

# Effectiveness of Structured Teaching Programme on Knowledge regarding Sexually Transmitted Disease among Adolescents Girls in Selected Area, Lucknow

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**Abstract:** Background of the Study: Igwegbe AO, Ilika A (2005) conducted a study on knowledge and perception of Sexually transmitted diseases and mother to child transmission among 312 antenatal mothers at Nnamdi Azikiwe university teaching hospital. Nnewi the study result found that level of awareness of STD among antenatal mothers was high (99%). the main source of information were radio (44%), television (38%) and print media (34%). through majority (94.2%) was aware sexually transmitted disease infection can coexist with pregnancy. only 76.9% were aware of mother to child transmission, transplacental (46.1%) breastfeeding (31.7%) and vaginal delivery (16.3%) were the commonly identified routes of vertical transmission. surprisingly, eighteen respondents (5.8%) indicated that caesarean section is a possible route of vertical transmission. the study was concluded that the level of knowledge and perception of mother to child transmission is inadequate. finally the study suggested the need to scale up health education about mother to child transmission in health facilities. Ganwande AV, Vasudeo ND et. al (2000) conducted a study on sexually transmitted disease in long distance truck drivers Nagpur in India. a study was undertaken on 670 long distance truck drivers. the results found that a total of 293 (43.7%) subjects had one or more signs and symptoms suggestive of STDs. Syphilis 21.9%, Gonorrhoea 6.7%, HIV, Hepatitis-B 5.1%. the study concluded that long distance truck drivers were at high risk for getting STDs including HIV infection. De Lima Soares V, De Mesquita AM et. al (2003) conduct a study on risk factors for sexually transmitted disease in a female population in rural north-east Brazil. a total 341 women (98.4%) were examined gynaecologically and colposcopically. the results reveal the trichomatis was detected among unmarried women. age (<20years) was a significant factor. the study concluded that the expected spread of HIV from the urban centers at the coast to the interior. there is urgent need for providing STD- related health care and health education for adolescents and women in rural Brazil. Bouwhuls SA, Davis MD (2004) conducted a study on contribution of sexually transmitted disease and socioeconomic factors to perinatal mortality rural Ghana. perinatal mortality data was collected from 154 patients record of the outpatient and inpatient gynaecology department of rural Ghanaian setting. the study results found that the rate of perinatal mortality at the holy family hospital. in the Berekem district of Ghana was 13.7% (154 of 1123 documented births). 1.6% patient had prior obstetric complication. (70.1%). average age 25 years); previous prevalence on STDs. Including gonorrhoea, trichomoniasis or syphilis, 83 patients (53.8%) history of other chronic disease. 13 patients (8.5%) and illiteracy 66 patients (42.8%). the no. of previous sexual partners and illiteracy were higher in the STD positive women. the study conducted that sexually transmitted disease and previous obstetric complications seemed to contribute considerably to perinatal mortality in rural Ghana. Christian P, Khattray SK et al (2006) undertook a cross sectional study on risk factors of Chlamydia and gonorrhoea among 1177 rural Nepali women. the study result found that Chlamydia trachomatis was detected in 1.0% and gonorrhoea in 2.3% self report of all three symptoms of lower abdominal pain and burning on urination and vaginal discharge associated with the presence of gonorrhoea. Neonatal eye discharge was associated with the maternal gonococcal infection. incidence of preterm delivery (<32weeks) was higher among women positive for gonorrhoea. in a multivariable analysis. low body mass index and cattle ownership were associated with gonorrhoea: where as women literacy was associated with Chlamydia. Method: The research design selected for this study is Pre Experimental one group pre-test and post-test research design. The present study was conducted in the Khun Khun Ji Girls Inter College, Lucknow. Population for the present study consisted of adolescents girls in Khun Khun Ji Girls Inter College Lucknow. Sampling is necessary because it is more economical and efficient to work with a small group of elements. In the present study the sample were selected by using Simple Random sampling technique. This is a sampling technique where the researcher draws the sample because they are convenient for the researcher to collect data for study. Researcher restricted the size of the sample as 60. Result: According to Age among 60 adolescents girls 41 (68.3%) were from 15-16 years age group, 15 (25%) were from 16-17 years age group, 4 (6.7%) 17-18 years age group. According to Religion among 60 adolescents girls 56 (93.3%) were Hindu and 4 (6.7%) were muslim. According to Residence among 60 adolescents girls, 53 (88.3%) from urban, 7 (11.7%) from rural. According to Type of family among 60 adolescents girls, 18 (30%) from joint family, 36 (60%) from nuclear, 5 (8.3%) from broken family, 1 (1.7%) from extended family. According to Socio economic status among 60 adolescents girls, 1 (1.7%) from upper, 45 (75%) from middle, 14 (23.3%) from lower. According to Information regarding STD among 60 adolescents' girls 9(15%) of adolescents obtained information from peer group, 23(38%) of adolescents obtained information from news paper, 20 (33.3%) of adolescents obtained information from television, 8(13.3%) of adolescents obtained information from other. The data was obtained by using structured questionnaire on knowledge regarding sexually transmitted disease. The question comprises of 25 questions each carrying one mark. In this the researcher did not inform adolescents girls priorly about the test of knowledge on sexually transmitted disease. the overall knowledge level of adolescents girls regarding sexually transmitted disease, in pre test there were 58 number (96.67%) of the adolescents girls with inadequate knowledge, 2 number (3.33%) of the adolescents girls with the moderate level of knowledge. Post-test and pre-test knowledge score mean (5.000), SD (4.573), SE mean (0.590), t calculated (8.469), degree of freedom is 59 at significance level of .000. Tabulated t value (3.46) is less than calculated t value (8.469), structured teaching programme is effective. there is significant association exist between the ages of adolescents girls with their knowledge. There was no significant association exist between religion with their knowledge. There was no significant association exist between residence with their knowledge. There is no significant association exist between the type of family with their knowledge. There is significant association exist between the socio-economic status with their knowledge. There was significant association exist between the information regarding STD with their knowledge. Conclusion: The present study revealed that structured teaching programme on

