



"TO ASSESS THE EFFECTIVENESS OF AN AWARENESS PROGRAMME ON KNOWLEDGE REGARDING TELE MANAS HELPLINE AMONG ADOLESCENTS IN SELECTED JUNIOR COLLEGES."

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ABSTRACT

Background: In this Digital era, things are just one click away. Medical facility at the door step is the greatest achievement of this digitalisation. Telemedicine is the best solution for this era. Due to the stigma and unavailability of infrastructure and man power, People not visit the mental health facility. Tele MANAS Helpline is the best option for those people. Through Tele MANAS Helpline, people take help for their problems regarding mental health. Awareness programme is thought to be more effective because this Helpline is new and may people take advantages of this helpline regarding their mental health problem. **Objective:** 1. To assess the knowledge regarding Tele MANAS Helpline among adolescents in selected junior colleges. 2. To evaluate the effectiveness of an awareness programme on knowledge regarding Tele MANAS Helpline among adolescents in selected junior colleges. 3. To find the associate study findings with selected demographic variable. **Study Design & Methodology:** The pre-experimental one group pretest posttest study was conducted only after the approval of the IEC permission to conduct study from concerned authority. Junior college students who fulfill the inclusion criteria were assigned to study. Written informed consent was taken from the participants. Each participant received a code number and self-administered questionnaire. A self-administered questionnaire obtained information on socio-demographic of participants. Thereafter baseline knowledge assessed. This approach helps to maintain the integrity and validity of the study results. Thereafter, Investigator delivered lecture cum discussion programme on Tele MANAS Helpline for the participants on the same day. After seven days post-test for knowledge assessment was conducted. A pre-experimental one group pre-test post-test design was conducted on 80 Junior college students selected by Non-probability convenience sampling technique. The pre-test and post-test knowledge regarding Tele MANAS Helpline assessed by using self-structured questionnaire (30 questions) data were collected. Data analyzed using both descriptive and inferential statistics to describe to show the association between knowledge & demographic data. **Expected Results:** There will be significant improvement in knowledge score in group after administration of lecture cum discussion. **Limitation:** Only junior college students are included in this study. **Conclusion:** The result of the study revealed that the knowledge score of pre-tests was less which was significantly improved in post-test scores. Based on the statistical findings, it is evident that provision of such kind of lecture-cum-discussion training helped the junior college students to acquire knowledge regarding Tele MANAS Helpline. Therefore, lecture-cum-discussion is very important to gain knowledge regarding Tele MANAS Helpline.

KEYWORDS : Adolescents, Awareness programme, Lecture-cum-discussion, Tele MANAS Helpline

INTRODUCTION:

"Just remember, you are not alone, In fact, you are in a very common place with millions of others. We need to help each other and keep striving to reach our goal."

-Mike Moreno.

According to World Health Organization (WHO), mental health is a state of mental well-being that able people to cope with stresses of life, realize their abilities, learn well, work well and contribute to their community. Mental health is a fundamental human rights of person and they contribute to personal, society and socio-economic growth.

Mental health is fundamental to health and is of paramount importance to personal well-being, family relationships, and successful contributions to society. It is related to development of societies and countries.

Mental health is more than the absence of mental disorders. A mental disorder is characterized by a clinically significant disturbance in an individual's cognition, emotional regulation, or behavior. It is usually associated with distress or impairment in important areas of functioning.

In 2019, according to World Health Organization (WHO), around 970 millions of people in the world suffer from mental disorders.³ Approximately 260 million people in South East Asia region live with mental disorder.⁴ India carry a huge burden of mental health problem, about 60-65 million persons have common mental issues that is, it comprises around 18% of the global population and significantly contributes to the

global burden of mental disorders. In world, 1 in every 8 person estimated to be suffering from a clinically diagnosable mental disorder.

In India, due to stigma, ignorance, fear and shame of talk about mental health problems, lack of an awareness and unavailability of mental health services are the cause of mental health problems. The latest National Mental Health Survey noted that, there is huge demand for mental health Care services, the available mental health resources in terms of infrastructure and trained mental health professionals are severely deficient even as per the conservative international norms. Due to the COVID-19 pandemic (restriction on non-emergency out-patient visits) and shifting towards alternative models of service delivery such as Tele-mental health services to meet this huge unmet demand for mental health care.⁵ In union budget (2022-23), the Government of India announced the launch of the National Tele-Mental Health Programme (NTMHP). On the occasion of World Mental Health day that is 10th October 2022 with the initiative of Union Ministry of Health and Family Welfare virtually launched the Tele MANAS Helpline. Tele MANAS stands for Tele Mental Health Assistance and Networking across States. It is toll free and 24/7 helpline number. Its toll free number is 14416 and 18008914416. Caller can select language of their choice available in service.

The aim of Tele MANAS Helpline is to provide free round-the-clock tele- mental health services in all parts of the country, particularly to people living in remote or under-served areas.

NIMHANS is the nodal center for implementation of Tele

MANAS helpline. The International Institute of Information Technology, Bangalore (IIITB) providing the technological support. Indian Institute of Technology, Bengaluru (IIT) and National Health System Resource Centre (NHRSC) will provide the technical support. At Present, there are 5 regional coordination centers and 51 state / Union Territory Tele MANAS cells.

This helpline provides immediate mental health care to a person who is in acute psychological distress and facilitate continuity of care by making appropriate referrals to nearby specialized mental health services depending upon the person's convenience and severity of the mental health problem. Specialized care is envisioned through the programme by linking Tele MANAS with other services like National tele consultation service, e-Sanjeevani (National Tele-consultation service), Ayushman Bharat Digital Mission (National digitalization of health records and services) through mental health professionals and emergency psychiatric facilities.

