



A STUDY TO ASSESS THE EFFECTIVENESS OF EDUCATIONAL PACKAGE ON KNOWLEDGE REGARDING ADOLESCENT REPRODUCTIVE AND SEXUAL HEALTH (ARSH) AMONG ADOLESCENT GIRLS AT DIFFERENT SCHOOLS IN MORADABAD (U.P)

Obstetrics & Gynaecology

Kshitiza S Kewal* Department of Obstetrics and Gynecological Nursing, Teerthanker Mahaveer College of Nursing, Moradabad, India*Corresponding Author

Prof. Viji Mol HOD of Obstetrics and Gynecological Nursing, Teerthanker Mahaveer College of Nursing, Moradabad, India

Mr. Vedamurthy R Associate Professor, Department of Pediatrics Nursing, Teerthanker Mahaveer College of Nursing, Moradabad, India

ABSTRACT

Adolescent girls don't have adequate knowledge regarding Reproductive and Sexual Health, due to which they face many physiological problems such as early pregnancy and childbirth, abortion, violence, unintended pregnancies, maternal mortality, reproductive tract infections (RTIs) and sexually transmitted diseases (STDs). The Sustainable Development Goal (SDG) 3.7 states that by the year 2030, the sexual and reproductive health care services should be provided universally. The objective of the study was to evaluate the effectiveness of educational package on knowledge regarding ARSH among adolescent girls. The research design used was pre-experimental (one group pre-test post-test design). Research was conducted at different schools of Moradabad. 63 adolescent girls were selected as sample by convenience sampling technique. Research findings depicted that out of 63 sample, in pretest 87.3% had inadequate knowledge and 12.7% had moderate knowledge then after the intervention 92.1% had adequate knowledge and 7.9% had moderate knowledge. The post-test mean score 27.6 was found more than the pre-test mean score 12.1 with 't' value 36.11. Therefore, the study revealed that the educational package was effective in enhancing the knowledge of adolescent girls regarding (ARSH).

KEYWORDS

Adolescent girls, Adolescent Reproductive and Sexual Health, Educational Package

INTRODUCTION

Adolescence is the stage of life that occurs between childhood and adulthood, In this stage we can see physical, physiological, cognitive and emotional changes taking place in 10 to 19 years among adolescents. According to WHO (World Health Organization) reproductive health refers to the overall well-being and rights of individual in relation to their reproductive processes and function Reproductive health includes various topics like puberty, childbirth, abortion, sexuality, contraceptive methods and maternal mortality. Adolescents don't have basic knowledge about the changes occurring in their body during puberty, safe sex and hygiene, due to which there is an increased risk of sexually transmitted diseases (STD) and unwanted pregnancies and also they are considered to be a vulnerable group in India due to various factors such as limited health information, cultural prohibition and societal norms that prioritize other aspects of their lives over their sexual health. At this age group majority of adolescent girls have many doubts and queries about their sexuality which give rise to anxiety and confusion. Also, our current education system has not supported and given much guidance much to the adolescents that has led to hazardous sexual activities. Government of India has acknowledged that by focusing on prevention, early interventions and enhancing the adolescent's knowledge and skills we can improve the health outcomes as well as can reduce the mortality and morbidity rate for this age group. Schools plays an essential role in supporting the overall wellbeing of students and creating a safe and inclusive environment for all. Therefore, by giving accurate information about puberty, contraception, sexually transmitted infections, and healthy relationships, we can enable them to make correct decisions regarding their health.

OBJECTIVES

1. To assess the level of knowledge regarding ARSH among adolescent girls.
2. To evaluate the effectiveness of educational package on knowledge regarding ARSH among adolescent girls.
3. To find out the association between pre-test level of knowledge regarding ARSH among adolescent girls with selected socio-demographic variables.

HYPOTHESIS

All hypothesis were tested at 0.05 level of significance.

H1- There were significant difference between pre-test and post-test level of knowledge regarding ARSH among adolescent girls.

H2- There were significant association between pre-test level of

knowledge regarding ARSH among adolescent girls with socio-demographic variables.

ASSUMPTIONS

The researcher assumes that-

1. The adolescent girls might have some information regarding ARSH.
2. Educational package may help to enhance the level of knowledge regarding ARSH in an adolescent girl.

VARIABLES

SOCIO DEMOGRAPHIC VARIABLES-

Socio-demographic variables includes age, educational qualification, type of family, religion, place of residency, father's education, mother's education, father's occupation, mother's occupation, previous knowledge regarding ARSH.

