A Descriptive Study to Assess the Knowledge regarding Swine Flu among Adolescents in Selected School of District Sri Muktsar Sahib, Punjab

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Abstract: Globally, India was one among the most affected countries for cases and deaths of swine flu (influenza A H1N1) during 2009 influenza pandemic with lot of public hype and panic. A descriptive research design was used to assess the knowledge regarding swine flu among the adolescents in selected community area of Punjab. A total of 60adolescents were taken from the selected school i.e. govt. Senior. Secondary School Lambi and Adarsh Senior Secondary School Kotbhai by using convenience technique. Semi structured questionnaire was used to assess their knowledge regarding Swine flu. It was found that 24 (40%) adolescents were in the age group of >15 years and24 (40%) were in the age group of 16 years and 12 (20%) adolescents were in the age group of 17. It was found those 30 (50%) males adolescents and 30 (50%) female adolescents. Approximately 41 (68%) adolescents belonged to Sikh religion. It was found that 60 (100%) of adolescents were education in 11 Sciences. It was found that most of the adolescents39 (65%) belong to joint family. Regarding monthly income of family 29 (48%) of adolescents family income was 20000 or above. It was found that majority of the adolescents 46 (77%) belong to rural area and 14 (23%) belong to urban area. Regarding the source of information about 26 (43%) adolescents obtained information from mass media. It was found that majority of the adolescents were 60 (100%) not previously affected with swine flu. The relationships of knowledge with selected socio-demographic variables were found to be statistically non-significant at 0.05 level of significance. It is found that 5% adolescents had poor knowledge, 78.3%% had average knowledge and 16.7% had good knowledge regarding swine flu.

Keywords: Assess, Knowledge, Swine flu, adolescents.

1. Introduction

According to W. H. O, Adolescence is a transitional phase of growth and development between childhood and adulthood. Adolescent is a social concept. Adolescent period is a very difficult time for young people. Adolescent, the second decade of life, is a period of rapid growth and development, when young people acquire new capacities and faced with many new situations that create not only opportunities for progress, but also a risk to health and wellbeing. According to WHO in 2005, 50% of the world population were below the age of 25 years, i. e. ¼ of the population are adolescent, 160 million live in developing countries and 91.3 million in developed countries.

Swine flu is causing a massive havoc among the common people of India and has created fear across the various strata of the society. In April 2009, a new strain of influenza virus-A/H1N1, commonly referred to as "Swine flu", began to spread in several countries around the world. Evidence that this new strain could pass from human to human led the World Health Organization to quickly raise the risk level to Phase 6, indicating that a full global pandemic was under way.

According to W. H. O estimates, 1/3rd of the world's population will be affected with H1N1flu within two years and India is no exception. It ranked 3rd most affected country for cases and deaths of swine flu globally. The no. of cases in various countries in subsequent three years has well established the reason why it is being considered as a major threat in emerging disease in global scenario. In context to India, the highest number was reported in 2009

(27, 236), followed by 2010 (20, 604) and 2012 (5, 054 cases). WHO 2009, World Wide Figures for H1N1, have at least brought out 1 consensus among experts. The youth is more affected by it 41.6% of the people who tested positive for H1N1, in India are from metros and are youth of the death in Bangalore from swine flu, mostly are from the late 21s. The out broken of pandemic swine flu took thousands of lives in the year 2009, as part of the health care provider it is over role that play a major role in the awareness of the swine flu and its prevention among youths.

Swine flu is an infection by any one of several types of swine influenza virus. The H1N1 viral strain implicated in the 2009 flu pandemic among human after is called swine flu. Influenza A virus strain are Categorized according to protein found on the surface of the virus Hemoglutinin (H) & Neuraminidase (N) mode of transmission include air borne for mites incubation period ranges from 1 to 7 days.

Symptom include fever, cough, sore throat, running nose, body ache, headache, chills, and fatigue, diarrhoea, vomiting have also been detected. The on-going H1N1 virus pandemic is expected to affected large portion of general population it mainly affects older children and youth early identification prompt treatment with antiviral drug in high risk individual with severe infection advice to prevent worsening of the disease and worth.

Statement of Problem:

"A descriptive study to assess the knowledge regarding swine flu among the adolescents in selected school of district Sri Muktsar Sahib, Punjab."

Aim of the Study:

To assess the knowledge regarding swine flu among the adolescents in selected school of district Sri Muktsar Sahib Punjab.

