



# “A Study To Assess The Effectiveness Of Planned Teaching Programme On Knowledge Regarding Prevention Of Computer Vision Syndrome Among High School Students Of Selected High Schools At Tikota, Vijayapura.”

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**Abstract:** In the modern world, the viewing of electronic displays has become a huge part of daily living at home, at work, during leisure time and the move. The use of laptop, desktop and tablet computers, smartphones and electronic reading devices has become ubiquitous. Without computer, world has no global awareness. The computer has become backbone of today's occupational settings. From primitive tools of the stone age, today we have entered a new era, the computer age-an age which owes everything to inventors. It has created a brand new environment. They are the heartbeats of the modern world.

Now a day's children and technology are practically connected. Whether for educational purposes or others, children are spending a good portion of their day on "LED screen" staring at computers, smartphones and other digital devices.

For those children without a personal home PC, friends often provide them with access to a computer, most commonly to play computer games. Today's youth learn to play computer games as an expected rite of development in our high tech society. These games help teach many of the basic skills and knowledge is necessary to use a computer, such as the use of the mouse and/or joystick, basic keyboard commands, starting and ending programs, and learning how to save and store files. Learning these basic skills enable youngsters to feel comfortable with computing and give them an ability to learn to use educational software more easily at school.

Blue light is emitted by the LED screens of computers, smartphones and other digital devices. Many researchers and ophthalmologist are concerned that the added blue light exposure from computers and other digital devices might increase a risk of age-related eye diseases like macular degeneration in future life.

**Methodology:** The study involved quasi experimental research design, with simple random sampling technique (lottery method) was used to draw the sample. 60 high school children were made to mark the structured questionnaire by following inclusion and exclusion criteria. The pre-test was followed by implementation of planned teaching programme and post test conducted after 8 days using the same structured questionnaire to find out the effectiveness of planned teaching programme. The results were described by using descriptive and inferential statistical analysis.

**Result:** Regarding demographic variables, Majority 25(41.7%) of subjects were in the age group of 14 years, There was equal male and female samples 30(50%) each, Majority 44(73.3%) of subjects were Hindus, Majority 35(58.3%) subjects were resided at rural area, Maximum number of subjects 44(73.3%) lives in nuclear family, None of the subjects were immunized against prevention of computer vision syndrome (100%) and Majority of the respondents 20(31.7%) were getting information regarding prevention of computer vision syndrome by family members.

Regarding effectiveness of planned teaching programme, the overall mean knowledge score percent in the pre-test is 53.12% and 77.75% in the post-test. The mean knowledge score during pre-test is 21.25 and 31.10 in the post-test. The statistical Paired-‘t’ test indicates that enhancement in the mean knowledge scores were found to be significant at 0.05 percent level for all the aspects under the study. The association between mean percentage knowledge score and demographic variables were computed by using Chi-square test. There was no significant

association between demographic variable and the mean knowledge scores except in between sex of the respondents and pre-test knowledge scores and in between religion of the respondent and post-test knowledge scores.

### **Interpretation and Conclusion**

The overall findings of the study clearly showed that the planned teaching programme was significantly effective in improving the knowledge on prevention of computer vision syndrome.

**Key Words:** Effectiveness; Adhumukha Savasana Therapy Stress; Primary School Teacher, Diet etc

**INTRODUCTION:** According to WHO “Health is a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity” Therefore, health has three magnitudes i. e physical, mental and social which are interrelated each other which contributes the wellbeing of youth. Hence wellbeing can be viewed as subgroup of health with same relationship with physical, mental and social factors. While the thought of wellbeing is derived from many disciplines, every one approves that wellbeing is more than the absence of illness and disease.<sup>1</sup>

### **PROBLEM STATEMENT**

“A study to assess the effectiveness of planned teaching programme on knowledge regarding prevention of computer vision syndrome among high school students of selected high schools at Tikota, Vijayapura.”

## **OBJECTIVES**

1. To assess the pre-test knowledge of high school students regarding prevention of computer vision syndrome.
2. To develop and conduct a planned teaching program on prevention of computer vision syndrome among high school students.
3. To assess the post-test knowledge of high school students regarding prevention of computer vision syndrome.
4. To assess the effectiveness of planned teaching program on prevention of computer vision syndrome.
5. To find out the association between pre test knowledge scores of high school students with selected demographic variable

## **Assumptions**

The study assumes that.

