate self-harm, self-assault, self-insult etc. It has been described as the end of a continuum that begins with depression ideation, continues with planning and preparing for

depression related to stress& ends with threatening, attempting & completing depression related to stress. (Kuchar, Potter, Powell, 1995).

Adolescence is a stressful experience for all teens. It is a time of physical and social changes producing rapid mood swings from sadness to elation. Even an emotionally healthy teenager may have the constant fear of not being good enough, not making the varsity team, or getting good grades. Special situations such as a parents divorce can trigger intense sadness and feelings of wanting to die.

The common cause for depression related to stress due to poison is the most common method among males (31%), followed by hanging (26%), firearms (16%), burns (11%), drowning (10%), and, finally, falling from a height (6%).The distribution of cause of death among female shows that depression related to stress that depression related to stress due to poison among females(48%), followed by burns (12%), drowning and falling from a height (70% and 6% each), hanging (24%), and finally firearm (3%). According to the lethality ratio, hanging was found to be the most lethal depression related to stress method, followed by jumping from a height and drowning. Drug poisoning and stabbing were relatively less than method of depression related to stress.

Sign and symptoms of depression related to stress among all age group are characterized by feelings of hopelessness, self- blame, negative thoughts and social withdrawal, inhibited aggression turned toward the depression fantasies and planning, somatic symptoms like sleep problems, fatigue and loss of appetite can be seen among adolescents. Depression related to stress tendencies also increase with greater expectations from the parents and with academic pressure. Most people who have suicidal thoughts do not go on to make suicidal attempts, but depression related to stress thoughts are considered risk factors. Depression related to stress efforts require coordination and collaboration among multiple sectors of society, including the health sector of suicide, including the health sector and other sectors Such as education, labour, agriculture, business, justice, law, defense, politics, and the media. These efforts must be comprehensive and integrated as no single approach alone can make an impact on an issue as complex as depression related to stress.

Depression related to stress places have burden on the nation in terms of emotional suffering that families and communities experience as well as the economic costs associated with medical care and lost productivity. And yet depression related to stress often continue to be met with silence and shame. These attitudes can be formidable barriers ton

providing care and support to individual in crisis and to those who have lost a loved one to depression related to stress.

Depression related to stress efforts require coordination among multiple sectors of society, including the health sector and other sectors such as education, labour, agriculture, business, Justice, law, defense, politics, and the media. These efforts must be comprehensive and integrated as no single approach alone can make an impact on an issue as complex as depression related to stress.

Depression related to stress is a collection of effort to reduce the risk of depression related to stress. depression related to stress is often preventable, and the effort to prevent it may occur at the individual, relationship, community, and society level. Depression related to stress is a serious health problem that can have long-lasting effects on individuals, families, and communities. Preventing depression requires strategies at all levels of society. This includes prevention and protective strategies of individuals, families, and communities. Suicide can prevent by learning the warning sign, promoting prevention and resilience, and committing ton social change.

Depression related to stress research and prevention require accurate evaluation of depression phenomenon. Some knowledge of and proper attitude to suicidal ideation promotes optimal depression outcomes. Approach to depression related to stress may include restrictions to lethal weapons or substances and physician education to assess the depression risk of individuals. This would go a long way in reducing suicidal deaths worldwide. Communities play acritical role in suicide prevention by providing social support to vulnerable individuals, providing help in crisis, engaging in follow-up care, fighting stigma and supporting those bereaved by depression.

depression starts with recognizing the warning signs and taking them seriously. If you think a friend or family member is depression related to stress, there's plenty you can do to help save a life.

The leading expert in the field of depression related to stress, Dr. John Draper defines the three Cs of depression crisis response as connection, collaboration, and choice. Connection implies that the person in crisis is made to feel understood and not isolated.

Depression related to stress is preventable. Knowing the risk factors and recognizing the warning signs for suicide can help prevent depression. depression is linked to mental disorders, particularly depression

and alcohol use disorders, and the strongest risk factor for previous depression attempt.

