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"EFFECTIVENESS OF A STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING RISK FACTOR AND PREVENTION OF SUICIDAL BEHVIOUR AMONG ADOLESCENTS IN A SELECTED COLLEGE AT BENGALURU"

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Background of the study: Suicide is a major public health problem globally. Data on the factors influencing suicidal behaviors that can inform prevention policies are limited in Bhutan. The prevalence of suicidal ideation and suicide attempt was 3.1% and 0.7%, respectively. We found female gender, being unemployed, low and middle household income than high household income, and having a family history of suicide were associated with higher odds of having suicidal ideation. Younger age and alcohol consumption were associated with both suicidal ideation and suicide attempts. While those from the middle-income group compared to those in the high-income group had reduced odds of attempting suicide. The findings can help inform policy investments for suicide prevention. Objectives: To assess the existing knowledge regarding risk factors and prevention of suicidal behavior among adolescents.2.To evaluate the effectiveness of Structured Teaching Program on the knowledge regarding risk factors and prevention of suicidal behavior among adolescents by comparing pretest and posttest.3.To determine the association between pre-test knowledge scores regarding risk factors and prevention of suicidal behavior among adolescents with selected demographic variables. Sampling method: purposive sampling technique was used to select the samples based on inclusion and exclusion criteria. Tool: Structured knowledge, questionnaire for assessing the knowledge regarding risk factor and prevention of suicidal behaviour. Analysis: The obtained data were analyzed using descriptive and inferential statistics and

interpreted in terms of objectives and hypotheses of the study. **Results:** The results showed that there was significant difference between the pretest and posttest knowledge scores regarding risk factor and prevention of suicidal behavior among adolescents. The paired t-test value =9.046 at df (39) was greater than the table value at 0.05 level of significance, With a significant enhancement in mean (19.03%) and SD (2.3) percentage. So the results are concluded that structured teaching programme has a significant effect on the improvement of Knowledge regarding risk factor and prevention of suicidal behavior among adolescents. **Conclusion:** The results of the study show that, developed adequate knowledge after the structured teaching programme.

Key words: risk factor, suicidal behavior, prevention, adolescents.

Introduction

Adolescence (from Latin 'to grow up') is a transitional stage of physical and psychological development that generally occurs during the period from puberty to legal adulthood (age of majority). Adolescence is usually associated with the teenage years, but its physical, psychological or cultural expressions may begin earlier and end later.¹

Today India has a population of adolescents that is among the largest in the world. This is the generation, which will shape India's future. One of the most important commitments a country can make for its future economic, social, and political progress and stability is to address the health- and development-related needs of its adolescents. ²

Suicide is a major public health problem globally. Data on the factors influencing suicidal behaviors that can inform prevention policies are limited in Bhutan. The prevalence of suicidal ideation and suicide attempt was 3.1% and 0.7%, respectively. We found female gender, being unemployed, low and middle household income than high household income, and having a family history of suicide were associated with higher odds of having suicidal ideation. Younger age and alcohol consumption were associated with both suicidal ideation and suicide attempts.

Need of The study

The World Health Organization (WHO) estimates that about one million people die by suicide every year. It is the third leading cause of death. This represents a "global" mortality rate of 16 per 100,000 during 2010. One death occurs every 40 seconsds. Suicide is a leading cause of death in the age group between 15 and 24 years. The mean suicidal rate for this age group is 7.4/100,000, Suicide rates is higher in males (10.5) than in females (4.1).⁶

According to the data published by the WHO, nearly 8,00,000 people die due to suicide every year, which is one person every 40 seconds. Suicide is the second leading cause of death among 15-29-year-olds globally 79 per cent of suicides occurred in low and middle-income countries in 2016 Suicide accounted for 1.4 per cent of all deaths worldwide, making it the 18th leading cause of death in 2016 Failure in examinations led to 2,413 suicides by students in 2016 -- or seven every day -- accounting for percent of student suicides. The National Crime Records Bureau (NCRB) in its 2015 data made a shocking revelation that in India, one student commits suicide every hour⁸.

Objective of the study:

- 1. To assess the existing knowledge regarding risk factors and prevention of suicidal behavior among adolescents.
- 2. To evaluate the effectiveness of Structured Teaching Program on the knowledge regarding risk factors and prevention of suicidal behavior among adolescents by comparing pretest and posttest.
- 3. To determine the association between pre-test knowledge scores regarding risk factors and prevention of suicidal behavior among adolescents with selected demographic variables.

Assumption: This study assumes that:

- 1. Adolescents may have an inadequate knowledge on risk factors and prevention of suicidal behaviour.
- 2. Structured teaching programme may enhance the knowledge on prevention of suicidal behaviour among adolescents.

Research Design: the research design selected for this study was One group pre & post research design.