Objectives of the Study:

- 1) To assess the level of knowledge regarding swine flu among the adolescents.
- 2) To find out the association between the level of knowledge regarding swine flu among adolescents with selected socio-demographic variables.

Operational Definitions:

- 1) Assess-It refers to the statistical measurement of knowledge among adolescents regarding swine flu.
- 2) Knowledge-It refers to knowledge score achieved by adolescents on knowledge questionnaire regarding swine flu.
- Swine flu It refers to an acute respiratory infectious viral disease caused by H1N1 virus and manifested by fever, cough, sore throat, running nose, body ache, chills and fatigue.
- Adolescents-It refers to male and female students with age between 13-19 years studying in selected school of district Sri Muktsar Sahib Punjab.

Assumptions:

- 1) Adolescents have some knowledge regarding swine flu.
- 2) Adolescent's knowledge may differ according to their socio demographical variables regarding swine flu.

Delimitations: This study was delimited to,

- 1) Sample size was 60.
- 2) The age group was 13-19 years in selected school of District Sri Muktsar Sahib, Punjab.

2. Methodology

Research Approach:

According to nature and accomplish the objectives of the study, a quantitative research approach was used to assess the knowledge among the adolescents regarding swine flu in community area Punjab.

Research Design:

"The research design is the master plan specifying the methods and procedures for collecting and analysing the needed information on a research study. A descriptive research design was used to conduct the study to assess knowledge regarding swine flu among adolescents in selected schools of district Sri Muktsar Sahib.

Variables:

A) Research Variable: The research variables included in the study is knowledge related to swine flu among adolescents.

Independent variable: Knowledge Dependent variable: Swine flu

B) Demographic Variables:-In this study the demographic variables are age of adolescents, gender, and educational status, religion, type of family, and place of living etc.

Research Setting:

The present study was conducted in selected school of district Sri Muktsar Sahib i.e. government Senior Secondary School, Lambi. This school was located within 5 km away from State Institute of Nursing and Paramedical Sciences, Badal. The purpose of selection of this school was the investigator's convenience, feasibility, proximity and expected co-operation from the authorities in getting permission for the research study.

Target Population: "The entire population in which the researchers are interested and to which they would like to generalize the research findings. "The target population includes adolescents of age group of 13-19 years from selected school of Dist. Shri Muktsar Sahib.

Sample Size: The sample size for the study comprised of 60 adolescents.

Sampling Technique: The non-probability convenience sampling technique was used for this study.

Inclusion Criteria:

- a) Adolescents studying in selected school of district Sri Muktsar Sahib.
- b) Adolescents who can read either Punjabi or English.

Exclusion Criteria:

- a) Adolescents who were absent at the time of data collection.
- b) Adolescents who were not willing to participate in the study.

Development and Description of Tools

A descriptive study to assess the knowledge regarding swine flu among the adolescents in selected school of District Sri Muktsar Sahib Punjab. Therefore, semi-structured questionnaire was prepared to assess knowledge of adolescents regarding the swine flu. The review of literature, experts opinion and investigators own experience provide the base for construction tool.

Tool consists of two parts: Part 1: Socio demographic variables. Part 2: Semi structured knowledge questionnaire.

Part 1: For assessing socio demographic profile of adolescents. It was divided into 9 items i. e. age, gender, religion, education status, type of family, place of living, source of health information, family monthly income, and previously affected with swine flu.

Part 2: To assess the knowledge regarding swine flu among adolescent. This part consists of 15 multiple choice questions. Each correct answer will be scored has 1 mark and 0 mark for wrong answer.

Criterion Measures:

Maximum score = 15 Minimum score = 0

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Levels of Knowledge: Poor knowledge = Below 05 Average knowledge = 06-10 Good knowledge = 11-15

Validity of Tool: According to Smith "Validity is defined as degree to which the researcher has measures what he has set out to measure."

Content validity of tool was determined by expert's opinion and suggestions on relevance of knowledge. Tool was given to experts from nursing field, community health nursing, and paediatric nursing. The expert's suggestions were considered and modifications were made.

Pilot Study: "A pilot study is a small scale version or trail run, done preparation of major study. "The pilot study was conducted on 10 adolescents. The findings of pilot study revealed that questionnaire was reliable. It was found to be 0.9. Thus the tool was found to be highly reliable.

Reliability of Research Tool: Reliability of tool was determined by test retest method which included Karl Pearson's co-relation co-efficient formula.

