



**“A PRE- EXPERIMENTAL STUDY TO ASSESS  
THE EFFECTIVENESS OF PLANNED  
TEACHING PROGRAMME ON KNOWLEDGE  
OF ADOLESCENT GIRLS REGARDING  
PREVENTION OF ACQUIRED  
IMMUNODEFICIENCY SYNDROME IN  
SELECTED HIGHER SECONDARY SCHOOL  
DISTT, HISAR (HARYANA)”**

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### Abstract

A pre- experimental study to assess the effectiveness of planned teaching programme on knowledge of adolescent girls regarding prevention of acquired immuno deficiency syndrome in selected higher senior secondary school, Distt. Hisar (Haryana) Majority of adolescent girls were in the age **16-17 years**. 63.3% of adolescent girls are from class 11<sup>th</sup>. Most of adolescent girls are Hindu & belongs to medium class family. In **pre-test** level of **knowledge** of adolescent girls showed that **68.3%** of adolescent girls were having poor knowledge, **31.7%** of population was average of knowledge and **0%** of population was having good knowledge. In **pre-test** level of **knowledge** of adolescent girls showed that **68.3%** of adolescent girls were having poor knowledge, **31.7%** of adolescent girls were average of knowledge and **0%** of adolescent girls were having good knowledge. In **post-test**, Level of peoples in the post test showed that 45% of adolescent girls were having **good knowledge** regarding prevention of HIV/AIDS and 55% of the adolescent girls were having **average knowledge** and **0%** adolescent girls were having **poor knowledge** regarding prevention of HIV/AIDS.

**Materials and Methods:** A pre experimental research design was taken for this study. The study was conducted in selected schools of Hisar Haryana. The sample size was 60 adolescent girls. The convenient sampling was used. Data were collected from the selected schools of Hisar Haryana to assess the level of knowledge by using semi-structured knowledge questionnaire. The collected data were tabulated and analysed by descriptive and inferential statistics.

**Results:** In **pre-test** level of **knowledge** of adolescent girls showed that **68.3%** of adolescent girls were having poor knowledge, **31.7%** of population was average of knowledge and **0%** of population was having good knowledge. In **post-test**, Level of peoples in the post test showed that 45% of adolescent girls were having **good knowledge** regarding prevention of HIV/AIDS and 55% of the adolescent girls were having **average knowledge** and **0%** adolescent girls were having **poor knowledge** regarding prevention of HIV/AIDS. In **post-test**, the lowest people percentage score (60%) regarding HIV is an communicable or non communicable disease. (63.3%), regarding transmission of HIV, (63.3%) regarding late stage symptoms of HIV, (66.7%) regarding incubation period of HIV, (73.3%), regarding HIV/AIDS is a communicable or non communicable disease.

**Conclusion:** The study concludes that majority of the adolescent girls had poor level of knowledge regarding prevention of HIV/AIDS in pretest. After implementing structured teaching program majority of the adolescent girls had average and good level of knowledge. Maximum knowledge was regarding General information of HIV/AIDS, Mode of transmission of HIV/AIDS, Risk factors of the HIV/AIDS, Symptoms of HIV/AIDS, Diagnosis and prevention of HIV/AIDS, Treatment of HIV/AIDS.

**Keywords:** experimental, Assess, Association, knowledge, Population, dysmenorrhea, school. Immunodeficiency, prevention.

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## **INTRODUCTION**

No other word endangers as much fear, revulsion, despair and utter helplessness as AIDS. It is in fact, rewriting medical history as humankind's deadliest scourge with 40 Million deaths forecast in this millennium, statistics tell their own sordid tale. AIDS (Acquired Immuno Deficiency Syndrome) that is caused by HIV, HIV (Human Immuno Deficiency Virus) is a virus that enters blood. In HIV positive people, the virus can be

found in the blood, sex fluids (such as sperm and vaginal fluids) and breast milk. HIV is too small to see with naked eye. HIV attacks and eventually destroys the body's immune system. The immune system is like your body's army. It normally fights germs, infections, bacteria and viruses that would make you sick. The body cannot defend itself against germs, infections, bacteria and viruses when this "army" gets weak.<sup>1</sup>