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*knowledge regarding sexually transmitted disease is effective. Researcher observed that adolescents girls have less knowledge regarding sexually transmitted disease. In future, various measures should be taken to improve nurses knowledge and skill regarding cardiopulmonary resuscitation.*

**Keywords:** Infrared Lamp Therapy, Episiotomy Wound

## 1. Introduction

Adolescence is the developmental phase that bridges childhood and adulthood. Adolescence is the most important and sensitive period of one's life. According to WHO (World health organization) expert committee, Adolescence is defined as a period between 10 to 19 years, means the second decade of life. Adolescence is an age group usually tends to be subsumed under the categories of either youth or children. The formulation of definitions clearly reveals the age and characteristics of adolescents is only a recent phenomenon; and yet to be widely recognized allows the world. The actual interpretation of adolescence as a phase of life remains a social construct that differ between cultures. Adolescence is the age of curiosity. Teenagers are naturally will be aware of their bodies and about the world. Today as their bodies get maturity become much earlier. Studies have proved the age of starting menstruation has come down to age nine or ten, also find information about sex. The internet and television is being squarely blamed for increasing sexual awareness. News paper and magazines too have been found to be major influence. Cultural influences from youth oriented media all teens to become sexually sophisticated, while parents and teachers exhort there to abstain from sex. Sexual risk behaviour is experimental in adolescence may be due to family structure, peer group influence and exposure of the children etc. Historically the assumption of an active sexual life was thought to be situated in heterosexual monogamous relationship between young adults. Today initiative of sexuality reflects wide acceptance of multiple kinds of intimate relationship beginning early to adolescence. This phenomena relatively new societal norm creates a dangerous dilemma for many adolescents who are engaging unprotected sex. It brings pleasure, yet invites early child bearing as well as exposure to human immune deficiency virus (HIV) and other potentially emerging sexually transmitted diseases (STD). Sexually transmitted diseases, 'STD' for short are infections transmitted from one person to another during intercourse or other intimate contact. The common sexually transmitted diseases are AIDS, genital herpes, genital marts, gonorrhoea, syphilis, Chlamydia, and hepatitis B. The people often believe that STD's are something that affects some category of people. The fact is that sexually transmitted disease can affect men and women from all backgrounds. It's just a question of who's having unprotected sex and sex with multiple partners. Often people who have contracted STD's show no symptoms, but as long as they are infected they can pass the disease on to their sexual partners. The other area where everybody trends lightly is morality of sexual intimacy. The desire to have sex is normal and healthy. But identify the permissible age, ethics of abstinence and virtues of virginity. Even though AIDS and STD can be treated if caught in the early stages, but "prevention is better than cure".

Sex education is both a controversial and taboo topic in many schools and families. There has been a long time

debate over who should be responsible for teaching children about sex. Should the parents be the sole educators, the schools, or a combination? In addition, schools are troubled with conflict over which approach to teaching sex education is appropriate. Some people believe there should be an abstinence approach where students are taught sex should wait until after marriage. Others feel the comprehensive approach which includes education on contraception is more appropriate.

## 2. Literature

**Igwegbe A0, Iika A (2005)** conducted a study on knowledge and perception of Sexually transmitted diseases and mother to child transmission among 312 antenatal mothers at Nnamdi Azikiwe university teaching hospital. Nnewi the study result found that level of awareness of STD among antenatal mothers was high (99%). the main source of information were radio (44%), television (38%) and print media (34%). through majority (94.2%) was aware sexually transmitted disease infection can coexist with pregnancy. only 76.9% were aware of mother to child transmission, transplacental (46.1%) breastfeeding (31.7%) and vaginal delivery (16.3%) were the commonly identified routes of vertical transmission. surprisingly, eighteen respondents (5.8%) indicated that caesarean section is a possible route of vertical transmission. the study was concluded that the level of knowledge and perception of mother to child transmission is inadequate. finally the study suggested the need to scale up health education about mother to child transmission in health facilities.

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**Madani TA (2006)** a study carried out on sexually transmitted disease in Saudi Arabia among the youth in Saudi Arabia. the study results reveals the total of 39049 STS was reported to the ministry of health. trichomoniasis (28.1%), gonorrhoea (14.2%), genital herpes (0.6%), genital warts (3.5%), chancroid (0.2%), syphilis (8.7%), HIV(14%). finally the study suggested the appropriate preventive strategies that conform to the Islamic rules and values are essential to reduce the spread of infection particularly among youth.

### 3. Conclusion

The present study revealed that structured teaching programme on knowledge regarding sexually transmitted disease is effective. Researcher observed that adolescents girls have less knowledge regarding sexually transmitted disease. In future, various measures should be taken to improve nurses knowledge and skill regarding cardiopulmonary resuscitation.

### 4. Future Scope

A study can be replicated on a larger sample to validate the findings of present study. A comparative study may be undertaken to find out the difference in knowledge among adolescent girls and adolescent boys on prevention of sexually transmitted disease. A similar study can be undertaken with a control group design for other categories. An experimental study can be undertaken to validate and standardize the information guide sheet.

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