A Study To Assess The Effectiveness Of Structured Teachiing Programme On Knowledge Regarding Personal Hygiene Among Students Of Selected School At Kanpur

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ABSTRACT
Background: Personal hygiene is very important in all stages of human life, but appropriate cleanliness habit should be started from childhood. Children are who learn about good hygiene practice it will be last longer the life and will carry during adulthood. Hygiene guidance counseling should start as earliest possible along with parents so parents can teach about right hygiene to their children. Communicable diseases which are spread through food, water, personal contact and surrounding environment can be adequately controlled through adoption of hygienic practices. The present focus of health service in schools is on regular nutritional support and clinical assessment of students.
OBJECTIVES:
1. To assess the pre-test knowledge score regarding personal hygiene among students of selected school at Kanpur.
2. To Evaluate the Effectiveness of structured teaching program on knowledge regarding personal hygiene among students of selected school at Kanpur.
3. To assess the pre-test knowledge score regarding personal hygiene among students of selected school at Kanpur.

INTRODUCTION

School plays an important role to educate children about hygiene practices right from their young age[1.] While Schools are better place to mould behavior of students, it can also be used as a good source to develop healthy habits in children.[2] Personal hygiene aims to promote standards of personal cleanliness within the setting of the condition where people live.[3]Personal Hygiene includes bathing, clothing, washing hands after toilet, care of nails, feet and teeth; spitting, coughing, sneezing personal appearance, and healthy habits inculcation in young people.[4,5] Personal hygiene training should start at very young age and should continue through school age.[6,7]Since the beginning of the 20th century, the importance of school health has been recognized across countries.[8]The knowledge related to personal hygiene can be easily imparted in the school children for better health promotion during rest of their life time.[9] The condition of school health may be worse in communities with poor socio-economic conditions and deteriorated living situation.[10, 11]Good personal hygiene is now part of the primary health prevention strategy; it has been proven effective in reducing morbidity and mortality.[12, 13]The school and family are two major sources from one can develop a strong base for hygiene practices. The level of personal hygiene has a strong bearing on preventive capacity for many diseases and hence the assessment of its level assumes great significance. This well further enable children to attained schools regularly and thereby improving higher academic excellence[14].

METHODOLOGY:

Research methodology is a way to solve the research problem systematically. It describes various steps that are generally adopted by the researcher in studying the research problem along with logic behind them and explain why he uses a particular method or technique so that research results are capable of being evaluated by him or by others. Research methodology includes research approach, design, setting, population, sample and sampling technique, development and description of the tool, content validity, reliability, pilot study, procedure for data collection and plan for data analysis.

Research variables

Variables are qualities, properties or characteristics of persons, things or situation that changes or vary. Three types of variables were identified in this study.

They were:

1. Independent variable

Independent variable is the variable that stands alone and is not dependent on any other. In this study, the independent variable was structured teaching regarding on personal hygiene.

2. Dependent variable

Dependent variable is the variable that is dependent on or caused by another variable, the independent variable. In this study, the dependent variable was knowledge of primary students regarding personal hygiene**.**

3. Demographic variable

To explain the makeup and dispersion of the sample utilized inferential statistics, researchers collect demographic information. In this study the demographic variables were age, gender, class, religion, education of mother, education of the father, monthly income of the family and previous knowledge about personal

SAMPLING CRITERIA

The samples were selected with the following predetermined set of criteria.

Inclusion criteria

- ❖ Students who are present at the time of data collection.
- ❖ Students who are willing to participate in the study.
- ❖ Able to understand English

Exclusive criteria

1. Students who are sick at the time of the data collection.

DEVELOPMENT OF THE TOOL

The tool was developed based on the review of relevant literature, discussion with experts and experience of the investigator.

Scoring procedure

Table no. 3.1: representing level of knowledge of primary school students regarding personal hygiene. (N=60)

Level of knowledge	Score	Percentage
Inadequate knowledge	0-10	0-25%
Moderately adequate knowledge	11-20	26-50%
Adequate knowledge	21-30	51-75%
Excellent knowledge	31-40	76-100%

RESULT

Result.

Regarding the age 16(26.66%) of student were the age group of 08 years, 20(33.33%) of student were 09 years, 13(21.66%) of student were the age group of 10 years, 11(18.33%) of student were the age group of above10 years.

On considering the gender 30(50%) of students were male students and 30(50%) of subject were female students.

With regards to the class 30(50%) of student were studying 4^{th} class, 11(18.33%) of student were studying 5^{th} class, 19(31.66%) of student were studying 6^{th} class.

With regards to the religion 34(56.66%) of student were Hindu religion, 26(43.33%) of student were of Muslim religion.
With regards Monthly income 23(38.33%) of student were having less than <5000 income, 25(41.66%) of student were having 6000-25000 income, 12(20%) of student were having more than >25000 income.
With regards to education of mother 18 (30%) of mothers were having no formal education, 24(40%) 0f mothers were having higher secondary education, 15(25%) of mothers were graduate, 3(5%) of mothers were postgraduate.
With regards to education of father 8(13.33%) of fathers were having no formal education,26(43.33%) of fathers were having higher secondary education,23(38.33%) of fathers were graduate ,3(5%) of fathers were postgraduate .

With regards 41(68.33%) of student were knowledge about personal hygiene and : Pre-test and post-test knowledge of student regardingpersonal hygiene(N=60)

Level Of Knowledge	**Pre-Test**		**Post-Test**	
	Frequency	**%**	**Frequency**	**%**
Inadequate knowledge	30	50%	0	0
Moderately Adequate knowledge	28	46.66%	01	1.66%
Adequate knowledge	02	3.33%	28	46.66%
Excellent knowledge	0	0	31	51.66%

LIMITATIONS:
- The study was limited to students of among students of selected school at Kanpur.
- The study was limited to 60 students only.
- There was no control group.

RECOMMENDATIONS:
- The study can be replicated in different settings with a larger sample.
- A quasi-experimental study can be done to assess the effectiveness of structured teaching programme on knowledge regarding personal hygiene among students of selected school at Kanpur.
- A study can be conducted to assess the student knowledge among personal hygiene.
- A study can be conducted to assess the effectiveness of structured teaching programme on knowledge regarding personal hygiene among students of selected school at Kanpur.

- **CONCLUSION**
- The study was conducted to assess the effectiveness of structured teaching programme on knowledge regarding personal hygiene among students of selected school Kanpur. The knowledge of the students is gain that are getting structured teaching programme. So, the investigator rejects the null hypothesis and accepts the research hypothesis.

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