INDEPENDENT VARIABLES-

Educational package on Adolescent Reproductive and Sexual Health.

DEPENDENT VARIABLES-

Knowledge regarding Adolescent Reproductive and Sexual Health.

2. MATERIALS & METHODS

RESEARCH APPROACH- Quantitative Research Approach

RESEARCH DESIGN- Pre-experimental (One group pre-test post-test design)

ILLUSTRATION OF STUDY DESIGN

Group	Pre-test	Intervention	Post-test
One Group (Adolescent girls)	O1	X	O2

KEY'S

O1- Pre-test implementation of self-structured knowledge questionnaire among adolescent girls of government schools.
X- Administration of Educational Package.

O2- Post-test to evaluate the effectiveness by using the same self-structured knowledge questionnaire after 7 days of administration of the educational package Study Setting: Rajkiye Balika Inter College, Amroha U.P

Sample: Adolescent girls within the age 14-16 years who were studying in (Rajkiye Balika Inter College), Amroha.

SAMPLE SIZE: 63 Adolescent girls.

SAMPLING TECHNIQUE: Convenience Sampling
Technique
Sample selection criteria:

INCLUSION CRITERIA- Adolescent girls who were:

- Ready to be a part of the study.
- Between (14-16) years of age.
- Available during data collection.

EXCLUSION CRITERIA- Adolescent girls who were:

- Less than 14 years of age.
- Studying in private schools of Amroha, U.P.

DESCRIPTION OF THE TOOL

Tool 1: Socio-demographic Data

Tool 2: Self -Structured Knowledge Questionnaire

RESULTS

The present study findings are planned under following sections-

SECTION A: Frequency and percentage distribution of Socio-demographic variables.

SECTION B: Findings related to the level of knowledge regarding ARSH among adolescent girls.

Part – I: Findings related to knowledge score regarding ARSH.

Part – II: Findings related to pre-test & post-test level of knowledge regarding ARSH.

SECTION C: Findings related to effectiveness of educational package on knowledge regarding ARSH among adolescent girls.

SECTION D: Findings related to association between pre-test level of knowledge regarding ARSH among adolescent girls with selected socio-demographic variables.**SECTION A**

Description & Dispersion of Socio-demographic data by frequency and percentage.

Table 1.1: Frequency and percentage dispersion of adolescent girls according to Socio- demographic data.

S. No	Socio-demographic data	Frequency (%)
1.	Age (in years)	
	14years	22 (35.0%)
	15 years	26 (41.2%)
2.	Educational Qualification	
	9 th class	24 (38.1%)
	10 th class	18 (28.6%)
	11 th class	15 (23.8%)
3.	Type of family	
	Joint family	31 (49.2%)
	Nuclear family	19 (30.2%)
	Single parent family	8 (12.7%)
4.	Religion	
	Hindu	36 (57.1%)
	Muslim	21 (33.3%)
	Christian	3 (4.8%)
5.	Place of residence	
	Rural	27 (42.9%)
	Urban	36 (57.1%)
	6.	Father's education
No formal education		16 (25.4%)
Primary		28 (44.4%)
Secondary		16 (25.4%)
7.	Mother's education	
	No formal education	35 (55.5%)
	Primary	9 (14.3%)
	Secondary	9 (14.3%)
8.	Father's occupation	
	Semi-skilled worker	30 (47.6%)
	Skilled worker	17 (27.0%)
	Semi- profession	7 (11.1 %)
9.	Mother's occupation	
	Home maker	40 (63.5%)
	Skilled worker	13 (20.6%)
	Semi-profession	5 (7.9%)
10.	Professional	5 (8.0%)
	Previous knowledge regarding ARSH	
	Yes	7 (11.1%)
	No	56 (88.9%)

	Primary	17 (27.0%)
	Secondary	9 (14.3%)
	Graduate & above	2 (3.2%)
8.	Father's occupation	
	Semi-skilled worker	30 (47.6%)
	Skilled worker	17 (27.0%)
	Semi- profession	7 (11.1 %)
9.	Mother's occupation	
	Home maker	40 (63.5%)
	Skilled worker	13 (20.6%)
	Semi-profession	5 (7.9%)
10.	Professional	5 (8.0%)
	Previous knowledge regarding ARSH	
	Yes	7 (11.1%)
	No	56 (88.9%)

