International Journal of Current Advanced Research
ISSN: O: 2319-6475, ISSN: P: 2319-6505, Impact Factor: 6.614
Available Online at www.journalijcar.org
Volume 8; Issue 05 (F); May 2019; Page No.18881-18883
DOI: http://dx.doi.org/10.24327/ijcar.2019.18883.3620

Review Article

A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING VECTOR BORNE DISEASES AMONG SCHOOL AGE CHILDREN IN SELECTED SCHOOL, CHENNAI

V. Hemavathy, V.J. Binipaul and T.Jannet Susannal

Sree Balaji College of Nursing, Chrompet, Chennai, BIHER University, India

A R T I C L E I N F O

Article History:
Received 13th February, 2019
Received in revised form 11th March, 2019
Accepted 8th April, 2019
Published online 28th May, 2019

Key words:

knowledge, vector borne diseases, microorganism, school age children

A B S T R A C T

Vectors are living organisms that can transmit infectious diseases between human or from animals to humans. Mosquitoes are the best known disease vector. Vector borne diseases are characterized by the vector mediated movement of a microorganism such as a bacterium, virus or protozoa. A descriptive study, therefore, was undertaken to assess the knowledge of vector borne diseases among school age children in selected school, Chennai. The study samples consisted of 30 school age children were selected using probability random sampling techniques using lottery method. In order to assess their knowledge a self- structured questionnaire was developed. Self-made scoring system was used to categorize the participants as whether they have adequate knowledge, moderately adequate knowledge or inadequate knowledge on vector borne diseases. Results revealed that in post-test after structured teaching programme 24 (80%) of the school age children had adequate knowledge, 3(10%) had moderately adequate knowledge and, 3(10%) had inadequate knowledge about vector borne diseases. Structure teaching programme results majority of the school age children had adequate knowledge.

INTRODUCTION

Vector born infection, Disease caused by pathogens transmitted by insects and ticks, have long impacted human affairs.. Vector-borne diseases are human illnesses caused by parasites, viruses and bacteria that are transmitted by mosquitoes, sandflies, triatomine bugs, blackflies, ticks, tsetse flies, mites, snails and lice.Every year there are more than 700,000 deaths from diseases such as malaria, dengue, schistosomiasis, human African trypanosomiasis, leishmaniasis, Chagas disease, yellow fever, Japanese encephalitis and onchocerciasis, globally.The major vector-borne diseases, together, account for around 17% of all infectious diseases.

The burden of these diseases is highest in tropical and subtropical areas and they disproportionately affect the poorest populations. Health has been declared as a fundamental human right. In India, most commonly seen vector borne diseases transmitted by mosquitoes are malaria, filariasis, dengue fever, chikungunya etc. They are considered as a major public health problem in the country. Vector control is the major strategy in the entire above mentioned vector borne diseases.However the community involvement in national health programme with the help of health education activity is equally important.

Corresponding author:* **V. Hemavathy
Sree Balaji College of Nursing, Chrompet, Chennai, BIHER University, India

As one of the important role of community health nurse is as a health educator, the need for the hour is a planned teaching programme to create awareness among the people about disease. Thus the people can gain knowledge related to disease which will help to prevent and control the disease .In this way they can improve their own health, health of their families, community and nation.

MATERIAL AND METHOD

A descriptive study has been employed in this study to assess the knowledge of vector borne disease among school age children. The study was conducted in selected school, Chennai. A total of 30 school age children were participated in this study. A self- designed self- structured questionnaire was developed to assess their knowledge. There were 30 multiple choice questions on definition, etiology, clinical manifestation, diagnostic evaluation, treatment and preventive measures. The data was collected by delivering the question sample to the participants. Each correct answer was given a score of “one” and wrong answer was given a score of “zero”. Self- made scoring system was used to categorize the participants as whether they have adequate knowledge, moderately adequate knowledge, and inadequate knowledge on vector borne diseases.

The score was interpreted as follows

RESULTS

The findings of the study are discussed in terms of objective and hypothesis of the study

s.no	level of knowledge	percentage
1	Adequate	75-100%
2	Moderately adequate	50-74%
3	Inadequate	<49%

Sample Characteristics

Most of the subjects 18(60%) were female&minimum number of subjects 12 (40%) were males. It reveals that most of the subject 30 (100%) of the people belonging to the age group of 10 – 12 yrs.Regarding house, most of the subjects 27 (90%) were living in pucca house, minimum number of subjects 3 (10%) were living in kutcha house, Regarding drainage most of the subjects 27 (90%) have closed drainage system minimum number of subjects 3 (10%)have open drainage.Regarding waste disposal most of the subjects 24 (80%) followed dumping, minimum number of subject incineration 3 (10%) and burial 3 (10%) Regarding thereligious practice most of subjects 24 (80%)are Hindu minimum number of subject 3 (10%) followed Christian and Muslim.