Variables:

Dependent variables: In this study, level of knowledge regarding risk factor and prevention of suicidal behaviour is the dependent variables.

Independent Variables: In this study, structured teaching programme on knowledge regarding risk factor and prevention of suicidal behaviour among adolescents.

Setting of the study: The study was conducted in, vidyodaya college of Nursing, Bangalore.

Target population: In the present study population was defined as adolescents from selected college, Bangalore.

Sample: sample who are fulfilling the inclusion and exclusion criteria.

Criteria for sample selection:

The criteria selected for the study are quantitative by nature and eligibility criteria are specified for the study.

Inclusion criteria:

- Students belonging to the age group between 16-19 years.
- Students who are willing to participate in the study.

Exclusion criteria

- Who will not present at the time of data.
- Who are not willing to participate in the study.

Sampling technique and size:

Purposive sampling technique and size of sample is 60.

Data collection tools and techniques:

The instrument selected in research must be a vehicle that obtains best data for drawing conclusion, which is pertinent to the study. Tool is the device that a researcher uses to collect the data. The tool acts as a best instrument to assess and collect the data from the subjects of the study.

In the present study, Structured knowledge, questionnaire for assessing the knowledge regarding risk factor and prevention of suicidal behavior is based on the objectives of the study as it was considered the most best and appropriate instrument to elicit the response from the subjects for assessing the knowledge regarding risk factor and prevention of suicidal behaviour. After extensive and systematic review of literature and discussion with the experts, the investigator had developed the structured knowledge, questionnaires.

PART 1: SOCIO DEMOGRAPHIC DATA

The socio demographic data consists of 10 items pertaining to Age, gender, religion, place of accommodation, father's qualification, mother's qualification, monthly income, parent's occupation, source of information.

PART 2: STRUCTURED QUESTIONNAIRE

This part of the tool consists 25 questions regarding knowledge on the questions were distributed in the following sections like –

SECTION-I: General knowledge regarding suicidal behavior SECTION-II: Knowledge regarding causes, risk factor and warning signs of suicidal behavior

SECTION –III: Knowledge regarding prevention of suicidal behavior

Scoring technique: The structured knowledge questionnaire consisted of 25 objective type questions with a single correct answer. Every correct answer was awarded a score of one (1) point and every incorrect/unanswered was awarded zero (0) point. The maximum score on the structured knowledge questionnaire was twenty Four (25).

DATA COLLECTION PROCEDURE

Formal written permission was obtained from concerned authorities before data collection. The subjects were assembled as per the fixed schedule. The purpose of the study was explained to them and confidentiality assurance was given to all the respondents' .The researcher after obtaining the consent from the participants collected the data.

Pre test was conducted for assessing the knowledge among adolescents in vidyodaya college of nursing for 30 minutes. The structured teaching programme was conducted on the same date respectively. The duration of each session was 1 hour. After the sessions investigator clarified the questions raised by the group. Post test was done after 5th day using the same questionnaire to evaluate the effectiveness of the structured teaching programme. The data collection procedure was terminated by thanking each respondent for their participation.

Result: The results showed that there was significant difference between the pretest and posttest knowledge scores regarding risk factor and prevention of suicidal behavior among adolescents. The paired t-test value =9.046 at df (39) was greater than the table value at 0.05 level of significance ,With a significant enhancement in mean (19.03%) and SD (2.3) percentage. So the results are concluded that structured teaching programme has a significant effect on the improvement of Knowledge regarding risk factor and prevention of suicidal behavior among adolescents.

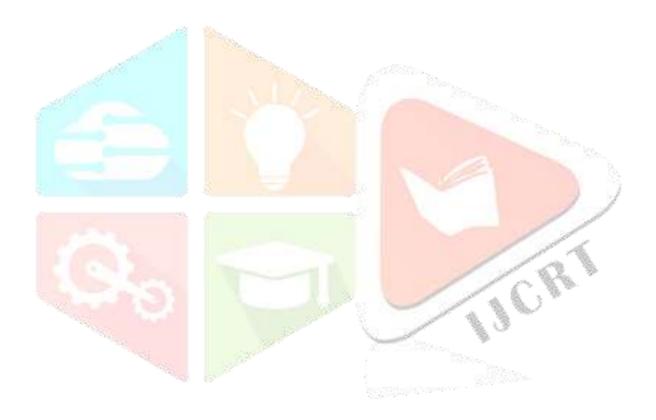
Conclusion: The results of the study show that, developed adequate knowledge after the structured teaching programme.