World depression day was formally announced on 10th September, 2003.Each year the International Association for depression related to stress (IASP) in collaboration with WHO uses this day to call attention to depression as a leading cause of premature and preventable death. The theme for the year 2024 is "depression related to stress. - Changing the Narrative on depression". In an effort to address this issues and encourages positive change. The aim of the theme is **to** raise awareness about the importance of changing the narrative surrounding and transforming how we perceive this complex issue.

NEED OF THE STUDY
Depression related to stress is an important issue in the Indian context. More than one lakh lives are lost every year to depression related to depression in our country. In the last two decades, the depression rates have increased. Majority of the depression in India are by those below the age of 30 years. Depression rates are increasing day by day because of terrain life of human Being in the competitive world. The general population of facing lots of physical, psychological and social Problem because of lacuna in dealing with stressful situation the people prefers suicide as easy escape for their problem.

The fact that 71%of depression in India are by the person below the age of 44 years imposes a huge social, emotional and economic burden on our society. Rates are higher in urban than rural settings. Studies of completed suicide show that 90-94% of patients are mentally ill while committing the act. Depression rates in Army, Air Force and naval personnel were 0.04, 0.11 and 0.12 per thousand respectively.

There are many studies done all over the world indicate that there is increase in depression rate in all the age groups. Following are the few studies suggest about increase in depression among the college students in different places of the world.

There were a total of 14,426 depression in Maharashtra as against the national count of 1, 13,914 suicides in 2005. In 2009, there were 14,300 suicides in Maharashtra against the country's count of 1, 27,151. The analysis also showed that Maharashtra ranked 13th, accounting for 11.2% of total suicides in the country with a suicide rate of 13.2. Bangalore topped the list followed by Chennai.

Newspapers from different areas of country are full of depression. For reasons that are difficult to fathom, the cities are suddenly rocked by a spate of suicides. The most heart-wrenching are reports about

depression by a large number of school students. Student depression increased by 26 % from 2006 to 2010, with metros Chennai, Delhi and Mumbai having most victims, in that order. While 5,857student depression were reported in 2006, the figure jumped to 7,379in 2010, according to data released by the National Crime Records Bureau. Both academicians and mental health professionals blame on a flawed education system where performance pressure ranks above all ales. Number of students committed suicide in 2006 are 5857, 2007are 6248, 2008 are 6060, in 2009 are 6761 and in 2010 are 7379.These numbers give idea about increasing trend in student's depression.

The University of Maryland's College and University Counseling Center directors" data bank reported 163 depression in 78 large and 85 small colleges (Magoon, 2000). These in 78 large and 85 small colleges (Magoon, 2000). These colleges had a combined population of approximately 1,730,000 students. Thus, the depression rate for these schools is 9.4/100,000, somewhat higher than the rates reported in the data from the previous studies.

A cross-sectional survey done by Bhola P, Rekha DP, etal. (2013) assessed self-reported suicidal ideation, suicide attempts and help seeking behavior among adolescents attending a pre-university college in Bangalore, India. The results indicated that 25.4% of the adolescents reported suicidal ideation (past 3 months) and 12.9% of the total sample expressed their need for seeking help. The rate of suicide attempt was 12.9% (lifetime) and 6% (past 3 months). Females attempt was 12.9% (lifetime) and 6% (past 3 months). Females had higher rates of suicide ideation and attempts than males.

In 2016, a total of 1,350 students ended their lives in Maharashtra. In the same year, West Bengal witnessed the second highest number of student depression (1,147), followed by Tamil Nadu (981). Pondicherry (43.2%), Sikkim (37.5%) and Tamil Nadu (22.8%) had the highest rates of suicide. They were 19,120 suicides in India's 53 cities. Among the cities, Chennai (2,183), Bangalore (1,989), Chennai and Delhi (1,397) accounted for nearly 50% of the total suicides in the country. Suicide is now recognized as a public health and social problem in every country including India.