Data Collection Procedure: Data collection was carried out during last week of April. Before commencing the task of data collection permission was obtained from the Principal of selected school. Firstly investigator met the school teachers of the selected school, introduced her and explained the purpose and importance of the study to the school teacher and obtained complete information the adolescents. After that teacher accompanied the investigator and went to the hall where the school teacher introduced the investigator and explain the purpose of the study to adolescents. Verbal consent was obtained from the adolescents and questionnaire was distributed.

Ethical Consideration: The research study was approved by research and ethical committee of SINPMS Badal, further formal permission was taken from the Principal of selected school of district Sri Muktsar Sahib to conduct research study among adolescents.

Plan of Data Analysis: Analysis of data collection was done in accordance with the objectives of the study. Data obtained had been analysed in terms of descriptive and inferential statistics. Chi square test was used to find out the relationship of knowledge with socio demographic variables.

Section 1:

 Table 1: Frequency and percentage distribution of samples according to selected demographic variables, N=60

	cording to selected demog	-						
S no.	Demographic Variables	Frequency	Percentage					
1	Age (in years)							
	Less than 15	24	40%					
	16 years	24	40%					
	17 years	12	20%					
2	Gender							
	Male	30	50%					
	Female	30	50%					
3	Religion							
	Sikh	41	68%					
	Hindu	19	32%					
	Muslim	0	0					
	Other	0	0					
3	Education status							
	11 Science	60	100%					
	Other	0	0					
4	Family type							
	Joint Family	39	65%					
	Nuclear Family	21	35%					
5	Religion							
	Sikh	32	53.3					
	Hindu	26	43.3					
	Muslims	2	3.3					
6	Family income (monthly)							
	Below 10, 000	29	48%					
	10,001-20,000	12	20%					
	Above 20, 000	19	32%					
7	Place of living							
	Rural	46	77%					
	Urban	14	23%					
8	Source of Health information							
	TV	15	25%					
	Newspaper	9	15%					
	Internet	26	43%					
	Other	10	17%					
9	Previously affected with Swine flu							
	Yes	0	0					
	No	60	100%					

Section 2:

Objective 1: To assess the level of knowledge regarding swine flu among the adolescents.

Table 2: Criteria measure of knowledge score, N=60

Percentage (%)	Frequency (f)
16.7%	10
78.3%	47
5.0%	3
	(%) 16.7% 78.3%

Maximum =15 Minimum=0

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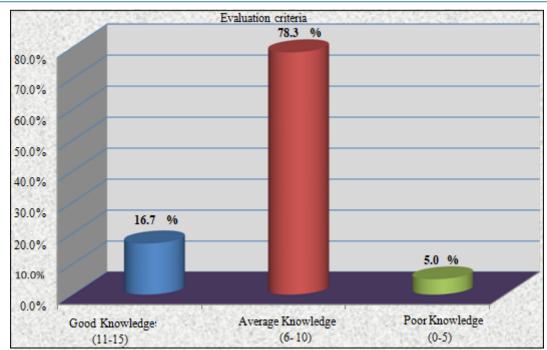


Figure 11: A bar diagram showing percentage distribution of adolescents according to their level of knowledge

It is found that 5% adolescents had poor knowledge, 78.3%% had average knowledge and 16.7% had good knowledge regarding swine flu.

Objective 2: To find out the association between the level of knowledge regarding swine flu among adolescents with selected socio-demographic variables.

Demographic Variables		Levels of knowledge				
Demographic Variables			Average	Poor	Chi Square Test $\chi 2$ (df)	P Value
	>15 Years	6	17	1		0.499NS
Age (in years)	16 Years	3	19	2	3.363 (4)	
	17 Years	1	11	0		
Gender	Male	5	22	3	3.191 (2)	0.203NS
Gender	Female	5	25	0	5.191 (2)	
	Sikh	5	33	3		0.221NS
Religion	Hindu	5	14	0	3.020 (2)	
Kengion	Muslim	0	0	0		
	Other	0	0	0		
Education Status	11 Science	10	47	3	NA	
Education Status	Other	0	0	0		
Types of Family	Joint Family	5	32	2	1.189 (2)	0.552NS
Types of Failing	Nuclear Family	5	15	1		
	Below 10, 000	3	25	1		0.434NS
Family Monthly Income (Rs.)	10, 001-20, 000	3	9	0	3.800 (4)	
	Above 20, 000	4	13	2		
Place of Living	Rural	6	38	2	2.181 (2)	0.336NS
I face of Living	Urban	4	9	1	2.101 (2)	
	TV	2	13	0	4.511 (6)	0.608NS
Source of Health information	Newspaper	2	7	0		
	Internet	4	19	3		
	Other	2	8	0		
Previously affected with Swine flu	Yes	0	0	0	NA	
i leviously affected with Swille Ilu	No	10	47	3	INA	

3. Discussion

Present study was conducted to assess the knowledge regarding swine flu among adolescents of selected school at District Sri Muktsar Sahib. Total 60 adolescents were selected using convenient sampling technique. Semi Structured knowledge questionnaire was used to assess the knowledge regarding swine flu. The analysis of data was done using descriptive and inferential statistics.