The finding shows that 26 (41.2%) participants belongs to the age of 15 years, 22 (35%) belongs to the age of 14 year and the remaining 15 (23.8%) belongs to the age of 16 years, as per educational qualification 24 (38.1%) participants were from 9th class, 18 (28.6%) were from 10th class, 15 (23.8%) were from 11th class and remaining 6 (9.5%) were from 12th class, as per type of family majority 31 (49.2%) adolescent girls belongs to joint family, 19 (30.2%) belongs tonuclear family, 8 (12.7%) belongs to single parent family and the remaining 5 (7.9%) belongs extended family, as per religion 36 (57.1%) adolescent girls were Hindus, 21 (33.3%) were Muslims,3 (4.8%) were Christians and remaining 3 (4.8%) belong to other religion such as Sikh , as per place of residence most of the 36 (57.1%) respondents were from urban residence, and remaining 27 (42.9%) were from rural residence, as per father's education most of the 28 (44.4%) adolescent girls father had primary education,16 (25.4%) had no formal education, 16 (25.4%) had secondary education and remaining 3 (4.8%) were graduate & above, as per mother's education 35 (55.5%) adolescent girls mother had no formal education,17 (27.0%) had primary education, 9 (14.3%) had secondary education, and remaining 2 (3.2%) were graduate & above, as per father's occupation 30 (47.6%) adolescent girls father were Semi-skilled worker,17 (27.0%) were skilled worker, 9 (14.3%) were professional and remaining 7 (11.1%) were semi-professional , as per mother's occupation 40 (63.5%) of adolescent girls mothers were home maker,13 (20.6%) of adolescent girls mother were skilled worker, 5 (7.9%) of adolescent girls mother were semi profession and remaining 5 (8.0%) were professional, as per previous knowledge regarding ARSH most of the 56 (88.9%) adolescent girls had no previous knowledge regarding ARSH and remaining 7 (11.1%) had some knowledge regarding ARSH.

SECTION B

Findings related to the Pre-test & Post-test level of knowledge regarding ARSH among adolescent girls.

PART -I Findings related knowledge score regarding ARSH.

Table 2.1- Findings related to knowledge score regarding ARSH (N=63)

Content	No. of items & Max. Score	Pre-test			Post-test		
		Mean	Mean %	SD	Mean	Mean%	SD
Section 1- Introduction about Adolescent Reproductive and Sexual Health	3	1.50	50%	0.85	2.60	86.6%	0.52
Section 2- Definition	1	0.44	44%	0.50	0.84	84%	0.36
Section 3- Importance & strategy of ARSH	3	1.25	41.6%	0.89	2.57	85.6%	0.68
Section 4- Aspects of ARSH	24	8.33	34.7%	2.62	20.0	83.3%	1.60
Section 5- Health Problems	2	0.63	31.5%	0.72	1.68	84%	0.56

Total	33	12.1	36.8%	3.57	27.6	83.6%	1.69
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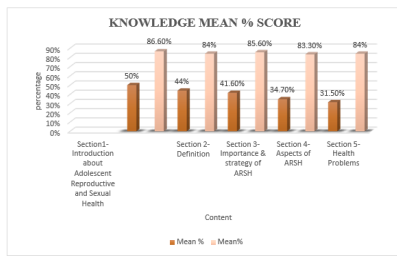


Fig 2.1 Bar graph projects the knowledge score regarding ARSH

The data depicts the pre-test knowledge score regarding ARSH, the highest mean % is 50% in Introduction about ARSH, followed by 44% in Definition, 41.6% in Importance and strategy of ARSH, 34.7% in Aspects of ARSH and 31.5% in health problems. The overall pre-test mean score is 12.1 with mean percentage 36.8% and SD of 3.57.

In post-test knowledge score regarding ARSH, the highest mean % is 86.6% in Introduction about ARSH, followed by 85.6% in Importance and strategy of ARSH, 84% in Definition and in health problems and 83.3% in Aspects of ARSH. The overall post-test mean score is 27.6 with mean percentage 83.6% SD of 1.69

PART -II Findings related to pre-test & post-test level of knowledge regarding ARSH.