- Adolescents may not have adequate knowledge about lifestyle pattern.
- Adolescents may not have good attitude about lifestyle pattern.
- Integrated Training Programme may enhance the knowledge which will help
- to attitude about lifestyle pattern among Adolescents..

## **Hypotheses:**

Fallowing hypotheses will be tested at 0.05 level of significance.

**H<sub>1</sub>** : There is a significant improvement in post-test knowledge scores compared to the pre-test knowledge scores of high school students.

**H<sub>2</sub>** : There is a significant association between knowledge scores with selected

## **MATERIALS AND METHODS**

### **Research design**

“Pre-experimental one group pre-test and post-test design”

### **Setting and population**

This study was conducted at selected rural areas of Tikota.

### **Sample.technique and Sample size**

The sample size for the present study is 100 selected through convenient sampling technique

### **Inclusion criteria:**

- Adolescents may not have adequate knowledge about lifestyle pattern.
- Adolescents may not have good attitude about lifestyle pattern.
- Integrated Training Programme may enhance the knowledge which will help to attitude about lifestyle pattern among Adolescents.

**Exclusion criteria:**

- Adolescents may not have adequate knowledge about lifestyle pattern.
- Adolescents may not have good attitude about lifestyle pattern.
- Integrated Training Programme may enhance the knowledge which will help to attitude about lifestyle pattern among Adolescents.

**Variable under study are**

**Dependent variable:** knowledge about lifestyle pattern.

**Independent variable:** Integrated Training Programme

**Demographic variables:** Age in years, gender, marital status, type of family, occupation, working condition.

**Method of data collection and tool description:** The data were collected through questionnaires consist

Section A: Socio-Demographic Data Section

Section B: self-administered knowledge questionnaire

**Results:**

**Table: 5.1 Distribution of the subjects according to socio-demographic variables.**

n=100

Sl. No.	Tables	Page no.
1.	Distribution of adolescents according to their age group.	55
2.	Distribution of adolescents according to their religion.	56
3.	Distribution of adolescents according to their educational qualification.	57
4.	Distribution of adolescents according to their parents occupation.	58
5.	Distribution of adolescents according to their monthly family income in rupees.	59
6.	Distribution of adolescents according to their gender.	60
7.	Distribution of adolescents according to their type of family.	61
8.	Distribution of adolescents according to their duration of maintaining lifestyle pattern.	62
9.	Distribution of adolescents according to their source of information.	63
10.	To assess the pre test level of knowledge on lifestyle pattern among adolescents.	64
11.	To assess the post test level of knowledge on lifestyle pattern among adolescents.	65
12.	To assess the pre test level of attitude score on lifestyle pattern among adolescents.	66
13.	To assess the post test level of attitude score on lifestyle pattern among adolescents.	68
14.	Comparison between pre and post test level of knowledge on lifestyle pattern among adolescents.	70

15.	Comparison between pre and post test level of attitude on lifestyle pattern among adolescents.	72
16.	Over all Mean, Mean%, and SD of Enhancement knowledge score of pre test and post test on lifestyle pattern among adolescents.	74
17.	Over all Mean, Mean%, and SD of Enhancement attitude scores of pre test and post test on lifestyle pattern among adolescents.	76
18.	Association between pre test knowledge scores with selected demographic variables.	78-79
19.	Association between pre test attitude scores with selected demographic variables.	84-85
20.	Correlation between pre test and post test knowledge and attitude regarding lifestyle pattern among adolescents.	90

## DISCUSSION

### Section 2: Analysis and interpretation of pre test and post test knowledge score on lifestyle pattern.

In pretest, 46(76.6%) of adolescents had inadequate knowledge and in post test 50(83.3%) of adolescents had adequate knowledge.

### Section 3: Analysis and interpretation of pre test and post test attitude score on lifestyle pattern.

The pretest level of attitude of lifestyle pattern 46(76.6%) had unfavourable attitude, they are categorized as less than 50% score and 14(23.3%) had average attitude; they are categorized as 51- 70% score.

The post test level of attitude of lifestyle pattern 9(15%) had average attitude, they are categorized as less than 51-70% score and 51(85%) had favourable attitude; they are categorized as above 70% score.