Diagnosis is made through a blood test that

screens specifically for the virus. If HIV has

National AIDS control programme was launched in 1987 with two components - service component and a research component. As the enormity of the problem unfolded a National Aids control organization (NACO) was established in 1992 to Manage and co-ordinate the programme. The components of the programme are, Strengthening the programme management capacity at National and State levels, Surveillance and clinical management, Ensuring Blood safety, Control of Sexually transmitted Disease, Public Awareness and community support.<sup>3</sup>

## METHODOLOGY

Research methodology is a way to systematically solve research problems. In this study evaluative approach was used in the study. The research design pre experimental one group pre test post test research design. the sample size was 60 adolescent girls. The age group of adolescent girls age group 15-19 years of age. the study setting was selected senior secondary school in district Hisar, Haryana.

## RESULT

Majority of adolescent girls were in the age **16-17 years**. 63.3% of adolescent girls are from class

11<sup>th</sup>. Most of adolescent girls are Hindu & belongs to medium class family. They got information from multimedia (TV, radio, internet etc) and also from health professionals. In **pre-test** level of **knowledge** of adolescent girls showed that **68.3%** of adolescent girls were having poor knowledge, **31.7%** of population was average of knowledge and **0%** of population was having good knowledge. In **pre-test** level of **knowledge** of adolescent girls showed that **68.3%** of adolescent girls were having poor knowledge, **31.7%** of adolescent girls were average of knowledge and **0%** of adolescent girls were having good knowledge. In **post-test**, Level of peoples in the post test showed that 45% of adolescent girls were having **good knowledge** regarding prevention of HIV/AIDS and 55% of the adolescent girls were having **average knowledge** and **0%** adolescent girls were having **poor knowledge** regarding prevention of HIV/AIDS. In **assessment**, **pre-test** the lowest adolescent girls percentage score (3.03%) related to knowledge of first national AIDS control programme. The maximum knowledge deficit existed in the (11.7%) regarding transmission of HIV, (20%) regarding difference between HIV/AIDS, (18.3%) related to late stage symptoms of HIV/AIDS and (23.3%) AIDS is a communicable or non communicable disease.

(30%), regarding HIV/AIDS is curable or not, (26.7%) regarding incubation period of HIV, (33.3%) regarding people on risk for getting HIV. In **post-test**, test the lowest people percentage score (60%) regarding HIV is a communicable or non communicable disease. (63.3%), regarding transmission of HIV, (63.3%) regarding late stage symptoms of HIV, (66.7%) regarding incubation period of HIV, (73.3%), regarding HIV/AIDS is a communicable or non communicable disease. The statistical outcome of association between demographic variables of adolescent girls with their knowledge score regarding prevention of HIV/AIDS. In order to examine the association between these variables the chi-square test was worked out. The Chi-square value shows that there is significance association between the score level and demographic variables (**Stream**). There is no significance association between the level of scores and other demographic variables (**Age, class/ standard, religion, socio economic status, source of information**) the calculated chi-square values were less than the table value at the 0.05 level of significance.

In **post-test** the Chi-square value shows that there is significance association between the score level and demographic variables (**Age, Class**). There is no significance association between the level of scores and other demographic variables (**Stream, Religion, Socio economic status, Source of information**) the calculated chi-square values were less than the table value at the 0.05 level of significance.