Table 2.2- Frequency & percentage dispersion of the adolescent girls according to pre-test and post-test level of knowledge. (N=63)

Knowledge level regarding ARSH	Score	Pre-test		Post-test	
		f	%	f	%
Inadequate	0-16	55	87.3%	0	0%
Moderate	17-25	8	12.7%	5	7.9%
Adequate	26-33	0	0%	58	92.1%

df=62

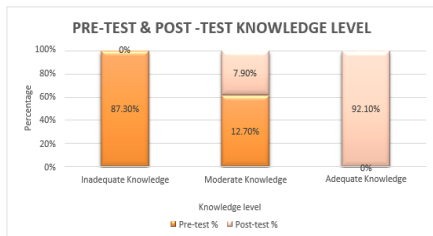


Fig 2.2 Bar graph shows the percentage of pre-test & post-test knowledge level of samples regarding ARSH.

The result shows the pre-test & post-test level of knowledge regarding ARSH among adolescent girls. In pre-test the highest frequency is 55 (87.3%) adolescent girls had inadequate knowledge and 8 (12.7%) had moderate knowledge, similarly in post-test 58 (92.1%) have adequate knowledge and 5 (7.9%) have moderate knowledge regarding ARSH.

Findings related to effectiveness of educational package on knowledge regarding ARSH among adolescent girls.

Table 3.1- Effectiveness of educational package on knowledge regarding ARSH (N=63)

Content	Test	Mean	SD	Mean difference	t value	p value
Section 1- Introduction about ARSH	Pre-test	1.50	0.85	1.1	8.879	0.000*
	Post-test	2.60	0.52			
Section 2- Definition	Pre-test	0.44	0.50	0.4	4.766	0.000*
	Post-test	0.84	0.36			
Section 3- Importance & strategy of ARSH	Pre-test	1.25	0.89	1.32	9.112	0.000*
	Post-test	2.57	0.68			

Section 4- Aspects of ARSH	Pre-test	8.33	2.62	11.6	32.674	0.000*
	Post-test	20.0	1.60			
Section 5- Health Problems	Pre-test	0.63	0.72	1.05	9.181	0.000*
	Post-test	1.68	0.56			
Total	Pre-test	12.1	3.57	15.5	36.115	0.000*
	Post test	27.6	1.69			

df=62 *Significant at 0.05 level

Data displayed that, the mean post-test score (27.6) were more than the mean pre-test score of (12.1) which shows the adequate level of knowledge in the post-test and inadequate level of knowledge in the pre-test, with a mean difference of (15.5). Hence it shows the effectiveness of educational package on knowledge among adolescent girls. So, the stated hypothesis H1 was accepted.

SECTION D

Findings related to association between pre-test level of knowledge regarding ARSH among adolescent girls with selected socio-demographic variables.

- The obtained chi-square value for Place of residence ($\chi^2 = 3.866$, $p < 0.05$) p value is less than 0.05 which indicate that there is a significant association between pre-test knowledge score regarding ARSH with selected demographic variable. Hence, the research hypothesis H2 is accepted for this.
- The obtained chi - square value for Age in years ($\chi^2 = 5.540$, $p > 0.05$), Educational qualification ($\chi^2 = 5.919$, $p > 0.05$), type of family ($\chi^2 = 1.814$, $p > 0.05$), Religion ($\chi^2 = 1.833$, $p > 0.05$), Father's education ($\chi^2 = 4.716$, $p > 0.05$), Mother's education ($\chi^2 = 6.189$, $p > 0.05$), Father's occupation ($\chi^2 = 2.335$, $p > 0.05$), Mother's occupation ($\chi^2 = 6.171$, $p > 0.05$), Previous knowledge regarding ARSH ($\chi^2 = 1.145$, $p > 0.05$) which indicates that there is no significant knowledge association established with age, educational qualification, type of family, religion, father's education, mother's education, father's occupation, mother's occupation and previous knowledge. Hence, the research hypothesis H2 is rejected.

LIMITATION

The research was limited to:

- 63 samples.
- Adolescent girls between 14-16 years of age.
- Main study setting (government school) was changed later due to board examinations.
- Assessing the effectiveness of educational package so to enhance the knowledge of adolescent girls regarding ARSH.

CONCLUSION

This study concluded that the adolescent girls were having inadequate knowledge regarding Adolescent Reproductive and Sexual Health. Adolescent girls are considered to be a vulnerable group in India due to various factors such as limited health information, cultural prohibition and societal norms that prioritize other aspects of their lives over their sexual health which leads to serious health problems. The result from this study shows that the educational package was way effective in educating adolescent girls and helped them to enhance their knowledge regarding reproductive and sexual health.

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