"A STUDY TO EVALUATE THE EFFECTIVENESS OF PLANNED TEACHING PROGRAMME ON KNOWLEDGE REGARDING RMNCH+A PROGRAMME AMONG ASHA WORKERS IN SELECTED COMMUNITY HEALTH CENTRES OF AHMEDABAD DISTRICT, GUJARAT."

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ABSTRACT

Background: ASHA will be the first port of call for any health-related demands of deprived sections of the population : Reproductive, Maternal, Newborn, Child and Adolescents health (RMNCH+A) who find it difficult to access health services. ASHA needs improved and updated skills for her to be successful in community. For this ASHA needs training regularly. The performance of ASHA's is crucial for the success of NRHM (NHM) and hence of the inclusive growth strategy of the government in India.

Objective: The aim of the study was to evaluate the effect of Planned teaching programme regarding RMNCH+A Programme among ASHA workers and to find out the association between selected demographic variables with the pre test knowledge score.

Methods: A pre-experimental (one group pretest post test) design was adopted for collecting the data from 60 Samples using a structured knowledge questionnaire comprising 30 questions which includes knowledge, application and comprehensive domains.

Results: According to the findings, the mean post test knowledge score was significantly higher than the mean pretest knowledge score with a mean difference of 11.43. The calculated 't' value (13.02) was greater than the tabulated 't' value (2) at 0.05 level of significance. Therefore the null hypothesis H0 was rejected and research hypothesis H1 was accepted and it revealed that the Planned teaching program was effective in increasing knowledge among ASHA workers. The findings also revealed that Educational status, Work experience, Previous source of knowledge for RMNCH+A Programme has significant association with pre-test knowledge score. Hence, the research hypothesis (H2) was accepted.