**Pre-test knowledge score of adolescent girls regarding prevention of HIV/AIDS in Association with Selected Demographic Variables.**

Association Of Pretest Knowledge Scores Of With Selected Socio-Demographic Variables.									
Variables	Opts	Good	Average	Poor	Chi Test	P Value	df	Table Value	Result
Age	15-16 yrs		0	2	6.070	0.108	3	7.815	Not Significant
	16-17 yrs		12	14					
	17-18 yrs		4	20					
	18-19 yrs		3	5					
Class	11th		12	26	0.000	0.985	1	3.841	Not Significant
	12th		7	15					
Stream	Arts		4	26	11.356	0.010	3	7.815	Significant
	Medical		6	7					
	Non – Medical		4	6					
	Commerce		5	2					
Religion	Hindu		19	38	1.463	0.226	1	3.841	Not Significant
	Muslim		0	0					
	Sikh		0	3					
	Others		0	0					
Socio Eco. Status	Lower class		5	13	0.180	0.672	1	3.841	Not Significant
	Middle class		14	28					
	Upper class		0	0					
Source of Information	Family		1	0	5.013	0.171	3	7.815	Not Significant
	Multi Media		9	28					
	Health Professionals		7	12					
	Others		2	1					

**Post-test knowledge score of the adolescent girls regarding prevention of HIV/AIDS in Association with Selected Demographic Variables.**

Association Of Posttest Knowledge Scores Of With Selected Socio-Demographic Variables.									
Variables	Opts	Good	Average	Poor	Chi Test	P Value	df	Table Value	Result
Age	15-16 yrs	1	1		11.476	0.009	3	7.815	Significant
	16-17 yrs	17	9						
	17-18 yrs	9	15						
	18-19 yrs	0	8						
Class	11th	21	17		4.411	0.036	1	3.841	Significant
	12th	6	16						
Stream	Arts	15	15		4.251	0.236	3	7.815	Not Significant
	Medical	4	9						
	Non – Medical	3	7						
	Commerce	5	2						
Religion	Hindu	27	30		2.584	0.108	1	3.841	Not Significant
	Muslim	0	0						
	Sikh	0	3						
	Others	0	0						
Socio Eco. Status	Lower class	7	11		0.388	0.533	1	3.841	Not Significant
	Middle class	20	22						
	Upper class	0	0						
Source of Information	Family	1	0		1.902	0.593	3	7.815	Not Significant
	Multi Media	16	21						
	Health Professionals	8	11						
	Others	2	1						

**Pre-test and Post-test knowledge to see effectiveness of STP**

**CRITERIA MEASURE OF KNOWLEDGE SCORE**

Score Level (N= 60)	PRETEST (F %)	POSTTEST (F %)
Poor.(0-10)	41(68.3%)	0(0%)
Average.(11-20)	19(31.7%)	33(55%)
Good.(21-25)	0(0%)	27(45%)

## DISCUSSION AND CONCLUSION

The present study is concluded with implications to nursing field, limitation and delimitations with study design, methods and recommendations for the future. Effectiveness of structured teaching programme on knowledge of adults regarding prevention of HIV/AIDS among adolescent girls, Comparison of pre-test and post- test knowledge of adolescent girl, Pre-test and post-test knowledge score of adolescent girls regarding prevention of HIV/AIDS in association with selected socio- demographic variables. After the analysis it was found that the post test knowledge score was more than the knowledge score of pre test.

## REFERENCES

1. HIV/AIDS informational booklet, available from, <http://www.aidforaids.co.za/downloads/HIVinfobooklet.pdf>
2. Daniel Murrell, MD 2018, explaining HIV and AIDS, available from, <https://www.medicalnewstoday.com/articles/17131.php>
3. Basavanhappa BT, "Community Health Nursing" 2<sup>nd</sup> edition, volume 2<sup>nd</sup>, Jaypee brothers' medical publisher Ltd., 791 – 793.
4. Global information and education on HIV and AIDS, available from, <https://www.avert.org/professionals/hiv-around-world/asia-pacific/india>.
5. Prabhakara G. N., text book of "Community Health for Nurses" 2<sup>nd</sup> edition, PEEPEE publisher and distributors (p) Ltd., 267 -268.
6. Shajahan Ismail, Ashika Shajahan,et al. "Adolescent sex education in India: Current perspectives" Indian journal of psychiatry 2015 Oct-Dec; 57(4): 333–337. Available from, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4711229/>
7. Kamalam S., "Essential in Community Health Nursing" 3<sup>rd</sup> edition 2017, Jaypee brothers medical publisher Ltd., 258.
8. Shailesh K. Kawale, 2017 "awareness about HIV/AIDS among rural population of central India" volume 5, 3-4.
9. HIV and youth [online]2008 [cited on 2009, nov, 20] available from URL : [www.google.com](http://www.google.com).
10. Swarnkar Keshav, "community Health Nursing" 2<sup>nd</sup> edition, published by N.R. Brothers, 493.
11. HIV sentinel surveillance and HIV estimation in India 2007:a technical brief. Naaco 2007[online] 2009. [cited on 2009 , nov, 25] available from:URL:<http://google.com>.
12. HIV cases down by 0.11in Haryana, available from, <http://www.dnaindia.com/health/report-hiv-positive-cases-down-by-011-per-cent-in-haryana-2409573>

