A Study To Assess The Effectiveness of Structured Teaching Programme on Knowledge Regarding The Good Touch And Bad Touch Among The Primary School Children In Selected School At Tiruvannamalai

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Abstract- *A descriptive study was conducted to assess the knowledge on Good Touch And Bad Touch Among The Primary School Children In Selected School At Tiruvannamalai. A total of 30 subjects who meets the inclusion criteria were selected by one group pre-test and post – test design , which comes under the pre experimental design. As the study fulfills the criteria such manipulation simple random sampling technique were rightly choose this design. The demographic variables and knowledge questionnaire were collected from the group. The conceptual framework used for this study was callista roy's adaptation theory.* ***Result:*** *The analysis on pre-test level of knowledge in this group revealed that 18 (60%) of children had inadequate knowledge and 12(40%) of children had moderate knowledge. The analysis on post-test level of knowledge in this group revealed that 13 (45%) of children had moderate knowledge and 17(55%) of children had adequate knowledge.* ***Conclusion:*** *study findings concluded that there was statistically significant difference in the level of knowledge after implementing structured teaching programme and this provide to be an effective teaching method to improve the knowledge among primary school children.*

I. INTRODUCTION

Children are the gift which has much potential with one will the best resource for the nation. If it is been developed and utilized well children below 5 years of age group are known as the under five.

National child abuse statistics 2010, a report of child abuse is made every 10 seconds, almost 5 children die every day , as a result of child abuse more than 3 out of 4 are under the age of 4.

Worldwide, around 15 million adolescent girls aged 15 – 19 have experienced forced sex in their life time. Boys are also at risk, although a global estimate is less available. Every 15 minutes a child is sexually abused in India, according to the National crime records.

It is estimated that between 60 – 85% of child fatalities due to maltreatment are not recorded as such on death certificate 90 % of child sexual abuse victims know the perpetrator in some way 68 % are abused by family members. Child abuse occurs at every socio economic level, across ethnic and cultural lines, within all religion and at all level of education.

National, state and country level in the united states that provide community leadership in preventing child abuse and neglected. National alliance of children trust found and prevent child abuse America are two national organization.=

Many investigation into child abuse are handled on the local level by child advocacy at the centers started over 24 years ago at what is known as the national children advocacy center in Huntsville, Alabama by district attorney robber bud Cramer these multidisciplinary teams have met to coordinate their efforts so that cases of child abuse can be investigate.

Scholes, et.al., (2012) A study was conducted to assess the effectiveness of STP on knowledge regarding the GTBT and reported that educators are also lacking in professional development around the prevention and intervention strategies for child abuse. This makes it difficult for them to design program to teach children about this and also

contribute to hesitancy around protocols for reporting abuse. Due to the highly complex nature of child abuse and its inheritance social quality, it needs to be approached from multiple levels of society to ensure success in prevention and intervention strategies for child abuse.

II. NEED FOR THE STUDY

Good touch and Bad touch and why prevention of child maltreatment is important because it can be avoided because abuse and neglect can lead to negative consequences such as depression, developmental delay and risk of developing substance abuse during adulthood. With respect to human services, prevention typically consists of methods or activities that seek to reduce or determine specific or predictable problems, protect the current state of well being or promote desired outcome or behavior.

National Commission for Child Rights Protective **[NCPCR]** under the ministry of women and child development, Shows that complaints and child abuse have shoot up from 234 in 2009. 10 to 509 cases in 2012 -13.

An epidemiological study estimates that 27% of the female and 16% male experience at least one episode of sexual abuse during their childhood. A non-government organization Samara, Karnataka surveyed girls between the 13 to 17 years from 11 school and found most of the sexual crime were in the age group occur in 13 to 15 age group.

In 2007 report on child abuse in India by the Ministry of Women and Child Welfare, 52 % - 60 % Another report published in 2017, researchers found that ways are simply expected to outgrow the experiences of sexual abuse due to their superior gender. The foundation teachers should enhance the children to tell the difference between safe or unsafe touch, that is considered sexual abuse and what they should do in case they find themselves in such a situation .

The Protection of Children Against Sexual Offences Act (2012) and Prevention Act have been given more The last year has seen an increased number of cases filed due to awareness about legal resources, translating to an increase in a number of convictions 2016 is the first year that national crime records has spoken on the relationship of victim and occurred in rape case with the demonstrated high volume of work place sexual abuse the data is a proof of the unsafe nature of child labor of any kind.

Uttar Pradesh led the highest number of child abuse cases (3,078), followed by Madhya Pradesh (1,687) cases , Tamil Nadu (1,544) cases, Karnataka (1,480) cases and Gujarat (1,416) cases.