In India, NCRB records the depression rates every year since 1967. The record for the last decade from 2009 to 2019 shows an increasing trend in suicide. The rate was higher in the year 2011(135585) and showed a slight decrease from the 2012 and again an increasing trend from 2015. It reached the highest in the year 2019 (139123).

Theory of Shneidman (1985) and Matthews (2012) approach of CBT point out the psychological risk factors relating to the suicidal individual and was found to be appropriate for the present study. As depression is conditionally preceded by the risk factor, suicide ideation (WHO 2015) it is necessary to focus on eliminating depression ideation. If ideation is unattended, it may escalate into a suicide attempt. Therefore, the present study attempted to study the psychological risk factors of depression, observed in depression ideators and design a psychological approach to strengthen the individual to cope up with problem situation.

According to the data published by the WHO, nearly 8, 00, 000 people die due to suicide every year, which is one person every 40 seconds. Depression is the second leading cause of death among 15-29-year-olds globally 79 percent of suicides occurred in low and middle-income countries in 2016 depression accounted for 1.4 per cent of all deaths worldwide, making it the 18th leading cause of death in 2016 Failure in examinations led to 2,413suicides by students in 2016 -- or seven every day -- accounting for percent of student suicides. The National Crime Records Bureau (NCRB) in its 2015 data made a shocking revelation that in India, one student commits depression every hour.

Objective

1. To assess pre-test knowledge regarding depression among B.Sc. nursing2nd sem.student college of nursing, baba educational society chinhat, Lucknow.

2. To formulate and administered structured teaching programme of depression among students.

3. To assess post-test knowledge regarding suicide prevention among students.

4. To assess the effectiveness of structured teaching programme on depression among students.

5. To find out association between pre-test and post-test score of knowledge with demographic variable

Operational definition
ASSESS
The act is planned by the researcher to evaluate the knowledge of student regarding depression by using a structured questionnaire.

Effectiveness
In this study it refers to find out a desired result of structured teaching programme regarding depression among students.

Structured teaching programme

It refers to form a structured teaching design to provide information regarding depression among student.

Knowledge

A study to find out fact information and skill acquired through education the theoretical or practical understanding of a subject..

Hypothesis

H1: There will be significant difference between mean pre-test and post-test score of knowledge regarding depression among students.

H2: There will be significant association between pre-test knowledge score with their selected demographic variable

Assumptions

The study assumes that:

➢ Students have some knowledge regarding depression.

➢ Education regarding suicide prevention will help them to gain knowledge

➢ Knowledge regarding suicide prevention will help them to save the life.

Delimitation

➢ The study delimited to B.Sc. nursing 2ndsemester student.

➢ The study delimited to student who are willing to participate in the study.

Research approach

The evaluative approach was adopted by the researcher to find the effectiveness of structured teaching Programme on knowledge regarding depression related to stress among student B.Sc. (N) 2ND Semester Student College of nursing baba educational society, chin hat, Lucknow.

Research design

The research design selected for this study one group pre-test and post-test research design.

Group	Pre-tests assess of knowledge	Structured teaching programme	Post-tests assess of knowledge
30 selected sample of student in a baba college of nursing baba educational society, chinhat, Lucknow.	O1	X	O2

Diagrammatic presentation of research design

O1   Pre-test assessment of knowledge
X   Structured teaching programme
O2   Post-test assessment of knowledge

Research setting

The study conducted in the baba college of nursing BSc. (N) 2nd Sem. Student

Target population

In this study target population was students who are college of nursing baba educational society, chinhat, Lucknow.

Accessible population

The accessible population was student BSc. (N) 2nd Sem. who are studying in College of nursing baba educational society, chinhat, Lucknow.

Variables of the study
Dependent variable

In this study, the level of knowledge regarding prevent a depression is dependent variable.

Independent variable

In this study structured teaching program on knowledge regarding depression among students.

Sampling

Sample was taken from College of nursing. In this study sample consist of student B.Sc. (N) 2nd sem. who met the inclusion criteria.

Sample size

Sample size consists of 30 students.

