EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING GLOBAL FUND TO FIGHT AGAINST AIDS, TB, MALARIA

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ABSTRACT

A study to assess the effectiveness of structured teaching programme on global fund to fight against AIDS, TB, Malaria among the GNM students at Baba Farid College of Nursing Kotkapura, Faridkot Punjab. The aim was to enhance the knowledge regarding GFATM. The objective were to assess the knowledge among the GNM students regarding GFATM, the second objective is to assess the effectiveness of structured teaching programme on knowledge regarding GFATM among the GNM students and the third objective is to determine the association between posttest knowledge score with their selected socio demographic variables. The sample consists of 50 students. The pretest assessment of knowledge of the students was carried out using structured knowledge questionnaires followed by STP session regarding GFATM. After 7 days the post test was conducted using the same structured knowledge questionnaires. The collected data was analyzed by using descriptive and inferential statistics. Reveals that in pretest 36 students had knowledge regarding GFATM where as in posttest majority students’ knowledge enhance with score 48(96%). There is significant difference between posttest knowledge score among students with selected socio demographic variables that are age, residential area. There is no significant difference in the knowledge score among students of selected demographic variables like in religion, age, education stream, area of living.

Key words: - Structured teaching programme (STP), global fund to fight against AIDS, TB, Malaria (GFATM).

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INTRODUCTION:
The Global Fund created in 2002, to fight AIDS, Tuberculosis & malaria is a public private partnership dedicated to mobilizing and allocating additional resources to combat AIDS, TB and malaria. The Global Fund describes its mission as investing the world’s money to save lives. “A world free from the burden of AIDS, TB and Malaria”. According to National AIDS control Organization of India, the prevalence of AIDS in India in 2015 was 0.26% which is down from 0.41 in 2002. While the National AIDS Control Organization estimated that 2.11 million people live with AIDS in India in 2015. A recent investigator by million death study collaborators in British Medical Journal (2010) estimates the population between 1.4-1.6 million people. And according to National AIDS Control Organization data, India has demonstrated an overall reduction of 57% in estimated annual new HIV infections (among adult population) from 0.274 million in 2000 to 0.116 million in 2011 and estimated no. of people living with HIV was 2.08 million in 2011.

According to the World Health Organization, TB estimated 2.79 million in 2016 in India. The 40% Indian population is infected with TB bacteria. The Government of India revised National Tuberculosis Control Program (RNTCP) in 1997 and which was then expanded across the country.

A study was conducted to assess the awareness of HIV/AIDS among 300 rural peoples in the Bathinda district of Punjab. Objectives of study were to assess the awareness of HIV/AIDS and attitude towards the infection. The study was conducted 10 villages of Bathinda. The present study was conducted on males and females of age groups 18-30 years. Interviews scheduled were prepared and final interviews were conducted after pilot study, 200 males and 100 females were selected randomly for the study. It was found that about 40% of rural peoples were aware about the transmission of AIDS through sexual, blood and only 20% persons knows about the mother to child transmission of HIV/AIDS. 60% populations don’t know about the difference between HIV/AIDS is all? All are saying if they have virus of HIV in body it is AIDS.

A study to examine spread of HIV/AIDS infection in married monogamous women in India. The samples were women attending STD clinics in Pune, India were assessed for STDs and HIV. Demographic and behavioral information was conducted and clinical and laboratory assessment was performed. The main outcome measure is prevalence and risk determinants of HIV infection. 916 women enrolled, 525 were FSWs and 391 were non FSWs. Prevalence of HIV in FSWs and non FSWs were 49.9% and 13.6% respectively. The conclusion is infection with HIV is increasing in non FSWs, previously thought to be at low risk in India.

A study was conducted to assess knowledge, Attitude and Perception about HIV/AIDS among wives of migrant workers of Muzaffarpur district in selected randomly from 34 out of 181 villages using two stage cluster sampling method. A total of 132 wives who reported prier awareness about HIV, were interviewed. Only 16% wives of migrant workers had heard of HIV of whom 72% had correct knowledge such as condom protection from HIV (80%), avoid sharing needle/syringes (91%), single sex partner (75%) and blood test before transfusion (70%). The overall reliability coefficient (Cronbach’s alpha-0.78) of 18 items related to knowledge regarding transmission and prevention of HIV shoed high level of consistency of response. Nearly 85% of the wives perceived themselves and their husbands at very low level of risk of HIV infection. In addition, only 8 women had used condoms during sex with their husbands.

OBJECTIVES
To assess the knowledge among the GNM students regarding GFATM.