Objectives:

1. To assess the knowledge regarding Tele MANAS Helpline among adolescents in selected junior colleges.
2. To evaluate the effectiveness of an awareness programme on knowledge regarding Tele MANAS Helpline among adolescents in selected junior colleges.
3. To find the associated study findings with selected junior colleges.

Hypothesis:

H_0 – There is no significant difference between pre test and post test knowledge score of an awareness programme on Tele MANAS Helpline among adolescents in selected Junior colleges.

H_1 – There is significant difference between pre test and post test knowledge score of an awareness programme on Tele MANAS Helpline among adolescents in selected Junior colleges.

MATERIAL AND METHODS:

Study Design: pre-experimental one group pretest posttest study design

Study Setting: selected Junior colleges. **Participants:** adolescents in Junior colleges. **Sample size** - 80

Sample size calculation:

Cochran's sample size formula

$$n_0 = \frac{Z^2 \cdot p \cdot (1 - p)}{e^2}$$

p : the population size

e : the margin of error

Z : the Z-value, extracted from a Z-table

Cochran formula for sample size estimation:

Z = Static for a level of confidence = 1.9

P = Rate of stigma of mental illness i.e. public stigma. = 25.4% = 0.254

e = Desired error of margin = 10% = 0.10

$n = 1.96^2 \cdot 0.254 \cdot (1 - 0.254)$

0.10^2

= 72.79

= 75 participants needed in the study

Sampling technique:

Non-probability convenience sampling technique.

Inclusion criteria:

1. Adolescents who have given informed written consent to participate in study.

Exclusion criteria:

1. Adolescents who have knowledge regarding Tele MANAS Helpline.
2. Adolescents who have seeking help from Tele MANAS Helpline.

Data Collection Tool:

Section A:

It includes demographic variables. Age, sex, education, income, type of family, religion, area of residence,

Section B:

knowledge regarding Tele MANAS Helpline (knowledge was assessed by Self structured questionnaire based on knowledge regarding general information and knowledge regarding Tele MANAS Helpline).

Knowledge assessment:

Tele MANAS Helpline knowledge will be assessed by pre and post-test using self-structured knowledge questionnaire. Validity and reliability of tool will be assessed by experts in the field and appropriate statistical measures. Validity over the questionnaire will be established for build up through both the construct & content manner to seek for the results what has intended purposely for the inferences & conclusion to measure. Knowledge assessment will consider poor if the score is < 20 %, average if it is 21-40%. There was 77.5 % that is 62 adolescents had poor knowledge and 22.5 % that is 18 had average knowledge.

Description of Intervention:

The Researcher will develop self structured questionnaire regarding Tele MANAS Helpline which will be validated by expert of nursing and mental health. Which will be then provided to the participant and further analysis will be done to assess the effectiveness of lecture cum discussion. Pre-test post-test will be conducted to assess the effectiveness.

Study procedure and data collection:

The study shall be conducted only after the approval of IEC. Investigators will visit the research area and will obtain the necessary permission from the concerned authorities. Adolescents in Junior colleges who fulfill inclusion criteria shall be assigned to the study. Researcher will explain the purpose of the study, take informed written consent and pre-test will be administered to participants. Self structured questionnaire will be administered to the adolescents. Researcher will explain to participant regarding date and time of post-test, as per pre planned date and time, researcher will again visit study areas and administer post-test on 7th day. Validity over the questionnaire will be established for build up through both the construct & content manner to seek for the results what has intended purposely for the inferences & conclusion to measure. Reliability of the questionnaire will be calculated by using appropriate statistical test.

Data Analysis:

All results will be calculated using SPSS version 26. Overall results for the outcome variables will be listed in tables and graphs for both descriptive (Mean, mean percentage, Standard deviation), & inferential statistics (Paired t-test will be used to and the significance difference between pre test and post test, Association results will be analyzed using chi square analysis).

Expected results:

The study findings of 80 junior college students in selected junior colleges, was gathered to assess the effectiveness of awareness programme on knowledge regarding Tele MANAS Helpline. As per the objective of the study the assessment for the knowledge regarding Tele MANAS Helpline among students in selected junior colleges we found pre existing knowledge was 4.76 (15.87%) that was reached to 26.48 (

88.29%)optimum after giving the intervention was found statistically highly significant for inference as P- value < 0.01. Initially 62 (77.5%) were having poor knowledge & 18 (22.5%) were having average knowledge that has reached to 100 (100%) at end after giving intervention. It is seen that there is no association between knowledge and age, gender, type of family hence the null hypothesis (H0) is accepted. For correlation analysis shows significant P-value < 0.01 with Pearson correlation coefficient ($r = 0.9934$) indicates strong correlation as knowledge increase in positive direction.

DISCUSSION:

Findings of present study will supported by previous studies where awareness programme is effective in information transfer and improving knowledge regarding Tele MANAS Helpline.

CONCLUSION:

The findings of this research will contribute to the existing body of knowledge regarding Tele MANAS Helpline. In a view of this fact, present study aims to assess the effectiveness of an awareness programme on knowledge regarding Tele MANAS Helpline among adolescents in selected junior colleges.

Consent And Ethical Approval:

The study will be conducted after approval of Institutional Ethics Committee. Written consent will be taken from the participants for participation in the study. Throughout the study, confidentiality will be maintained. Freedom to withdraw from the study at any point of time will be assured.

The study findings will be disseminated to participants and published in a peer-reviewed journal.

Conflict of interest:

There is no conflict of interest in this study

No any risk factors to the subjects of the study

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