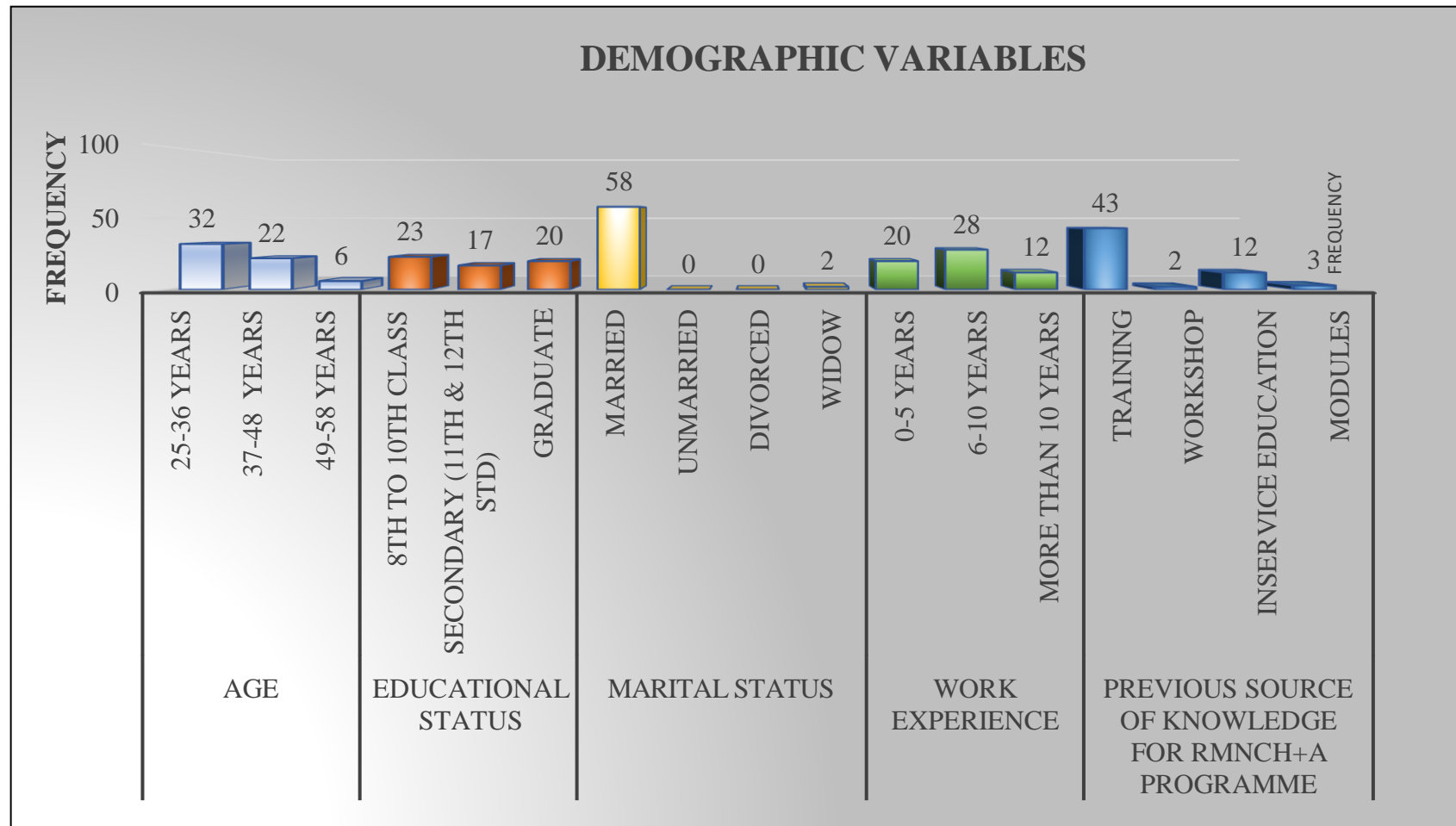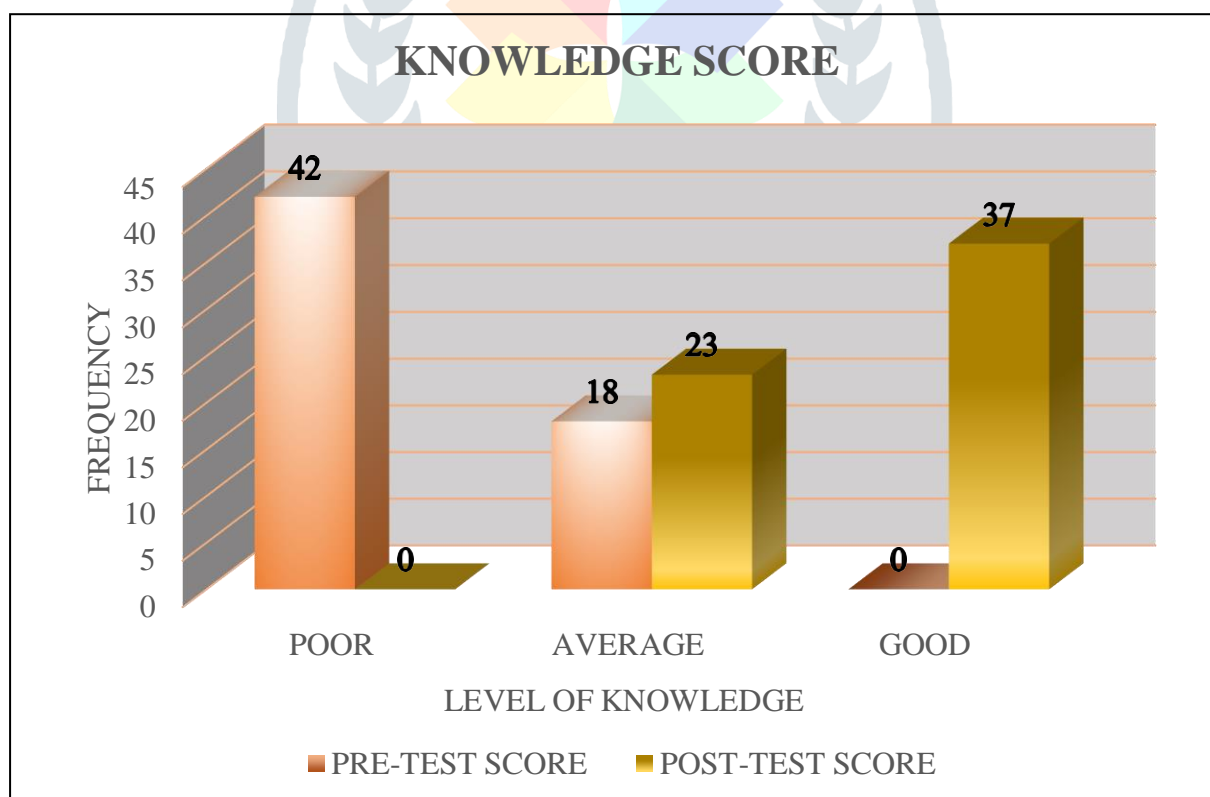**Bar Graph Showing the frequency wise distribution of demographic varables of ASHA workers**

Table: 4.3.1 Level of knowledge before and after administration of Planned TeachingProgramme.

(N=60)

| CRITERIA	PRE-SCORE		POST SCORE	
	Frequency	Percentage (%)	Frequency	Percentage (%)
POOR KNOWLEDGE (0-10)	42	70.00%	0	0%
AVERAGE KNOWLEDGE (11-20)	18	30.00%	23	38.33%
GOOD KNOWLEDGE	0	0%	37	61.67%

TABLE 4.3.2 Mean, Mean Difference, Standard Deviation (SD) and 't' test value of the pre-test and post-test knowledge score of the samples.

