

# **Effectiveness of Structured Teaching Programme on Knowledge Regarding Anorexia Nervosa Among Adolescents Girls In Selected school of Udaipur, Rajasthan**

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## **ABSTRACT**

**INTRODUCTION-** Anorexia nervosa is a serious eating disorder predominantly affecting adolescents girls. The incidence among young girls aged 15-19 has been recorded as high. Adolescence is a time in which the body is particularly vulnerable to the effects of malnutrition and starvation, with even a short episode of resulting in stunting of growth, infertility, osteoporosis. The aim of study was to determine the effectiveness of planned teaching programme on knowledge regarding anorexia nervosa.

**METHODS-** Pre-experimental one group pretest-posttest research design and purposive sampling technique was adopted to achieve the goal of study. The tool consists of two parts; demographic variables and structured knowledge questionnaire. Total 50 adolescent girls were included in study

**RESULTS-** The collected data was calculated and analysed using descriptive and inferential statistics. In the pre-test mean score was  $14.22 \pm 4.041$  and post test mean score was  $22.24 \pm 4.769$ . The posttest knowledge mean score is significantly greater than pre test knowledge mean score.

**CONCLUSION-** The planned teaching programme through flash cards, charts and roller board etc found to be very effective in improving the knowledge among adolescents girls on anorexia nervosa

**Key words: - PTP, adolescents girls, anorexia nervosa**

## **INTRODUCTION :**

Eating disorders are serious and fatal illnesses that cause severe disturbances to a person eating behaviors. Common eating disorders include binge eating disorders, bulimia nervosa and less common but very serious anorexia nervosa.<sup>1</sup>

Anorexia Nervosa is an eating disorder characterized by significant and persistent weight loss, difficulties maintaining an appropriate body weight for height, age and stature. People with anorexia are very anxious about their weight and keep it as low as possible by strictly controlling and limiting what they eat. Person actually an attempt to deal with perfectionism and desire to control things by strictly regulating food and weight.<sup>2</sup>

Data from National Comorbidity Survey Replication[NCS-R] shows that median age of onset was 18 years old for anorexia nervosa.<sup>1</sup>

Lifetime prevalence of anorexia nervosa in adults was .6%. and three times higher among females(.9%) than males(.3%).<sup>1</sup>

Department of health and Human Services, pointed that Cultural beauty ideals, relatives or friends who exhibit the behavior, trauma, stress, depression, psychiatric issues, personal genetic, hormonal issues are etiology of anorexia nervosa. National Institute of Mental health enlisted that patient have dry and brittle hair, nails, skin, thinning of hair, osteoporosis, Digestive problems, anemia, hypotension.

Treatment of anorexia nervosa include reintroduction of proper nutrition, cognitive behavioral therapy, family counseling, social support mechanisms, tool for coping with them All eating disorders had the highest comorbidity with any anxiety disorder. Based on the literature and investigator experiences the investigator feels that it is important to create awareness among adolescence girls regarding anorexia nervosa. So the knowledge of the adolescence girls may be applied in early medical validation. Hence the investigator planned to assess the knowledge on anorexia nervosa among adolescence girls studying in school at Udaipur city.

## **METHODS**

A pre experimental one group pre test post test research design is used. Study is conducted in selected schools of Udaipur district, Rajasthan. This study consists of 50 adolescents girls studying in schools of Udaipur. Purposive sampling technique was used to select the sample. Data were collected by interview using a data sheet for recording personal variables details of

students regarding their age, religion, educational status of mother and father, educational status of mother and father, place of residence, tpe of family, dietary habits, monthly income of family and weight in kilogram. Knowledge was assessed by a structured questionnaire on anorexia nervosa. One mark will be given for each correct answer and zero for each incorrect or the unanswered item. Scores of knowledge are categorized into three levels: Inadequate, Moderate and Adequate knowledge. Out of a total score of 20, a score of 10 or below is considered as a Inadequate knowledge, 11 to 20 is considered as moderate knowledge, and 21 or greater is considered as Adequate knowledge. Data were analyzed using SPSS 21 version descriptive statistics and inferential statistic were employed. The plan of data analysis was developed as frequency and percentage, mean, standard deviation, chi-square test and paired 't' test was used to evaluate the effectiveness of structured teaching programme on anorexia nervosa.

## RESULTS

Data analysis in order to determine the effectiveness of structured teaching programme regarding the knowledge on anorexia nervosa among adolescent girls of schools..