Sampling technique

The researcher adopted non-probability purposive random sampling technique to select the sample for this study.

Criteria for selection of sample
The sample was selected based on the following criteria.

Inclusion criteria
➢ Students belong to the age group between 18-24years.
➢ Students who are willing to participate in the study.

Exclusion criteria
➢ Who was not present at the time of the data
➢ Who will not be willing to participate in study

RESULT
This chapter deals with the analysis and interpretation of data collected from 30 nursing students to assess their knowledge regarding depression related to stress. The purpose of theanalysis is to reduce the data into an interpretable and meaningful form so that the results can becompared, and significance can be identified. Analysis has been defined as categorizing,ordering, manipulating and summarizing data to obtain answers to research hypothesisquestions.

A pre-experimental research design with an evaluative approach was used in the presentstudy. The data collection was based on the objectives of the study and organized, tabulated,analyzed, and interpreted by using descriptive and inferential statistics and described with helpof tables.

OBJECTIVES OF THE STUDY
➢ To assess the pre-test knowledge regarding depression among nursing students.
➢ To formulate and administered STP regarding depression among nursing students.
➢ To assess the post- test knowledge regarding depression among nursing students.
➢ To assess the effectiveness of a structured teaching programme on knowledge regardingdepression among nursing students.
➢ To find out the association between pre-test knowledge score with their s selected, demographic variables

The data is presented under the following section.
Section- A: Description of sample characteristics.
Section-B: Knowlwdge of nursing student regardingdepression.
Section –C: Effectiveness of STP on knowledge regardingdepression.
Section –D: The association between pre- test knowledge score and their selected demographic variables.

Section – A : Description of sample characteristics
Table : distribution of frequency and percentage analysis of selected variables

N=30

Sl No:	Demographic variables	Variables	frequency	Percentage (%)
1	Age	a. 19year	9	30%
		b. 20year	11	36.67%
		c. 21year	7	23.33%
		d. 22year	3	10%
2	Stream	a. B.sc nursing 1st/2nd semester	0	0%
		b. B.sc nursing 3rd/4th semester	30	100%
		c. B.sc nursing 5th/6th semester	0	0%
		d. B.sc nursing 4th year	0	0%
3	Previous knowledge	a. Yes	10	33.33%
		b. No	20	66.67%
4	Family income	a. 20000-30000	2	6.67%
		b. 30000-40000	8	26.67%
		c. 40000-50000	13	43.33%
		d. 50000 above	7	23.33%

Table-1. Revealed that 11(36.67%) participants were in the age group 20 year, 7(23.33%) were in the age group 21 year, 9(30%) participants were in the age group 19 year and 3(10%)were in the age group 22year.

Distribution of sample based on stream showed that 30(100%) participants were Bsc nursing 3rd/4th semester, 0(0%) paticipants were in B.sc nursing 1st/2nd semester, B.sc nursing 5th/6th semester and B.sc nursing 4th year.

Distribution of sample based on type of previous knowledge showed that 20(66.67%) participants have no any previous knowledge and 10(33.33%) participants have previous knowledge regarding surgical asepsis.

Distribution of sample based on family income showed that 13(43.33%) participants have earned 40000-50000/-Rs, 8(26.67%)participants have earned 30000-40000/-Rs, 7(23.33%)participants have earned 50000/-Rs above and 2(66.67%) participants have earned 20000-30000/-Rs.

Section-B:
A. Pre-test knowledge of nursing students regarding depression related to stress

n=30

Knowledge assessment	Frequency	Percentage
Poor	11	36.67%
Average	13	43.33%
Good	06	20%

Data from the above figure depicts that in pre- test 11(36.67%) subject had poor knowledge, 13(43.33%) subject had average knowledge and 6(20%) subject had good knowledge regarding depression related to stress.

B. Post- test knowledge of nursing students regarding depression related to stress.

Knowledge assessment	Frequency	Percentage
Poor	0	0%
Average	5	16.67%
Good	25	83.33%

Data from the above figure depicts that in post-test 0(0%) subject had poor knowledge, 5(16.67%) subject had average knowledge and 25(83.33%) subject had good knowledge regarding depression.