(N=60)

Knowledge test	Mean	MEAN DIFFERENCE	SD	t value	DF	Table Value	Sig/ Non Sig
PRE-TEST SCORE	9.89		4.82				
		11.43		13.02	59	2.00	Sig
POST-TEST SCORE	21.32		5.07				

*t (13.02)= 2.00, p<0.05

MEAN KNOWLEDGE SCORE
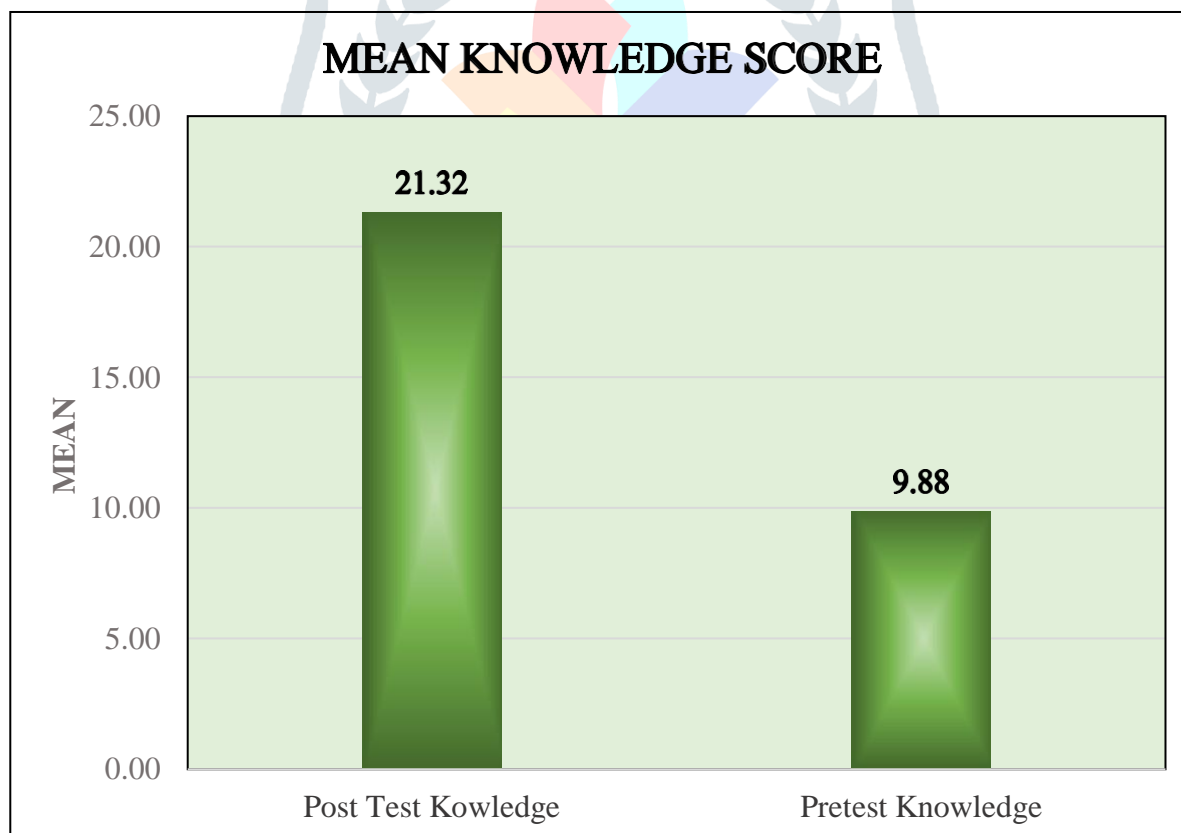
Association of Pre-test knowledge score with selected Demographic Variables.

For Age group with the pre-test knowledge scores, the calculated value of chi-square 2.33 was less than 9.49, the table value of chi-square at the 4 degree of freedom and 0.05 level of significance. Therefore, age was non-significant for the knowledge of the samples.

For Under the Educational status of samples with pre-test knowledge scores, the calculated value of chi-square 11.00 was more than 9.49 the table value of chi-square at the 4 degree of freedom and 0.05 level of significance. Therefore, the Educational status of samples was significant for the knowledge of the samples.

For Under the Marital status of samples with pre-test knowledge scores, the calculated value of chi-square 1.87 was less than 12.59 the table value of chi-square at the 6 degree of freedom and 0.05 level of significance. Therefore, the Marital status of samples was non- significant for the knowledge of the samples.

For Under Work experience of samples with pre-test knowledge scores, the calculated value of chi-square 14.68 was more than 9.49 the table value of chi-square at the 4 degree of freedom and 0.05 level of significance. Therefore, Work experience of the samples was significant for the knowledge of the samples.

For Previous source of knowledge for RMNCH+A Programme with the pre-test knowledge scores, the calculated value of chi-square 13.47 was less than 12.59 , the table value of chi-square at the 6 degree of freedom and 0.05 level of significance. Therefore, Previous source of knowledge for RMNCH+A Programme was significant for the knowledge of the samples.

Conclusion: Planned Teaching Programme regarding RMNCH+A Programme was effective in improving knowledge about RMNCH+A Programme among ASHA workers. The findings clearly indicate that there is a greater need of update knowledge regarding RMNCH+A Programme.