13. Health department of Haryana, 2015, available from <http://haryanahealth.nic.in/menudesc.aspx?page=369>.

14. Yadav Manoj Kumar, "Text book of Nursing Research and Statistics with nursing theory and Models" First Edition, Published By Lotus Publishers. 114.

15. Neelam Makhija. Introduction to Nursing Research. New Delhi. A.P.Jain and co. 2006. P33.

16. Lori Newman ,Jane Rowley,et al. (2015), "Global Estimates of the Prevalence and Incidence of Four Curable Sexually Transmitted Infections", Available from: - <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0143304>.

17. Kalichman Seth C, Pellowski Jennifer, (2011) " study on Prevalence of sexually transmitted co-infections in people living with HIV/AIDS" available from, <http://sti.bmjjournals.org/content/early/2011/02/17/sti.2010.047514>.

18. Gardner EM, McLies MP, et al. 2011, "The spectrum of engagement in HIV care and its relevance" available from, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3136773/>.

19. Jeffrey H. Herbst et al. (2008), "Estimating HIV Prevalence and Risk Behaviors of Transgender Persons in the United States" January 2008, Volume 12. Available from: - <https://link.springer.com/article/10.1007/s10461-007-9299-3>

20. Pettifor, Audrey E, Rees, (2005)" Young people's sexual health in South Africa" an official international AIDS society journal, September 23rd, 2005 - Volume 19 - Issue 14.p 1525-1534.

21. Rhodes, Tim, Lowndes, (2002) "Explosive spread and high prevalence of HIV infection" available from, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC12218407/>.

22. Linda A. Valleroy, PhD, (2000), "HIV Prevalence and Associated Risks" available from, <https://jamanetwork.com/journals/jama/fullarticle/192876>.

23. Cherrie B. Boyer, Lauren Greenberg et al. (2017) "Exchange of Sex for Drugs or Money in Adolescents and Young Adults: An Examination of Socio demographic Factors, HIV-Related Risk, and Community Context": February 2017, Volume 42, Issue 1, pp 90–100. Available from: - <https://link.springer.com/article/10.1007/s10900-016-0234-2>

24. Gregorio A. Millett MPH, John L. Peterson PhD, et al (2011),"Greater Risk for HIV Infection of Black Men Who Have Sex With Men. Available from: - <https://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2005.066720>

25. R E Booth, J K Watters, and D D Chitwood (2011), "HIV risk-related sex behaviors among injection drug users, crack smokers, and injection drug users who smoke crack" American Journal of Public Health (AJPH) October 07, 2011. Available from: - <https://ajph.aphapublications.org/doi/abs/10.2105/AJPH.83.8.1144>

26. John E, Lewis PhD, et al. (2010), "HIV/AIDS Risk in Heterosexual College. Available from: - <https://www.tandfonline.com/doi/abs/10.1080/07448481.1997.9936875>

27. Carol GoodenowPhD, Laura A. SzalachaEdD, (2007) "Dimensions of Sexual Orientation and HIV-Related Risk Among Adolescent Females" American journal of public health, 2008 June; 98(6): 1051–1058.

