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EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING RISK FACTOR AND PREVENTION OF SUICIDAL BEHAVIOR AMONG ADOLESCENTS

Nursing

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ABSTRACT

An experimental study was conducted to assess the effectiveness of structured teaching programme on knowledge regarding risk factor and prevention of suicidal behavior among adolescents at selected schools of Batala. One group pretest – posttest research design was used. Total 60 adolescents were conveniently selected from Baring Union Collegiate Senior secondary school & Guru Nanak Dev Academy District Gurdaspur. The tool used for data collection was Socio demographic data and self-structured questionnaire regarding risk factors and prevention of suicidal behavior among adolescents.

Findings regarding knowledge of risk factors and prevention of suicidal behavior among adolescents showed that in pretest, maximum subjects (83.3%) had average knowledge, least (16.7 %) had poor knowledge and in post-test maximum subjects had average knowledge followed by good (46.7 %) and no one had poor knowledge. Posttest knowledge mean and SD score value (16.13±2.473) was higher than the Pretest knowledge mean and SD score value (10.62±2.001) , Hence it can concluded that Structured Teaching Programme was effective. The association between post-test knowledge score of adolescents and their demographic variables such as gender and occupation of mother was found to be statistically significant whereas other variables were non-significant.

KEYWORDS

assess, effectiveness, structured teaching programme, risk factor, prevention, suicidal behavior, adolescents

INTRODUCTION:

Suicide is both a public and mental health problem, and is a leading cause of deaths, especially among adolescents.[1] Suicide is the second leading cause of death for ages 10 to 24 years .[2]

World health organization noted that someone commits suicide every 39 seconds, making it one of the leading causes of death in the world. Every year almost one million people die from suicide. About 8, 00,000 people commit suicide worldwide every year out of these 1, 35,000 are residents of India. Among that Tamil nadu and Kerala had the highest suicide rates per 1, 00,000 people in 2012.[3]

The typical adolescent can experience rapid mood shifts, contempt for authority, and disrespect for parents, grandiose self-confidence, changing ideas or beliefs, and indifference. These shifting states make it especially difficult to differentiate between "normal" and pathologic states in this age group. Developmentally, a socio-cognitive maturation also occurs during puberty that permits more mature feelings of despair, self-hate, blame, and hopelessness, as well as the means to act on those feelings in the form of suicide.[4]

Depressive disorders are prevalent and serious in children and adolescents, often causing substantial difficulties in social, personal, family and academic functioning. Increased depressive symptoms are one of the most prevalent mental health problems among adolescents.[5]

Among the non-communicable diseases, suicide is the ultimate mental health crisis and has devasting consequences for the family and the community .while risk of suicide is unique to the individual person, it is possible to recognize some warning signs and symptoms so that it should be possible to access treatment before a suicide attempt. It has been estimated that up to 75% of suicide victims display some warning signs or symptoms. Compared to the cost of prevention of communicable diseases, prevention of suicide is least expensive and definitely preventable.[6]

NEED FOR STUDY

Suicide is considered a major public health problem around the world as well as personal tragedy. Adolescence is a stage of exploration and often find it stressful to cope up with the environment ; it is therefore required to give more stress on health of the adolescents as researchers have shown that adolescence is among the risk population in terms of suicide.[7]Knowledge of risk factors for suicide and screening can help in identifying the at risk person. However those positive during screening for risk factors should be followed by a more thorough risk assessment. Many preventive measures are present among which educational programs are more effective in preventing suicidal behavior.[8]

School as an institution that exposes children to frequent contact with caring adults, has a unique role to play in suicide prevention. The school setting offers a significant opportunity to keep children safe from self-harm, not just by identifying warning signs and intervening when attempts occur, but by establishing positive school environments and providing programs and resources that are responsive to student's personal and social emotional needs.[6]

Skill training programs have recently emerged as a method of suicide Prevention. The programs emphasize the development of problem solving, coping and cognitive skills, based on the research indicating that suicidal youth have deficits in these areas. By providing youths with these skills, it is hoped that they will learn how to handle problems and identify when they need help, rather than engaging in self-harm and suicide attempts. The skills training programs are often included in general health curriculum or as part of a larger prevention program.[9]

Mental health nurses particularly nurse working in the field can prevent adolescent suicide by training of teachers, school management and student services personnel from their catchment area. Preventive efforts have included: training and enhance the capacity of the teacher to identify, intervene and refer students who need help also incorporating and coordinating educational programs which teach conflict resolution, decision making, stress management and other skills including the issues of death, grief and suicide, conducting parent awareness groups; liaison and developing links with community resource agencies; finally development of school policy and procedure documents on youth suicide. Mental health nursing departments should also conduct researches to develop different preventive methods of adolescent suicide and their effectiveness.