Objectives 1: To assess the level of knowledge regarding swine flu among the adolescents

The above finding is supported by the study done by Vidushi M, et. al (2010) 10 conducted a study on knowledge, attitude and practices regarding swine flu among paediatricians of

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Chandigarh. A questionnaire based survey related to Novel H1N1swine origin influenza virus (S-OIV, swine flu) was administered to 134 paediatricians of Chandigarh city, to assess their knowledge, attitudes and practices. Only 52% was aware that swine flu predominantly occurs in young healthy individuals.90% were familiar with clinical symptoms and 70% with incubation period.

Objectives 2: To find out the association between the level of knowledge regarding swine flu among adolescents with selected socio-demographic variables

Kamate SK, et. al. (2009) conducted a study on public knowledge, attitude and behavioural changes in an Indian population during the Influenza A (H1N1) outbreak. A cross-sectional questionnaire survey was conducted in Udaipur (Rajasthan, India) among 791 individuals (57% males and 43% females) from 23 July to 27 August 2009. Results showed that Of 791 respondents, 83.1% had heard about H1N1, but 47.4% felt that they did not have enough information about the pandemic. Only 34.5% felt that their health would be seriously affected if they contracted H1N1. Over half of the respondents (59.6%) had no idea about the duration of the pandemic. Knowledge differed significantly according to gender, age groups, and educational status as well as working status. They concluded that in spite of having acceptable knowledge and

References

- [1] McGraw-Hill. Infectious disease. Dictionary of Scientific and Technical Terms, Sci-Tech Dictionary 2003. [Online].2003 [cited 2009 Dec 09]; Available from: URL:
- http://www.answers.com/topic/infectious-diseas.html
 [2] Swine influenza history. [Online].2009 [cited 2009 Dec 07]; Available from: URL: http://en.
- wikipedia.org/wiki/Swine_influenza#History
 [3] India's swine flu deaths reach 561. [Online].2009
 [cited 2009 Nov 16]; Available from: URL: http://blog. taragana.com/health/2009/11/26/indiasswine-flu-deaths-reach-561-16347/
- [4] Karnataka swine flu rises to 69. [Online].2009 [cited 2009 Sept 16]; Available from: URL: http://headlinesindia. mapsofindia.com/health-and-Sciencenews/animadisease/karnataka-swine flu-toll-rises-to-69-22577.html.
- [5] Archana PB. H1N1 infection in children. Prism's Nursing Practice. Journal of clinical nursing education, training and career development.2009 julsept; 4 (3): 80-4.
- [6] Swine flu: India on high alert plans to stockpile 15 billion oseltamivir pills. [Online].2009 [cited 2009 Oct 18]; Available from: URL: http://www.dancewithshadows.com/pillscribe/swineflu-india-on-high-alert-plans-to stockpile-15-billionoseltamivir-pills/.html
- Sebastain MR, Lodha R, Kabra SK. Swine origin influenza (swine flu). Indian J Pediatrics [serial online] 2009 Aug [cited 2009 Oct 28]; 76 (8): 833-41. Available from: URL: http://www.ncbi. nlm. nih.gov/pubmed/19802552
- [8] Chathurvedi S. Pandemic influenza; imminent threat, preparedness and the divided globe. Indian Pediatrics

[Online].2009 [cited 2009 Nov 5]; 46 (2): 115-21. Available from: URL: http://indianpediatrics. net/feb2009/115.pdf