28. Seth C. Kalichman, Leickness C. Simbayi at al. (2007) Alcohol Use and Sexual Risks for HIV/AIDS in Sub-Saharan Africa: 31 January 2007. Available from: - <https://link.springer.com/article/10.1007/s11121-006-0061-2>

29. Kalichman SC, Simbayi LC, et al 2007, "Alcohol use and sexual risks for HIV/AIDS" available from, <https://www.ncbi.nlm.nih.gov/pubmed/17265194>.

30. Kevin J.P. Craib, Patricia M. Spittal, et al (2003) "Risk factors for elevated HIV incidence among Aboriginal injection drug users" CMAJ. 2003 Jan 7; 168(1): 19–24.

31. Anna Wald, Katherine Link (2002), "Risk of Human Immunodeficiency Virus Infection in Herpes Simplex Virus Type 2-Seropositive Persons, 2002 Jan 1;185(1):45-52.

32. Carol GoodenowPhD, Julie Netherland, (2002) "AIDS-Related Risk Among Adolescent Males Who Have Sex With Males" American journal of public health, 2002 February; 92(2): 203–210.

33. Journal of adolescent health, Volume 29, Issue 3, Supplement 1, September 2001, Pages 57-63. Available from: - <https://www.sciencedirect.com/science/article/pii/S1054139X01002877>

34. Kevin M. De Cock, MD (Jan. 2018), "Prevention of mother-to-child HIV transmission in resource-poor countries" available sources, <https://jhu.pure.elsevier.com/en/publications/prevention-of-mother-to-child-hiv-transmission-in-resource-poor-c-3>

35. Ahmed Taher Bokhamseen, et al. (2017), "Knowledge and attitude among late adolescents (16-19 years old) toward human immunodeficiency virus/acquired immune deficiency syndrome in Al-Khobar, Saudi Arabia". Available from: - <https://www.ejmanager.com/mnstemps/67/67-1491505969.pdf?t=1543829752>

36. Anjali Singh and Shikha Jain (2009), "Awareness Of HIV/AIDS Among School Adolescents" Health and Population: Perspectives and Issues(2009) Vol. 32 (2), 59-65.

37. Chhabra R, Springer c, Rap KP ,study the knowledge,perceptions,attitude of adolescent girls towards hiv,safer sex and sex education, [serial online] BMC Womens Health 2008 July. 23:8:12. available from:URL:<http://pubmed.com>

38. Zahra Abdeyazdan, Narges Sadeghi, (2008), "Knowledge and attitude toward AIDS/HIV among senior school students in Isfahan". Available from: - [file:///C:/Users/DELL/Downloads/197-607-1-PB%20\(1\).pdf](file:///C:/Users/DELL/Downloads/197-607-1-PB%20(1).pdf)

39. Panneer Selvi C, et al (2007) "AIDS Awareness among Higher Secondary Students" available from, [http://shodhganga.inflibnet.ac.in/bitstream/10603/43203/8/08\\_chapter%202.pdf](http://shodhganga.inflibnet.ac.in/bitstream/10603/43203/8/08_chapter%202.pdf)

40. Anahita Tavoosi, Azadeh Zaferani et al. (2004) "Knowledge and attitude towards HIV/AIDS among Iranian students" 24 may 2004. Available from: - <https://bmcpublichealth.biomedcentral.com/articles/10.1186/1471-2458-4-17>

41. H. A. Bektaş & O. Kulakaç PhD RN (2007) "Knowledge and attitudes of nursing students toward patients living with HIV/AIDS" Journal of Psychological and Socio-medical Aspects of AIDS/HIV Volume 19, 2007 - Issue 7. Available from: - <https://www.tandfonline.com/doi/abs/10.1080/09540120701203352>

42. Sindhu S. Study to evaluate the effectiveness of planned teaching programme regarding prevention of HIV/AIDS in selected pre university colleges, mangalore. Unpublished Master of Nursing Thesis. RGUHS.2003