(**SANTHAM LILLYPET 2017**) A Quasi-experiment study was conducted to determine the effectiveness of structured teaching programme on knowledge regarding good touch and bad touch (GTBT). 60 school children were selected by non-probability convenient sampling technique. Pre-test and Post-test level of knowledge was assessed using CKAQ-Revision III2. The findings revealed that the 't' test was 12.034 at d=58 at P=0.05 level, which shown a significant difference in the knowledge after the structured teaching programme among school children.

There is a need for more research that focus on awareness about good touch and bad touch and prevention of child abuse. The need for this study is to understand the primary school children's knowledge of good touch and bad touch and how they aware about the child abuse and associated psychological problems and disorders.
Hence the researcher felt that the need to assess the knowledge of primary school children regarding good touch and bad touch in selected school of Tiruvannamalai.

Statement of the Problem

A Study to Assess the Effectiveness of Structured Teaching Programme on Knowledge regarding the Good touch and Bad touch among the Primary School Children in Selected School at Tiruvannamalai.

Objectives

The objectives of study are:

1. To assess the pre and post test level of knowledge regarding good touch and bad touch among primary school children.
2. To compare the pre test and post test level of knowledge regarding good touch and bad touch among primary school children.
3. To associate the post test level of knowledge among primary school children with their selected demographic variables.

Hypotheses

NH$_1$: There is no statistically significant difference in the pre and post test level of knowledge among primary school children at p<0.001 level.

NH$_2$: There is no statistically significant association in the post test level of knowledge among primary school children with their selected demographic variables at p<0.05 level.

Assumptions

1. The primary school children may have inadequate knowledge about good touch and bad touch.
2. Structured teaching programme may enhance the knowledge regarding good touch bad touch among the primary school children.

Delimitations

1. Study is conducted in selected setting only.
2. Study is delimited to a period of two week. **4**

III. RESEARCH VARIABLES

Independent variable: Structured teaching programme.

Dependent variables: Knowledge regarding good touch and bad touch.

POPULATION

Target population: The target populations for the study include both male and female of primary school children, who are studying at Government Town Hall School, Tiruvannamalai.

Accessible population: The accessible population for the study include primary school children between 6-12 years of age in Government Town Hall School at Tiruvannamalai.

SAMPLE : Study sample comprised of primary School children who were studying in town hall Government School at Tiruvannamalai, who fulfilled the sample selection criteria.

SAMPLE SIZE: 30 primary school children (one pre and post test group)

SAMPLING TECHNIQUE: Simple Random Sampling technique.

IV. METHODOLOGY

The research approach used in this study was Quantitative research approach. The Research design is the researcher overall plan for obtaining answers to the research hypothesis. The Research design adopted for this study is one group pre-test and post – test design , which comes under the pre experimental design. As the study fulfills the criteria such manipulation simple random sampling technique were rightly choose this design. In this study the pre-test level of knowledge among primary school children was assessed by using structured questionnaire containing 20 items followed by structured teaching programme module for 45 minutes for 6 day. At the end of 14th day the post test level of knowledge was obtained from the primary school children by using structured questionnaire method.

DESCRIPTION OF TOOLS:

Section A: Demographic Variables

The demographic variables comprised of Age in children, Gender, Educational status, Social status of children, Social class of children, Religion of children , Type of family, Father's Occupation, Mother's Occupation, History of abuse and Area of residency.

Section B: ASSESSMENT TOOL

These sections consist of structured questionnaire to assess the good touch and bad touch. Structured questionnaire consist of 20 multiple choice questions in a 2 component that include Good touch and bad touch. Participants were asked to select the answer from options.

Intervention Tool

1. Health education
2. Booklet

SCORING PROCEDURE

The correct answer was given `1' mark and wrong answer was given `0' mark. The raw score was converted into percentage to interpret the level of knowledge.

SCORE INTERPRETATION

The instrument consists of 20 questions regarding Good touch and Bad touch. The maximum score was '20' and minimum score was '0'. Based on the scoring percentage of knowledge was

Level of knowledge was categorized as

S.NO	LEVEL OF KNOWLEDGE	SCORE
1	Inadequate knowledge	< 50%
2	Moderate knowledge	51-75%
3	Adequate knowledge	>75%

Data collection procedure

A formal permission was obtained from the principal, Vignesh Nursing College. The investigator selected 30 children who fulfilled the sample selection criteria by using simple random sampling technique. The data collection for the study was conducted within the period of two weeks. The investigator gave brief introduction about self and the purpose of study to the primary school children. After obtaining their verbal consent for willingness to participate in the study. The children were made to sit comfortably in a well ventilated room and confidentiality regarding the data was assumed. Among 30 children were allotted for only one group. After the selection of children pretest were conducted one group for 15 - 30 minutes using structured questionnaire prepared by the investigator.

In this group, Health education and booklet on good touch and bad touch were distributed. The doubts of the children were clarified after 14 days, post test was conducted by using the same structured questionnaire for 15-30 minutes in only primary school children.