Section C: Effectiveness of STP on knowledge regardingdepression related to stress.
Table: 4 Effectiveness of STP on knowledge regarding depression.

N=30

Knowledge assessment	Mean	Mean difference	Standard deviation	Df	Paired 't' value	'p' value
Pre –test	14.9	10.1	5.52	29	9.73	<2.045 S*
Post-test	25		2.72			

NOTE: S*- Significant NS: Not Significant

The paired 't' value was computed to determine the effectiveness of STP among nursing student regarding depression. The following research hypothesis was stated.

H1= There will be significant difference between pre-test and post- test score of knowledge regarding depression among nursing students.

Table: 4 illustrates that the mean post- test knowledge score (25) was greater than the mean pre-test score (14.9). The mean difference between pre-test and post-test score was (10.1). Pared 't' score was 9.73 and it was significant at p<2.045 level. Hence research hypothesis H1 was accepted. This indicates that the STP was effective in increasing the knowledge of nursing students regarding depression.

Section –D: The association between pre- test knowledge score and their selected demographic variables.
Table: 5Association between pre- test knowledge score and their selected demographic variables.

N=30

Sl. No	Demographic Variable	Chi –Square Value (χ2)	Degree of Freedom (df)	Tabulated Value	Level of significance
1	Age	9.01	6	12.59	Not significance
2	Stream	0	6	12.59	Not significance
3	Previous knowledge	12.403	2	5.99	Significance
4	Family income	4.317	6	12.59	Not significance

Table: 5 finding revealed that, age, stream and family income have not significant association and only previous knowledge have significant association with knowledge. Hence the research hypothesis H2 was accepted.

DISCUSSION

This chapter attempts to discuss the significant findings on knowledge among nursing students. Research outcome is discussed based on the result of present work and quoting of the similar finding of the studies conducted in India and other countries. This chapter discusses the finding of the analysis in accordance with the objective and stated hypothesis of the present study.

The statement of the problem is:

"A study to assess the effectiveness of a structured teaching programme on knowledge regarding depression related to stress among nursing students in baba college of nursing college, Lucknow''

The first objective was to assess the pre-test knowledge regarding depression among nursing students.

At pretest score the majority of the students i.e. 43.33% had average knowledge, had 36.67% of students had poor knowledge. Only 20% of them had good knowledge regarding depression related to stress.

The second objective was to formulate and administered STP regarding depression among nursing students.

After pre-test on the same day the STP was given to the students to improve their knowledge regarding depression related to stress.

The third objective was to assess the post- test knowledge regarding depression among nursing students.

At posttest score the majority of the students 83.33% had good knowledge and 16.67% had average knowledge regarding depression related to stress.

The fourth objective was to assess the effectiveness of a structured teaching programme on knowledge regarding depression among nursing students.

Effectiveness of STP on knowledge regarding depression among students pretest that is 14.9 and posttest that is 25, stander deviation of pretest and posttest is 5.52, 2.27 respectively and calculated t value is higher than the tabulated t value at 0.05 level of significant it indicate that structured teaching plan (STP) is effective to increase the level of knowledge among students.

The fifth objective was to find out the association between pre-test knowledge score with their s selected, demographic variables.

The analysis was done to find out the association between the pre-test score of knowledge with demographic variables and it reveals that there was no one was found significant at 0.05 level of significance. This null hypothesis was rejected.

CONCLUSION

The present study was conducted to assess the effectiveness of STP on depression related to stress among baba college of nursing students. In this study pre-experimental research design was used by taking 30 samples through purposive sampling technique at selected nursing college from Lucknow. The data was collected by self-structured questionnaire and data were developed and interpreted by using descriptive and inferential statistics.

The following conclusion were made based on the findings of the study.

➢ The knowledge of students regarding depression was inadequate when assessed in pre-test, whereas the knowledge level showed a significant increase during post-test.