**Table-1 Frequency and percentage distribution of samples on rural demographic variable**

N = 50

S.No	Demographic Variables	Frequency	Percentage (%)
<b>1</b>	<b>Age (In years)</b>		
	A. 13-14	20	40%
	B. 15-16	20	40%
	C. 17-18	10	20%
<b>2</b>	<b>Religion</b>		
	A. Hindu	31	62%
	B. Muslim	08	16%
	C. Christian	06	12%
	D. Others	05	10%
<b>3</b>	<b>Class of Study</b>		
	A. 9 <sup>th</sup> standard	20	40%
	B. 10 <sup>th</sup> standard	10	20%

	C. 11 <sup>th</sup> standard	10	20%
	D. 12 <sup>th</sup> standard	10	20%
<b>3</b>	<b>Family Income</b>		
	A. Below 5,000	12	24%
	B. 5,001 – 10,000	09	18%
	C. 10,001 – 15,000	08	16%
	D. Above 15,000	21	42%
<b>4</b>	<b>Type of family</b>		
	A. Nuclear	30	60%
	B. Joint	17	34%
<b>5</b>	<b>Educational status of mother</b>		
	A. Illiterate	00	00%
	B. Primary	03	06%
	C. Secondary	15	30%
	D. Graduate	32	64%
<b>6</b>	<b>Educational status of Father</b>		
	A. Illiterate	00	00%
	B. Primary	05	06%
	C. Secondary	15	30%
	D. Graduate	30	60%
<b>7</b>	<b>Dieatry habits</b>		
	A. Fruits and vegetables	11	22%
	B. Junk Foods	12	24%
	C. Homemade foods	27	54%
<b>8</b>	<b>Weight in Kilograms</b>		
	A. 21-30	04	08%
	B. 31-40	12	24%
	C. 41-50	27	54%
	D. 51-60	07	14%

The data presented in the Table 1 shows, the number of sample was 40% in the age group of 13-14 years, majority of were in the age group of 15-16 years and 20% were in the age group of 17-18 years. Regarding the Dieatry habits, majority of were are consumed homemade foods, 24% were having Junk foods and only 22% are consuming fruits and vegetables.

**Table – 2 Distribution of samples according to the pre and post test knowledge scores of anorexia nervosa among adolescents girls**

Level of knowledge	Post test		Pretest	
	Frequency	Percentage (%)	Frequency	Percentage (%)
<b>Adequate Knowledge (15-20)</b>	5	10%	35	70%
<b>Moderate knowledge (08-14)</b>	30	60%	15	30%
<b>Inadequate knowledge (0-7)</b>	15	30%	00	00%

The data in the table 2 shows that the pre test knowledge score of girls revealed that 30% girls had inadequate knowledge, and 60% girls had moderately adequate knowledge about anorexia nervosa After structured teaching programme, the posttest knowledge scores of parents shows that 70% girls had adequate knowledge, 30% girls had moderately adequate knowledge and none of them have Inadequate knowledge.

**Table 3. Mean and standard deviation of pre and post test knowledge score of the parents.**

Knowledge score	MEAN	Mean difference	SD	't' TEST
Pre test	14.22	8.02	4.041	9.082*
Post test	22.24		4.769	

P=0.05 Significant levels

The data in the table 3 shows that the mean post test knowledge score of the adolescent girls regarding anorexia nervosa are significantly higher than their mean pre test knowledge scores.

In order to find out the significant difference between the mean score of pre and post test knowledge score of the adolescent girls regarding anorexia nervosa, paired 't' test was computed. The calculated value is higher than the table value. Hence the researcher concluded that gain in knowledge by structured teaching programme on anorexia nervosa,.

## **DISCUSSION**

In this study, the pre test knowledge score of adolescent girls revealed that 30% girls had inadequate knowledge, and 60% girls had moderately adequate knowledge about anorexia nervosa. After structured teaching programme, the posttest knowledge scores of parents shows that 70% girls had adequate knowledge, 30% girls had moderately adequate knowledge and none of them have Inadequate knowledge. The present study is supported by the findings of a similar descriptive survey shows that a majority of subjects 56.67% had average knowledge, subjects, 38.33% had poor knowledge and 5% had good knowledge among students.<sup>3</sup> Another study conducted by Datta Panchali shows that 8% subjects had adequate knowledge and 86% had moderately adequate knowledge.<sup>4</sup>

Another study conducted by Anitha Flarence shows that Majority 80 (80%) of adolescent girls had inadequate knowledge regarding anorexia nervosa, and 20 (20%) of adolescent girls had moderate level of knowledge about anorexia and no one had adequate knowledge about anorexia nervosa in the pretest. Majority 96 (96%) of adolescent girls had adequate knowledge about anorexia nervosa, 4 (4%) of them had 4 (4%) moderate level of knowledge about anorexia nervosa, and none of them are had inadequate knowledge regarding anorexia nervosa in the posttest.<sup>5</sup>

## **CONCLUSION**

The study findings provide the statistical evidence which clearly indicate that Structured Teaching Programme has significant effect on the level of knowledge in adolescent girls. The study recommended that adolescent girls need to improve their knowledge regarding anorexia nervosa to preventing disease.

## ACKNOWLEDGEMENTS

Authors would like to thank the participants for their continuous support with interest for the study.

**Funding:** No funding sources

**Conflict of interest:** None declared

**Ethical approval:** The study was approved by the Institutional Ethics Committee

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