STATEMENT OF THE PROBLEM

"A study to assess the effectiveness of structured teaching programme on knowledge regarding risk factor and prevention of suicidal behavior among adolescents in selected schools, Batala, Punjab."

OBJECTIVES

The objectives of study are:-

1. To assess the knowledge of the adolescents regarding risk factors and prevention of suicidal behavior.
2. To evaluate the effectiveness of structured teaching programme on knowledge regarding risk factors and prevention of suicidal behavior among adolescents.

3. To associate the post-test knowledge of adolescents with their selected demographic variables.

HYPOTHESIS

H_1: There will be significant difference between pretest and post-test knowledge scores after administration of structured teaching programme regarding risk factor and prevention of suicidal behavior among adolescents.

DELIMITATION

Study is delimited to Adolescents:

- Aged between 14-19 years.
- studying at Baring Union Collegiate Senior secondary school & Gurunanak dev. Academy

MATERIAL AND METHOD

Pre experimental one group pretest – posttest research design was used. 60 adolescents conveniently selected from Baring Union Collegiate Senior Secondary School & Gurunanak dev. Academy. The tool includes: **Part 1** consist 11 questions related to socio demographic variables such as Age, gender, type of family, type of accommodation, religion, occupation of father, occupation of mother, family Income , education of father, education of mother and source of information. **Part 2** consists of self-structured questionnaire which has 24 items to obtain knowledge regarding risk factors and prevention of suicidal behavior among adolescents. Based on the scores knowledge was graded into poor, average and good. The validity of the tool was established by consultation with experts. The reliability coefficient of self-structured questionnaire was found to be 0.9; hence, the tool was highly reliable. Ethical approval was obtained from the institutional ethical committee for conducting study.

RESULT AND FINDINGS

Findings related to demographic variables

It was found that 81.7% of adolescents were in the age group of 17-19 years and 18.3% were between 14-16 years. 63.3% were Male and 36.7% were female. Regarding the type of family 56.7% were from Nuclear, 40% were from Joint and 3.3% were from Extended family. Type of accommodation showed that 96.7% were coming from Home and 3.3% stays at Hostel. 83.3% of them were Sikh, 10% were Hindu and 6.7% were Christian. Occupation of father depicted that 28.4% were government employee, 25% were private employee, 23.3% of them were doing business and same percentage were on daily wages. Occupation of mother revealed that 93.3% of them were housewife and 6.7% of them were government employee. Family monthly income shown that 53.3% of them had Rs > 10,000 income, 28.4% of them were having income between Rs.5001-10,000 and 18.3% of them were having income between < Rs 5000. Regarding education of father; 41.7% had senior secondary education, 30% were educated up to matric, 13.3% had Primary education, 11.7% of them were Graduate & above and 3.3% had no formal education. Regarding education of mother; 38.3% had senior secondary education, 25% were educated up to matric, 16.7% had Primary education, 11.7% of them were Graduate and above and 8.3% had no formal education. Source of information revealed that 33.3% had received information from teachers, 28.4% from parents, 25% from electronic media and 13.3% from mass media.

Pre-test and Post-test level of knowledge regarding risk factor and prevention of suicidal behavior among adolescents

Findings regarding knowledge of risk factors and prevention of suicidal behavior among adolescents showed that in pretest, 16.7 % had poor knowledge, 83.3% had average knowledge and nobody was having good knowledge whereas in post-test 53.3% had average knowledge, 46.7 % had good knowledge and nobody was having poor knowledge.

Effectiveness of Structured teaching programme on knowledge regarding risk factor and prevention of suicidal behavior among adolescents

Table 1 **N=60**

Level of knowledge	Mean	SD	t value	df	p value
Pre-test	10.62	2.001	12.24	59	0.000*
Post-test	16.13	2.473			

*p value – 0.01 level of significance

Table 1 shows the comparison between pre-test and post-test level of knowledge regarding risk factor and prevention of suicidal behavior among adolescents, result reveals that pre-test mean and SD was 10.62±2.001and post-test mean and SD was 16.13±2.473. The pre-test and post-test mean was compared using paired t-test, result reveals that t value is 12.24 at p=0.000. The result indicates that structured teaching programme was effective and found to be statistically significant.