➢ Structured teaching programme regarding depression among student was effective. The analysis of mean and standard deviation of the knowledge score in pre-test and post-test showed that the mean pre-test score was (14.9) whereas the post-test knowledge score was (25). The paired 't' value (9.73) and mean difference (10.1) indicate that the knowledge level showed a significant increase during post-test which indicate STP was effective. Hence the research hypothesis H1 was accepted.

➢ Finding revealed that, information regarding depression in knowledge have significant association with knowledge. Hence the research hypothesis H2 was accepted.

SUMMARY

Finding related to socio demographic variables.

➢ Revealed that 11(36.67%) participants were in the age group 20 year, 7(23.33%) were in the age group 21 year, 9(30%) participants were in the age group 19 year and 3(10%)were in the age group 22year.

➢ Distribution of sample based on stream showed that 30(100%) participants were Bsc nursing 3rd/4th semester, 0(0%) paticipants were in B.sc nursing 1st/2nd semester, B.sc nursing 5th/6th semester and B.sc nursing 4th year.

➢ Distribution of sample based on type of previous knowledge showed that 20(66.67%) participants have no any previous knowledge and 10(33.33%) participants have previous knowledge regarding surgical asepsis.

➢ Distribution of sample based on family income showed that 13(43.33%) participants have earned 40000-50000/-Rs, 8(26.67%) participants have earned 30000-40000/-Rs, 7(23.33%) participants

have earned 50000/-Rs above and 2(66.67%) participants have earned 20000-30000/-Rs.

Finding related to students knowledge on depression.

In pre- test 11(36.67%) subject had poor knowledge, 13(43.33%) subject had average knowledge and 6(20%) subject had good knowledge regarding depression. In post-test 0(0%) subject had poor knowledge, 5(16.67%) subject had average knowledge and 25(83.33%) subject had good knowledge regarding depression. the mean post- test knowledge score (25) was greater than the mean pre-test score (14.9). The mean difference between pre-test and post-test score was (10.1). pared 't' score was 9.73 and it was significant at p < 2.045 level. Hence research hypothesis H1 was accepted. This indicates that the STP was effective in increasing the knowledge of nursing students regarding depression.

Finding related to association between pre-test knowledge score and demographic variables.

Finding revealed that, age, stream and family income have not significant association and only previous knowledge have significant association with knowledge. Hence the research hypothesis H2 was accepted.

IMPLICATIONS

The finding of the present study has implication not only in the field of nursing but also in allied areas. The information obtained could be utilized by the educators, curriculum planners and administrators. More research work needs to be conducted in this class in order to identify the problem related to depression. The findings of the study may be helpful for the future studies.

Nursing Practice

1. A regular health education program should be carried out by hospital nurse.

2. Teaching to provide the nursing students with the safe and healthy environment to encourage benefits of depression.

3. Organize health camps to identify high-risk of infection in the hospital.

4. Nurse can suggest and organize the hospital authority to follow aseptic technique.

5. Mass health education campaigns should be organized regularly by the health teams to provide knowledge regarding depression.

Nursing Education

1. Nursing educators need to lay emphasis on depression.

2. Conducting in service education program for nurses and health worker regarding depression.

Nursing Administration

1. Nurse administrators should take the initiative in organization continuing education programs for nurses regarding depression.

2. Appropriate teaching/ learning material needs to be prepared and made available for nurses.

3. Helping in early identification of students from other setting by providing proper tools and aids.

LIMITATIONS

➢ Knowledge was determined on the basis of structured knowledge questionnaire.

➢ The study is limited to 30 samples.

➢ The nursing student who are able to understand Hindi and English.

RECOMMENDATIONS

➢ A formal education program must be conducted in all nursing college. Regarding depression.

➢ The study can be replicated on a large sample, and on various setting, there by finding can be generalized to a large population.

➢ A study can be carried out using other teaching strategies like computer assisted instruction.

➢ A comparative survey can be carried out to ascertain the knowledge of nursing students.

➢ A concentrated effort should be made to increase the awareness among the students.

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