### Section 4: Comparison between pretest and posttest level of knowledge score on lifestyle pattern.

In comparison between pre and post test knowledge 46(76.6%) had inadequate knowledge in pre test and post test 50(83.3%) had adequate knowledge.

### Section 5: Comparison between pretest and post test level of attitude score on lifestyle pattern.

The pre and post test level of attitude on lifestyle pattern. In pretest, 46(76.6%) subjects had unfavourable attitude and 14(23.3%) had average attitude. In post test, 9(15%) had average attitude, 51(85%) had favourable attitude.

### Section 6: Aspects wise Mean, Mean% and SD of pre and post test knowledge score on lifestyle pattern.

Aspects wise Mean, Mean%, and SD of pre test and post test knowledge scores. In pre test mean is 12.1 with the standard deviation of 6.7 and mean percentage is 43.5. The post test scores revealed that the subjects had a mean of 22.7 with the standard deviation of 5.3 and mean percentage 81.07%.

### **Section 7: Aspects wise Mean, Mean% and SD of pre and posttest attitude score on lifestyle pattern.**

In aspect wise Mean, Mean% and SD of pre test and post test attitude scores. In pretest mean is 10.12 with the standard deviation of 5.06 and mean percentage is 42.16. The post test scores revealed that the subjects had a mean of 20.29 with the standard deviation of 4.5 and mean percentage 84.54.

### **Section 8: Association between selected demographic variables with pretest knowledge score.**

There is significant association between pretest knowledge level of adolescents on lifestyle pattern with selected demographic variables like Religion ( $\chi^2=3.34$ ), Parents occupation ( $\chi^2=23.4$ ), Income ( $\chi^2=29.3$ ), Gender ( $\chi^2=21.3$ ), Type of family ( $\chi^2=4.5$ ), Duration of junk food consumption ( $\chi^2=8$ ). Hence the stated research hypothesis  $H_4$  is accepted at 0.05 level of significance.

There is no association between pretest knowledge level of adolescents on lifestyle pattern with selected demographic variables like Age ( $\chi^2=3.34$ ) Education ( $\chi^2=3.46$ ) and Source of information ( $\chi^2=7.6$ ). Hence the stated hypothesis  $H_4$  is rejected at 0.05 level of significance.

### **Section 9: Association between selected demographic variables with pre test attitude score.**

There is significant association between pre test attitude level of adolescents on lifestyle pattern with selected demographic variables like- Age ( $\chi^2=8.72$ ), Education ( $\chi^2=15$ ), Parents occupation ( $\chi^2=17.4$ ), Income ( $\chi^2=42.2$ ), Gender ( $\chi^2=12.6$ ), Type of family ( $\chi^2=7.2$ ), Duration of junk food consumption ( $\chi^2=8$ ) and source of information ( $\chi^2=12$ ) shows there will be significant association with pre test attitude score of adolescents on lifestyle pattern. Hence, the stated research hypothesis  $H_4$  is accepted at 0.05 level of significance.

There is no association between pre test attitude level of adolescents on lifestyle pattern with selected demographic variables like Religion ( $\chi^2=3.11$ ). Hence the stated hypothesis  $H_4$  is rejected at 0.05 level of significance.

### **Section 10: Correlation between knowledge and attitude regarding lifestyle pattern among adolescents.**

Correlation with the knowledge and attitude, both in pre test 0.94 and post test 0.93 is positive. Hence knowledge and attitude are significant each other. The stated hypothesis  $H_3$  is accepted.

### **CONCLUSION**

This chapter deals with the conclusion, implication, recommendation and limitations of the present study. The statement of the problem is, **“Impact of Integrated Training Programme on knowledge and attitude about lifestyle pattern among adolescents from selected areas at Vijayapura”**.

The major findings of the study revealed that, only 76.6 % adolescents were having inadequate knowledge and also had 76.6% unfavourable attitude. When education is given there is an up liftment of knowledge as well as attitude on lifestyle pattern. The post test findings show that 83.3% were got adequate knowledge and 85% were attitude too. When knowledge and attitude are correlating each other, findings show that there is a positive correlation between knowledge and attitude. Hence knowledge and attitude are significant each other.