MATERIAL AND METHODS
In the present study the experimental research approach from quantitative evaluative research approach is considered appropriate as it aim to assess the effectiveness of planned teaching programme on knowledge regarding GFATM. A pre-experimental research design was adopted. For the presence study the location was at the Baba Farid College of Nursing, Kotkapura, Faridkot Punjab. The independent variable was planned teaching programme and the dependent research variable is knowledge. The data was collected during the month of April May from Baba Farid College of Nursing. The sample consisted of 50 subjects. Purposive sampling technique was used to select sample from population. The tools were conducted in two parts, part one include socio-demographic data such as age, educational stream, area of living and religion. Part 2 include knowledge questionnaire: - Structured knowledge questionnaire scale to assess knowledge of GNM students. Scale consisted
of 30 items. Each item carries one mark. Maximum score is 30 and minimum score is 0 and respondent has to respond on multiple choice questions. The knowledge score refers to total score obtained on knowledge on items in the structured questionnaire by the students.

The data obtained for analyzed on the basis of the objective of the study using descriptive and inferential statistics such as a mean, percentage, standard deviation, chi-square, pie chart etc.

RESULTS

Description of sample characteristics

<table>
<thead>
<tr>
<th>Percentage distribution of demographic characteristics of subjects</th>
<th>N=50</th>
<th>Categories</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td>18-20 years</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>21-23 years</td>
<td>49</td>
<td>98%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>24-26 years</td>
<td>1</td>
<td>2%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>More than 26</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Religion</td>
<td></td>
<td>Hindu</td>
<td>3</td>
<td>6%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Sikh</td>
<td>47</td>
<td>94%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Christian</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Muslim</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Area of living</td>
<td></td>
<td>Urban</td>
<td>23</td>
<td>46%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Rural</td>
<td>27</td>
<td>54%</td>
</tr>
<tr>
<td>Educational stream</td>
<td></td>
<td>Medical</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Non-medical</td>
<td>3</td>
<td>6%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Arts</td>
<td>47</td>
<td>94%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Others</td>
<td>0</td>
<td>0%</td>
</tr>
</tbody>
</table>

The finding revealed that according to age group 18-20 years (0%), 21-23 years (98%), 24-26 years (2%), more than 26 years (0%). As per religion Hindu (6%), Sikh (94%), Christian (0%), Muslim (0%). According to Area of living Urban (46%), Rural (54%). According to education stream Medical (0%), Non-medical (6%), Arts (94%), others (0%).

Description of Mean, Standard deviation with T value of pre-test and post-test

<table>
<thead>
<tr>
<th>N=50</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Pair 1</td>
<td></td>
</tr>
<tr>
<td>Pre</td>
<td>22.34</td>
</tr>
<tr>
<td>Post</td>
<td>27.60</td>
</tr>
</tbody>
</table>

Table: Shows that GNM nursing 3rd year students of pretest had mean knowledge score 22.34 with SD 1.661 and posttest had mean knowledge score 27.60 with SD 1.385. T value is -25.827 and p value .000. It shows the effectiveness of ST
Figure. 1: Shows that pretest mean knowledge score 22.34 with SD 1.661 and Posttest mean knowledge score 27.60 with SD 1.385, which shows effectiveness of the STP.

DISCUSSION

I. Knowledge of nursing students regarding AIDS, TB, Malaria:
The first objective of the study was to assess the knowledge of nursing students regarding AIDS, TB, Malaria in selected nursing college of Baba Farid college of nursing, Kotkapura, Faridkot, Punjab. In the present study the findings of the study reveals that maximum students’ knowledge was average.

II. Evaluate effectiveness of structured programme regarding AIDS, TB, Malaria:
The second objective of the study was to evaluate effectiveness of structured teaching programme regarding AIDS, TB, Malaria in selected Baba Farid College of nursing, Kotkapura, Faridkot, Punjab.

III. Association between knowledge score with selected socio-demographic variables.
The third objective of the study is found out association between knowledge score with selected socio-demographic variable regarding AIDS, TB, Malaria. The demographic variable analyzed in the study were age, religion, residential area, educational status. Analysis result that there was no significance association between knowledge scores with selected socio-demographic variable like religion, residential area, and educational status.

CONCLUSION
The study conducted that knowledge is more common in the subject of age group 21 year and 28 constitute good knowledge while 0 with average knowledge, subject of age group 20 year. With average knowledge and 2 have very good knowledge about AIDS, TB, Malaria.

RECOMMENDATIONS
1. The similar study can be conducted by selecting other variables.
2. The same study can also be conducted to check awareness among nursing personnel’s regarding AIDS, TB, Malaria.
3. The similar study can be also be conducted to compare the knowledge scores of nursing and medical students and medical personnel’s.

LIMITATIONS:

a) This study was limited to only Baba Farid College of nursing, Kotkapura, Faridkot, Punjab, and only limited to college students.

b) The study was conducted only on those subjects who were available at the time of visit.

c) Sample was limited to only 50 subjects.
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