The objective was to assess the level knowledge on vector borne diseases among school age children: the frequency and percentage distribution of level of knowledge on vector borne diseases among school age children reveals that . In the pre -test (20%) of children have inadequate knowledge and (10%) children have adequate knowledge and (70%) of children have moderate knowledge. In the post test24(80%) of the school age children had adequate knowledge, 3(10%) had moderately adequate knowledge and, 3(10%) had inadequate knowledge about vector borne diseases.

Table 1 Level of knowledge among school age children

Over all knowledge	Pre- test		Post –test	
	F	%	F	%
Inadequate	6	20%	3	10%
Moderate adequate	21	70%	3	10%
Adequate	3	10%	24	80%
Total	30	100%	30	100%

Table 1: Denotes that the level of knowledge of children in pre- test and post -test regarding vector borne diseases. In the pre -test (20%) of children have inadequate knowledge and (10%) children have adequate knowledge and (70%) of children have moderate knowledge. In the post test (10%) have inadequate knowledge and (10%) children have moderate knowledge and (80%) children have adequate knowledge.

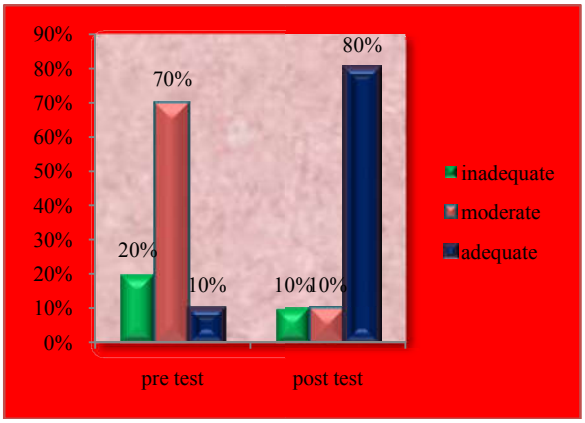

Fig 1 Percentage Distribution According To Pre And Post Test Level of Knowldege Regarding Vector Borne Diseases Among School Age Children

DISCUSSION AND CONCLUSION

The participants involved in this study were assessed for the knowledge on vector borne diseases. The frequency and percentage distribution of level of knowledge on vector borne diseases among school age children reveals that In the pre -test (20%) of children have inadequate knowledge and (10%) children have adequate knowledge and (70%) of children have moderate knowledge. In the post-test 24(80%) of school age children had adequate knowledge, 3(10%) of school age children had moderate adequate knowledge, 3(10%) of school age children had inadequate knowledge about vector borne diseases.Structured teaching programme was effective in improving the knowledge regarding vector borne diseases among school age children was accepted by the researcher

Reference

Book reference

1. Park K. “Textbook of Preventive and social medicine”. M/s BanarsidasBhanotPublishers, 22nd edition. Pp: 90,574.
2. Sunderlal, Adarsh, Pankaj. “Textbook of Community Medicine”.CBS publishers, 15th edition Pp: 232-233.
3. Sunita Patney, “Textbook of Community Health Nursing” CBS publishers 13th edition Pp:168-175
4. V.K Muthu, “Textbook of Public Health”, Jaypee publishers, 2nd edition, Pp: 494-453
5. Bijayalakshmi, “ A Comprehensive textbook of Community Health Nursing”,Jaypee publishers, 1st edition Pp:498-507
6. Veerabhadran G.M, “Textbook of Community Health Nursing”, Jaypee publishers, 1st edition,Pp:68-78.
7. Navdeep Kaur Brar, “Textbook of Advanced Nursing Practice”, Jaypee publishers, 1st edition Pp:578-561

Journal Refernce

1. Selvavinayagam T.S. Chikungunya fever out break in Vellore, South India. “Indian Journal of community medicine” 2007 October;32(4) Pp:286-287.
2. Kondrashin A.V. Factors determining the dynamics of malaria systems in South Asia. “Journal of communicable diseases” 2016 February;19(1) Pp:75-87.
3. Yadav S.P *et al*, Knowledge,Attitude and practice towards malaria in rural community of epidemic-prone

Thar Desert,North western India. "Journal of communicable diseases" 1999 March;31(2) Pp:127-136.

4. Pushpa G,*et al* .Knowledge, attitude and practices related to dengue in rural and slum areas of Delhi after the dengue epidemic of 1996."Journal of communicable diseases" 2015 May 30(2) Pp:107-112.
5. Mwobobia I.K *et al*.Demographic and socio-economic factors with implication for the control of lymphaticfilariasis.vEast African medical " Journal 2016 october;76(9) Pp:495-498.

How to cite this article:

V. Hemavathy, V.J. Binipaul and T.Jannet Susannal (2019) ' A Study to Assess the Effectiveness of Structured Teaching Programme on Knowledge Regarding Vector Borne Diseases among School Age Children in Selected School, Chennai', *International Journal of Current Advanced Research,* 08(05), pp. 18881-18883.
DOI: http://dx.doi.org/10.24327/ijcar.2019.18883.3620

****