- [9] Youth more at risk of swine flu: WHO [Online].2009
 [cited 2009 Aug 18]; Available from: URL: http://epaper.
 timesofindia.com/Repository/TOIKM/2009/08/18/T
 OKIM_2009_2009_8_187.pdf1
- [10] Vidushi M, Shiv Sajan S. Knowledge, attitude and practices regarding novel H1N1 (swine) flu among pediatricians of Chandigarh. Indian paediatrics [serial online] 2010 January 17 [cited 2010 Jun 7]; 47: 101-2. Available from: URL: http://indianpediatrics. net/jan2010/101-102.pdf
- [11] Balkhy HH, Abolfotouh MA, Al-Hathlool RH, Al-Jumah MA. Knowledge, attitudes, and practices related to the swine influenza pandemic among the Saudi public. BMC Infect Dis [serial online] 2010 Feb [cited 2010 Jun 7]; 28 (10): 42. Available from: URL: http://www.ncbi. nlm. nih.gov/sites/pubmed /20187976
- [12] Kamate SK, Agrawal A, Chaudhary H, Singh K, Mishra P, Asawa K. Public knowledge, attitude and behavioral changes in an Indian population during the Influenza A (H1N1) outbreak. J Infect Dev Ctries. [serial online] 2009 Nov 30 [cited 2010 Jun 2]; 4 (1): 7-14. Available from: URL: http://www.ncbi. nlm. nih.gov/sites/pubmed/20130372
- [13] Anand K, Zarychanski R, Pinto R, Cook DJ, Marshall J, Lacroix J. et al. Critically ill patients with 2009 influenza A (H1N1) infection in Canada. JAMA [serial online] 2009 Nov 4 [cited 2009 Nov 23]; 302 (17): 1872-9. Available from: URL: http://jama. ama-assn.org/cgi/content/full/2009.1496
- [14] Seale H, McLaws ML, Heywood AE, Ward KF, Low bridge CP, Van D. et al. The community attitude towards swine flu and pandemic influenza. Med J Aust [serial online] 2009 Sep [cited 2009 Nov 28]; 191 (5): 267-9. Available from: URL: http://www.ncbi. nlm. nih.gov/sites/entrez/19740048
- [15] Rubin G J, Richard A, Lisa P W. Public perception, anxiety, and behavioural change in relation to the swine flu outbreak: a cross-sectional telephone survey. BMJ [serial online] 2009 Jul [cited 2009 Nov 22]; 2 (339): 2651. Available from: URL: http://www.bmj.com/cgi/content/full/339/jul02_3/b26 51
- [16] Crum-Cianflone NF, Blair PJ, Faix D, Arnold J, Echols S, Sherman SS et al. Clinical and epidemiological characteristics of an outbreak of an outbreak of novel H1N1 (swine origin) influenza a virus among unite states military beneficiaries. Clin Infect Dis Dis [serial online] 2009 Dec [cited 2009 Dec 13]; 49 (12): 1801-10. Available from: URL: http://www.ncbi. nlm. nih.gov/pubmed/19911946
- [17] Han K, Xiaoping Z, Fan H, Lunguang L, Lijie Z, Huilai M et al. Lack of airborne transmission during outbreak of pandemic (H1N1) 2009 among tour group members, China. Emerg Infect Dis [serial online] 2009 Oct [cited 2009 Nov 9]; 15 (10): 1578-81. Available from: URL: http://www.cdc.gov/eid/content/15/10/pdfs/09-1013.pdf

Volume 11 Issue 3, March 2022

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- [18] La JT, Yeung NC, Choi KC, Cheng MY, Tsui HY, Griffiths S. Acceptability of A/HINI vaccination during pandemic phase of influenza A/H1N1 in Hong Kong; population based cross sectional survey. BMJ [serial online] 2009 Oct [cited 2009 nov12]; 27 (339): 4164. Available from: URL: http://www.ncbi. nlm. nih.gov/pubmed/19861377
- [19] Grayson ML, Melvani S, Druce J, Barr IG, Ballard SA, Johnson PD, Mastorakos T. et al. Efficacy of soap and water and alcohol-based hand-rub preparations against live H1N1 influenza virus on the hands of human volunteers. Clin Infect Dis [serial online] 2009 Feb [cited 2009 Nov12]; 48 (3): 285-9. Available from: URL: http://www.tripdatabase.com/doc/822411-Efficacyof-Soap-and-Water-and-Alcohol-Based-Hand-Rub-Preparations-against-Live-H1N1-Influenza-Virus.
- [20] Castro-Jimenez MA, Castillo-pabon JO, Rey-Benito GJ, Pulido-dominguez PA, Borboso-R. Epidemiologic analysis of the laboratory-confirmed cases of Influenza A (H1N1) in Colombia. Euro Surveillance [serial online] 2009 Jul [cited 2009 Nov10]; 14 (30): 19284. Available from: URL: http://www.ncbi. nlm. nih.gov/pubmed/19643059