



“EFFECTIVENESS OF PLANNED TEACHING PROGRAMME ON KNOWLEDGE REGARDING PREVENTION OF VITAMIN A DEFICIENCY AMONG PRIMARY SCHOOL CHILDREN IN A SELECTED SCHOOL, BANGALORE”

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ABSTRACT

Vitamin A is crucial for children's good health and development. Vitamin A plays an important role in vision, bone growth and protects the body from infections. Vitamin A also promotes the health and growth of cells and tissues in the body particularly those in the Hair, Nails and Skin. Vitamin A deficiency is the leading cause of preventable childhood blindness and increase the risk of infections. Hence the aim of the study is to assess and improve the knowledge of primary school children regarding prevention of vitamin A deficiency. A pre- experimental study was conducted on 60 primary school children in Holy Faith Public school at Bangalore. A purposive sampling technique was used to select the sample. Structured knowledge questionnaire was used to collect the data. Calculated paired 't' test value 22.04 was found to be statistically highly significant at 0.05 level. The study concluded that the planned teaching programme was effective.

Key words: Effectiveness, Planned teaching programme, Knowledge.

INTRODUCTION

The word “vitamin” means life. Vitamins are organic molecule that is an essential micronutrient for the maintenance of normal metabolic functions.¹ According to 2009 statistical report by WHO more than 254 million children suffer from vitamin deficiency worldwide in each year, 20-40 million children suffer from mild vitamin-A deficiency and three million children from severe deficiency. World health organization estimates that 100 to 140 million children under the age of five may be living with dangerously low vitamin-stores. In Karnataka 0.3% of children are suffering from vitamin deficiency.² Vitamin A deficiency is the single most important cause of childhood blindness in the developing countries. In India alone, 52,000 children are found to go blind every year on account of vitamin A deficiency. Studies in the recent past have shown that not only does vitamin A deficiency causes blindness but it also has a profound impact on general morbidity, mortality and growth. India was the first country to launch a national program of vitamin A distribution for prevention of blindness in children. Vitamin A deficiency remains a significant cause of preventable childhood blindness and increased risk of mortality among children. Vitamin A supplementation completely “stops/prevents” childhood blindness from vitamin A deficiency.³ Vitamin A deficiency is a major nutritional problem, which can be prevented at the earliest. Hence the investigator made an attempt with planned teaching programme to deliver the message of prevention of vitamin A deficiency.

NEED FOR STUDY:

According to recent identification by WHO, the prevalence of Vitamin-A deficiency in under - five children worldwide are about 250 million and estimated 2,50, 000 to 5,00, 000 vitamin A-deficient children become blind every year, half of them dying within 12 months of losing their sight.⁴ National nutritional monitoring bureau estimated that the range of prevalence of vitamin A deficiency 0.3 % in Kerala and 0.9% in Maharashtra.⁵ FAO estimates that 50 to 1000 thousand children become blind every year from keratomalacia. In India about 1% preschool children are deficient in vitamin A.⁶

A cross sectional study was conducted to find out the prevalence of VAD among urban school children. A sample of 800 children examined. Results showed that the overall prevalence of VAD was found to be 6.37%. The prevalence of VAD was highest in 11-12 years of age group children and lowest in the 3-5 years age group (P-value >.05). Study concluded that the nutrition education regarding regular intake of plant foods rich in carotene such as green leafy vegetables, yellow fruits, carrots and animal foods containing retinol like fish liver oil, fish, liver, egg, meat, milk, butter, cheese, and use of fortified food like vanaspati, margarine, dried skimmed milk should be strengthened.⁷

Problem statement:

“A study to assess the effectiveness of planned teaching programme on knowledge regarding prevention of vitamin A deficiency among primary school children in a selected school, Bangalore”

Objectives of the study:

1. To assess the existing knowledge regarding prevention of vitamin A deficiency among primary school children
2. To evaluate the effectiveness of planned teaching programme on knowledge regarding prevention of vitamin A deficiency among primary school children.
3. To find out the association between the pretest knowledge regarding prevention of vitamin A deficiency with selected demographic variables.

METHODS AND MATERIALS:

- Research approach: a quantitative research approach was used to assess the effectiveness of planned teaching programme on knowledge regarding prevention of vitamin A deficiency among primary school children.
- Research design: A pre experimental research design with one group pretest and posttest was selected for this study to evaluate the effectiveness of planned teaching programme on prevention of vitamin A deficiency among primary school children.
- Setting of the study: Holy faith public school, Bangalore
- Population: Population comprises of primary school children.
- Sample and sampling technique: 60 primary school children on 7th std who met the inclusive criteria were selected using non probability convenient sampling technique.