It may be concluded that, enhancement of the knowledge and attitude of adolescents on lifestyle pattern. Hence, the nurse who comes in contact with adolescents should take the initiative to provide necessary information to the adolescents regarding various aspects of lifestyle pattern to reduce morbidity, to

improve the knowledge to bring quality of care among adolescents. So Integrated Training Programme is the best method to improve knowledge and attitude regarding lifestyle pattern among adolescents in selected school.

## RECOMMENDATIONS

### Nursing Services:

Several implications can be drawn from the findings of the present study for nursing practices. The study findings revealed inadequate knowledge, unfavorable attitude and insufficient skills towards lifestyle pattern. Hence results and findings of present study will have important implications to profession of nursing and promotion of health. Nurses can heal the adolescents in health promoting lifestyle and they should understand various aspects and factors leading to healthy lifestyles which help the adolescents to help in health promoting behaviors. Nurses continuously need to cause awareness among teenagers regarding health promotion and healthy lifestyle and they require adequate knowledge base. Knowledge alone is not enough and they require skills and good comprehension. Nurses can work with adolescents in school environment and community, so that they get opportunity for health education to enhance the knowledge and cognizance of youth. They can act as role model for school children by focusing on their past experiences and accomplishments and through role playing. They also can give emphasis on benefits of health promoting choices.

Public health nurses can assist teenagers in appraising their wellbeing status and supply them information and promote the teenagers for initiation and maintenance of health promoting behaviors and follow various health strategies and program for enhancement of health and wellbeing. Health education and information can be given on various aspects such as nutrition, physical participation, sleeping habits; healthy habits, stress management and mental health which are contributing for healthful living will facilitate the nurses to preparation for interventions.

Unhealthy lifestyle pattern among adolescents is one of the leading causes for lifestyle diseases. This study helps the nurses, the near future nurses to improve their knowledge regarding adolescent health, common problems among adolescents, factors influencing adolescent health, common lifestyle diseases, healthy lifestyle pattern among adolescents and ways to improve healthy lifestyle. Nurses take up main role in creating awareness among the children and guide children for healthy lifestyle.

The present study also revealed that with teaching programme can improve knowledge, attitude and skills of school children regarding healthy lifestyle pattern. Nurses can make themselves the part of planned teaching programme and health campaigns which spreads healthy messages on early prevention of lifestyle diseases. Hence, it is important for the nurses to update their knowledge regarding to the current trends. It is important for educators to consider the different phases of development among teenagers to understand the significance of puberty and adolescence. Numerous chronic diseases have their origins in lifestyle which are started in adolescent period. Enhancement of knowledge of teenagers on healthful lifestyle and practices can help them to avoid health risk behaviors.

Integrated training program was developed and used in the study to broaden and refresh information and awareness of teenagers regarding lifestyle patterns. Nurse educators should also train the student nurses with information. Therefore, it helps them for engaging actively in generating awareness among adolescents in schools and communities regarding healthy lifestyle pattern and thereby lifestyle diseases can be prevented.

**Nursing Administration:**

Nurse administrators take part in planning, organizing and conducting in service education. By utilizing the results, they can organize and conduct educational program for nurses in their own institutes with help of audio-visual aids and innovating teaching methods on adolescent health, health promotion and healthy lifestyle pattern among adolescents, so that they can update their knowledge and acquire skill in identifying the lifestyle diseases.

The results of the study add to the standards and quality of services provided by the nurses. Nurse administrators can also include this topic in their curriculum for nursing students. Student welfare programs can be conducted to create awareness on healthy lifestyle pattern and importance of adolescent health. This will improve the knowledge, attitude and practice regarding lifestyle pattern.

Nursing administrators should be facilitating the application of research-based nursing interventions such as integrated training programs, role plays for enhancing the knowledge approach and skills of school adolescents. Nursing administrators should encourage the nursing students to conduct several health educations programs in school and community settings. They must also provide facilities for practicing the research findings. Public awareness programs can be organized and conducted at schools and community level regarding prevention of lifestyle diseases and also about healthy lifestyle pattern. Nursing administrators should encourage the staff nurses to conduct education awareness program on adolescent health and wellbeing.

Nursing staff should be given continuing nursing education and in service education in working settings to update their knowledge and their abilities in recognizing the requirements of teenagers for health promoting behaviors, so that they can plan appropriate strategies. Hence nurse as administrators can influence quality of nursing care in community, school, nursing homes and youth associations in planning adolescent

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