Reference:

- 1. Sarah AF, Laurence YK, Brian JC. The associations between peer and parental relationships and suicidal behavior in early adolescents. Canadian journal of psychiatry 2006 Oct; 51(11): 698-703.
- 2. Brent DA, Perper JA. Prevalence of specific suicidal behavior. American Journal of Psychiatry 2004;149: 159-165.
- 3. Joffe RT, Offord DR. Suicidal behavior in youth. American journal of psychiatry 2005; 145:1420-1428.
- 4. http://www.pubmed.com :Watkins Carol. Suicide and the School: Recognition and intervention for suicidal students in the school setting. [Online]. 2003 [cited 2007 Oct10]; Available from: URL:.
- 5. https://www.who.int/news-room/fact-sheets/detail/suicide
- 6. https://www.who.int/mental_health/prevention/suicide/estimates/en/
- 7. https://www.indiatoday.in/education-today/gk-current- affairs/story/suicide-rate-per-year-countries-who-1337780-2018-09-11
- 8. Indian J Psychiatry. 2010 Jan; 52(Suppl1): S291–S296. doi: 10.4103/0019-5545.69255
- 9. (https://www.tandfonline.com/doi/full/10.1080/02739615.2019.1666009)
- 10. https://en.wikipedia.org/wiki/List_of_states_and_union_territories_of_In di a_by_suicide_rate
- 11. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6218408/)
- 12. .(https://pubmed.ncbi.nlm.nih.gov/8841671/)
- 13. https://www.tandfonline.com/doi/full/10.1080/02739615.2019.1630281
- 14. https://www.researchgate.net/publication/222383811_Attempted_Suicide_in_Adolescence_A_Review_and_Critique_of_the_Literature
- 15. Wagnar KD. Bullying and risk of suicidal behavior in adolescents. Psychiatric times. 2007 Jan 01; 24(6): p. 442-46
- 16. https://www.researchgate.net/publication/222383811_Attempted_Suicid e_
- in_Adolescence_A_Review_and_Critique_of_the_Literature
- 17. (https://www.researchgate.net/publication/343125743_Suicide_in_Adolescen
- ce_A_Review_of_Literatur
- 18. Wagnar KD. Bullying and risk of suicidal behavior in adolescents. Psychiatric times. 2007 Jan 01; 24(6): p. 442-46
- 19. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6218408/
- 20. https://www.researchgate.net/publication/289686126_Profile_of_Suicid e_
- Attempts_Aadolescents_Demographic_Features_Reasons_and_Risk_Fac to rs
- 21. https://pediatrics.aappublications.org/content/138/1/e20161420
- 22. https://d-nb.info/1184119686/34

io

- 23. https://www.researchgate.net/publication/249335489_Efficient_intervent ns_on_suicide_prevention_A_literature_review
- Gwendolyn P and Kees VH. Suicide prevention in adolescent: a controlled sstudy of the effectiveness of a school based psycho- educational program in Belgium. Journal of Child Psychology and Psychiatry 2006; (9): 910-18.
- 25. https://www.hindawi.com/journals/tswj/2014/450943/
- 26. Naik A.S. Pattnaik K. The prevalence of suicidal behavior and its epidemiological correlates amongst adolescent students in south Delhi. Indian journal of psychiatry 2005; 26 (1): p. 34-38
- 27. https://www.oxfordhandbooks.com/view/10.1093/oxfordhb/9780195388565.



001.0001/oxfordhb-9780195388565-e-007

28. https://pediatrics.medresearch.in/index.php/ijpr/article/view/59 29. https://pediatrics.medresearch.in/index.php/ijpr/article/view/59 30. Gururaj G, Isaac MK, Subbakrishna DK, Ranjani R. Risk factors for completed suicides: a case – control study from Bangalore, India. Inj control saf promot.2007 Sep; 11(3): 183-91 31. Menon V, Subramanian K, Selvakumar N, Kattimani S. Suicide prevention strategies: An overview of current evidence and best practice elements. Int J Adv Med Health Res 2018;5:43-51 32. https://www.oxfordhandbooks.com/view/10.1093/oxfordhb/978019538856 5.001.0001/oxfordhb-9780195388565-e-007 33. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2709750/ https://acamh.onlinelibrary.wiley.com/doi/full/10.1111/jcpp.12831 34. 35. https://www.researchgate.net/publication/301324887 36. https://www.researchgate.net/publication/301324887_ 37. https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0210383 JCR1 https://onlinelibrary.wiley.com/doi/full/10.1111/appy.12452 38. 39. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4143775/ 40. Journal of College of Medical Sciences-Nepal, Vol-11, No 3, Jul-Sept 015 41. International **Journal** of Multidisciplinary February -2019 www.rrjournals.com 42. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6218408/ 43. https://www.researchgate.net/publication/289686126_Profile_of_Suicide_ Attempts_Aadolescents_Demographic_Features_Reasons_and_Risk_Facto 44. https://pediatrics.aappublications.org/content/138/1/e20161420