Data collection:

Formal permission was obtained from the ethical committee of college and from the Headmaster of Holy faith public school. Researcher introduced herself and explained about the data collection procedure. The participants were ensured for confidentiality of the information provided by them. The data was collected by using knowledge questionnaire on prevention of vitamin A deficiency. The average time taken for pretest was 30 minutes. On the same day planned teaching programme was done and posttest was conducted on 6th day with the same tool.

The data collection tool was prepared, which contained items under the following sections: Section – A, and Section - B.

Section – A: This section consisted of 9 items pertained to the primary school children namely Gender,

religion, education qualification of father, education qualification of mother, type of family, occupation of father, occupation of mother, family income, dietary pattern.

Section – B: It consists of 30 items. The items categorized into 5 aspects (Anatomy and physiology of eye, meaning and importance of vitamins, sources of vitamin A, signs and symptoms of deficiency, management and prevention of vitamin A deficiency).

RESULT

The data was organized, tabulated and interpreted by using descriptive and inferential statistics.

Fig 1 shows that in pretest 15% of participants have inadequate knowledge, 85% have moderate knowledge and none of them have adequate knowledge regarding prevention of vitamin A deficiency. Posttest finding shows that 72% of participants have adequate knowledge, 28% have moderate knowledge and none of them have inadequate knowledge. Hence, the planned teaching programme on prevention of vitamin A deficiency among primary school children was effective.

Table 1 shows that effectiveness of planned teaching programme regarding prevention of vitamin A deficiency among primary school children. Pretest mean was 12.4, SD was 2.91. Posttest mean was 20, SD was 1.97. calculated value of “t” test was $t_{(59,05)} = 24.87$, $p < 0.05$ so the research hypothesis was accepted at 0.05 level of significance which shows that the planned teaching programme was effective.

And there was no association between pretest knowledge score and selected socio demographic variables such as gender, religion, educational qualification of mother, educational qualification of father, type of family, occupation of father, occupation of mother, family income, dietary habits of primary school children.

CONCLUSION:

Based on the findings of the study the following conclusion was drawn.

1. Knowledge deficit existed regarding prevention of vitamin A deficiency before implementation of planned teaching programme among primary school children, Bangalore.
2. Findings of the study reveal that in the pretest 15% of participants have inadequate knowledge, 85% have moderate knowledge and none of them have adequate knowledge regarding prevention of vitamin A deficiency. Posttest finding shows that 72% of participants have adequate knowledge, 28% have moderate knowledge and none of them have inadequate knowledge.

Fig.1 Comparison of level of knowledge of primary school children on Prevention of vitamin A deficiency

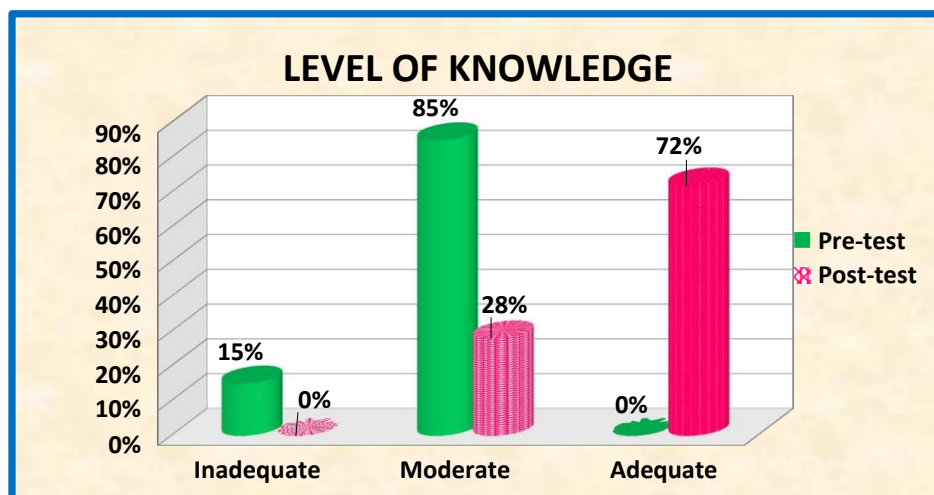


Table 1: Effectiveness of the planned teaching programme regarding prevention of vitamin A deficiency among primary school children

Knowledge score	Mean	SD	Mean Difference	t value	Inference
Pretest	12.4	2.91	7.6	24.87 (df-59, p<0.05)	Highly Significant
Posttest	20	1.97			

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