Table 2: Association between post-test knowledge score and demographic variables **N=60**

S. No	Demographic Variable	Average knowledge	Good Knowledge	x^2 value df P value
1	Age in years			2.036
	a. 14-16 years	8	3	1
	b. 17-19 years	24	25	0.154 NS
2	Gender			0.886
	a. Male	20	18	1
	b. Female	12	10	0.021*
3	Type of family			
	a. Nuclear	17	17	0.402
	b. Joint	14	10	2
	c. Extended	1	1	0.818 NS
4	Type of accommodation			1.810
	a. Hostel	2	0	1
	b. Home	30	28	0.178 NS
5	Religion			
	a. Sikh	29	21	3.696
	b. Hindu	1	5	2
	c. Christian	2	2	0.158 NS
6	Occupation of father			
	a. Government employee	9	8	1.006 3
	b. Private employee	7	8	0.800 NS
	c. Business	7	7	
	d. Daily wages	9	5	
7	Occupation of mother			
	a. Government employee	2	2	0.890 1
	b. Housewife	30	26	0.019*
8	Family monthly income (Rs)			
	a. < 5000	9	2	4.728
	b. 5001-10,000	7	10	2
	c. > 10,000	16	16	0.094 NS
9	Education of father			
	a. No formal education	1	1	1.632
	b. Primary education	5	3	4
	c. Matriculation	11	7	0.803 NS
	d. Senior secondary	11	14	
	e. Graduate and above	4	3	
10	Education of mother			
	a. No formal education	2	3	2.622
	b. Primary education	6	4	4
	c. Matriculation	9	6	0.623 NS
	d. Senior secondary	13	10	
	e. Graduate and above	2	5	
11	Source of information			
	a. Mass media	5	3	1.360
	b. Teachers	10	10	3
	c. Parents	9	8	0.948 NS
	d. Electronic media	8	7	

***p value <0.05 level of significanceNS-Non-Significant**

Table 2 reveals that there were significant association found between knowledge and variables such as gender& occupation of mother at the level of significance p < 0.05 whereas Age, type of family, type of accommodation, religion, occupation of father, family Income , education of father, education of mother and source of information were found to be statistically non-significant.

DISCUSSION

- Present study revealed that in pre-test, 16.7 % had poor knowledge, 83.3% had average knowledge and nobody was having good knowledge.

Finding of the study is supported by a study on knowledge regarding risk factors and prevention of suicidal behaviour among adolescents

by N.Loganathan which revealed that during Pre-test 75% had inadequate knowledge, 25% had moderately adequate knowledge.[10]

Another study conducted by Raghu D.M., (2013) [11] to assess Impact of STP on Knowledge of Suicidal Prevention among Parents of Adolescents at Bangalore. In pre -test 80% had inadequate knowledge and 20% had moderately adequate knowledge.

- Present study reveals that pre-test mean and SD was 10.62±2.001and post-test mean and SD was 16.13±2.473. The result indicates that structured teaching programme was effective.

Findings of the study is supported by N.Loganathan (2013)[10], conducted a study to assess the effectiveness of knowledge regarding risk factors and prevention of suicidal behaviour among adolescents. During pretest, the mean score was 9.9±3.88 and the post-test mean and standard deviation score was 17.03±4.12. This reveals that the structured teaching programme was effective in increasing the knowledge regarding Risk factors and Prevention of Suicidal Behaviour among Adolescents.

Supported by Nandagaon Veeresh.S, (2012)[12] conducted a study to assess the effectiveness of structured teaching programme on knowledge regarding suicidal ideation and prevention of suicidal behaviour among adolescents in university students, Karnataka. The study result shows that the calculated paired 't' test value was 25.91, greater than the tabulated value of 1.960 which was significant at $p \leq 0.05$ level. The researcher concluded that the structured teaching programme was effective on the adolescents.

Another study conducted on 100 adolescents among 16-17 years old at Mehansa district to assess the effectiveness of STP regarding preventive measures of suicidal ideation among adolescents . It was found that post-test knowledge mean and SD was 16.74 ± 4.41 which is greater than the and pre-test mean and SD 12.16±4.16.[2]

CONCLUSION:

The findings of the present study revealed that structured teaching programme helps in improving knowledge regarding risk factor and prevention of suicidal behavior among adolescents. Considering the high suicide rate in adolescents, the importance of providing knowledge regarding risk factors and prevention of suicidal behavior among adolescents, are way by which suicides in Indian adolescents can be avoided.

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