V. DATA ANALYSIS & INTERPRETATION

SECTION I

In this group with regard to the age of children, majority of the subjects1 6(53.4%) were between the age group of 6 to 8 yrs, and 7(23.3%) 9 to 10 yrs and 7(23.3%) were 11 to 12yrs of age group. In this group with regard to gender of children, majority of subject 12(40%) were male and 18(60%) were female. In this group with regard to educational status , majority of subjects15 (50%) were 4th std to 5th std and 7(23.4%) were 5th std to 6th std 8(26.6%) were 6th to 7th std. In this group with regard to social class majority of subjects

18(45%) were middle class and 10(33.4%) were lower class, 2(6.66%) were higher class. In this group with regard religion majority of subjects 15(50%) were Hindu 9(30%) were Muslim and 6(20%) were Christian. In this group with regard to types of family majority of subjects 20(66.6%) were nuclear family, 10(33.4%) were joint family. In this group with regard to father's occupation, majority of subjects 18(60%) were laborer, 7(23.4%) were business/self employment and 5(16.6%) were private job /government job. In this group with regard to mother's occupation, majority of subject 20(66.8%) were homemaker,5(16.6%) were private job/government job, and 5(16.6%) were business/self employment. In this group with regard to history of abuse majority of subject 30(100%) were no abuse of substance. In this group with regard to area of residency, majority subject 20(66.6%) were own house and 10(33.4%) were on rent.

ASSESSMENT OF PRE AND POST TEST LEVEL OF KNOWLEDGE REGARDING GOOD TOUCH AND BAD TOUCH AMONG PRIMARY SCHOOL CHILDREN.

n =30
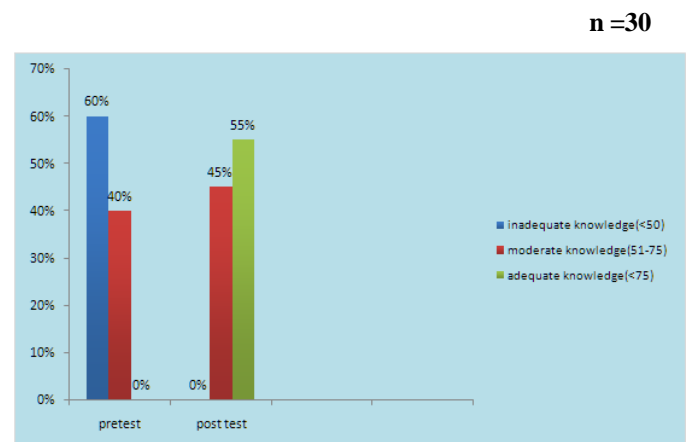
The above figure shows the output response of MARC. It meets the desired set point quickly without overshoot. The output responses clearly show Model Reference Adaptive controller is the best controller it reach the set point quickly without overshoot then all other controllers.

COMPARISON OF THE PRE AND POST TEST LEVEL OF KNOWLEDGE REGARDING GOOD TOUCH AND BAD TOUCH AMONG PRIMARY SCHOOL CHILDREN.

Table 3: Comparison of pre and post test level of knowledge regarding good touch and bad touch among primary school children.

n = 30

S.NO	GROUP	ASSESSMENT	MEAN	SD	Paired 't' test
1	One group	PRE TEST	9.6	2.037	't'=6.3840 p<0.001 level S***
		POST TEST	15.35	5.1932	

*p<0.05, **p<0.01, ***p<0.001, S-Significant, NS – Non significant

It Shows that in this group the pre test mean score level of knowledge was 9.6 with SD 2.37 and post test mean score level of knowledge was 15.35 with SD 5.1932. The calculated paired value 't'=6.3840 was found to be statistically at p<0.001 level. This clearly shows that the implementation of structured teaching program had shown a significant improvement in the post test level of knowledge among primary school children.

The second objectives was to compare the pre and post level of knowledge regarding good touch and bad touch among primary school children.

Thi study findings revealed that the calculated paired t' test value= 6.3840 was found statistically at p<0.001. This clearly shows that implementation of STP module had enhanced the knowledge level among primary school children.

In this group pre-test mean score was 9.6 with SD 2.037 and post-test mean score was 15.35 with SD 5.1932. This study findings consisted with the study conducted by **NELSON AL et.al, (2002)** to assess the effectiveness of structured teaching programme on knowledge regarding GTBT among 40 school going children in selected setting using the convenient sampling technique. This study findings shows that 25% had moderate awareness on GTBT and 15 % had adequate awareness about good touch and bad touch.

Hence, the Null Hypothesis NH_1 which was stated early that **"There is no statistically significant difference in the pre and post test level of knowledge among primary school children at p<0.05 level."was rejected**.

VI. CONCLUSION

This study findings concluded that there was statistically significant difference in the level of knowledge after implementing structured teaching programme and this provide to be an effective teaching method to improve the knowledge among primary school children.

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