CHAPTER-V

Discussion

This chapter presents the discussion of the study findings.

The findings of the study have been discussed with reference to the objectives and hypotheses stated and with findings of other studies under the following section:

Section 1: Findings related to socio-demographic variables.

Section 2: Findings related assessment of knowledge, attitude and behaviour.

Section 3: Findings related to effectiveness of structured teaching programme on knowledge, attitude and behaviour.

Section 4: Findings related to correlation between knowledge, attitude and behaviour.

Section 5: Findings related to association between pre-test level of knowledge, attitude and behaviour with selected socio-demographic variables.

1. Findings related to socio-demographic variables

- **Gender**-Majority of the respondents are females i.e. 52.3 % and 58.7 % in control group and experimental group respectively.
• **Age**-Majority of the respondents i.e. 55.3% of control group and 59.7% of experimental group were in the age group of 17 years.

• **Ordinal position**-Majority of the respondents are first child in the family i.e. 63.7% in control group and 60.7% in experimental group.

• **Number of siblings**-Majority of the respondents i.e. 47.0% in control group and 43.3% in experimental group have reported of having only one sibling.

• **Course of study**-Majority of the respondents i.e. 58.7% and 60.3% both in control group and experimental group belong to science group.

• **Type of family**-Majority of the respondents are from nuclear family i.e. 81.0% in control group and 80.3% in experimental group.

• **Family size**-Majority of the respondents in control group i.e. 42.3% belong to family size of 3-4 members and majority of them in experimental group i.e. 41.3% belong to family size of 5-6 members.

• **Place of residence**- From both the control group and experimental group majority of the respondents i.e. 59.7% and 54.7% are from rural area.
• **Family income/month**- Majority of the respondent’s family income exists above Rs.6000 i.e. 40.3% in control group and 40.0% in experimental group.

• **Educational level of parents**- Majority of the parents respondents from both the groups that is 34.0 % and 37.3 % of mothers in control group and experimental group and 31.3 % and 26.3 % of fathers in control group and experimental group have studied up to high school respectively.

• **Occupational status of parents**- Majority of the mothers of the respondents were housewives in both the group i.e. 87.4 % in control group and 81.0 % in experimental group. Majority of the respondent’s father were Agriculturists i.e. 40.4 % in control group and 33.0 % in experimental group.

• **Leisure time activities**- Majority of respondents i.e. 79.7 % from control group and 80.3% of respondents from experimental group were engaged in watching T.V. followed by 68.3% from control group and 69.6% from experimental group were involved in sports activities. Only 34.0% and 31.3 % from control group and experimental group respectively used to engage in other activities.

• **Reading habits**- Majority of the respondents i.e. 80.0% from control group and 82.3% from the experimental group had the habit of reading general books followed by 87.7% from control group and 86.% from experimental group were reading story books where as only 20.3% from control group and 10.0% from experimental group were reading articles related to sex.
• **Previous history of illness**—Majority of the respondents i.e. 97.7% from control group and equal number i.e. 97.7% from experimental group did not have any past history of illness.

• **Pocket money/month**—Majority of the respondents i.e. 49.3% from control group and 67.3% from experimental group receive the pocket money ranging between Rs. 50/month and above.

• **Personal habits**—It is found that majority of the respondents did not have any personal habits like drinking, smoking or pawn chewing etc i.e. 87.7% and 97.0% from control group and experimental group respectively.

2. **Findings related to assessment of knowledge, attitude and behaviour.**

In this study, it was observed from the findings that the pre-test 14.42 and post-test 16.27 knowledge mean scores with difference of 1.85. And with regard to attitude mean score, it was observed that in pre-test 78.4 and post-test 80.1 the with difference of 1.7 attitude mean score where as in connection with behaviour score it was found that in pre-test 7.56 and post-test 8.67 with difference of 1.11 behaviour score in control group. The difference between pre-test and post-test knowledge, attitude and behaviour scores of control group is very minimal as there was no intervention.

In experimental group, the pre-test knowledge mean score was found to be 16.32 and post-test 28.55 with the difference of 12.23. With regard to attitude mean score, it was observed that in pre-test 79.8 and post-test 105.0 with the difference of 25.2. In
connection with behaviour mean score, it was found that in pre-test 8.34 and post-test 15.82 with difference of 7.48. The considerable difference between pre-test and post-test knowledge, attitude and behaviour score was found as a result of structured teaching programme.

This is supported by the study conducted by Huang (2005) to assess the knowledge, attitude perceptions and to identify personal risk behaviours among under graduate students. The results indicated that 14% students are sexually active and risk behaviours tended to increase the HIV/AIDS. Further 24% of students considered themselves to be at moderate to high risk of contracting HIV and 40% of sexually active students never used condoms. The study concluded the importance of designing the HIV preventive strategies for students.

The study is also supported by Al-mazrou et al (2005) who assessed the knowledge and attitude of paramedical students in Saudi Arabia towards HIV/AIDS. It was reported that there was lack of knowledge regarding HIV/AIDS. Recommends for a nationwide health education campaign on HIV/AIDS.

3. **Findings related to effectiveness of structured teaching programme on knowledge attitude and behaviour.**

In the present study it is interesting to note that the enhancement in the knowledge mean score was found to be 12.23 between pre-test and post-test of experimental group. The ‘t’ value was computed and found to be statistically significant i.e. (t=37.13** at p<0.01).
It is interesting to note that, the attitude mean score found to be 25.2 between pre-test and post-test of experimental group. The 't' value was computed and found to be statistically significant i.e. \( t=51.35^{**} \) at \( p<0.01 \) indicating that structured teaching programme was effective.

From the findings it is also noticed that the behaviour mean score found to be 7.48 between pre-test and post-test of experimental group. The 't' value was computed and found to be statistically significant i.e. \( t=40.49^{**} \) at \( p<0.01 \) indicating that structured teaching programme was effective.

The findings of the study is supported by Arun Jyothi Baruach and Dr. Pradip Sharma (2004) where the mean post-test knowledge score was found to be significantly higher than their pre-test knowledge score \( t (59)=15.92 \). indicating that the planned teaching programme is effective in increasing the knowledge of the participants.

The study also supported by Mulligon Sexrawan (2005) who assess the effect of an HIV planned education on the knowledge, attitude and behaviour of nursing professionals. The study reports that overall, the planned education was successful in increasing and promoting the HIV/AIDS related knowledge and attitudes/beliefs of the participants.

The findings of the study reveals that the respondents from experimental group had secured higher knowledge mean score in management and prevention. 5.63 and 10.9 followed by introduction of HIV/AIDS 4.22 and 6.23 and the least knowledge
mean score is found in caruitive organism i.e. 0.38 and 0.99 in pre-test and post-test knowledge mean score respectively.

The computed ‘t’ value reveals that the enhancement of the dimension wise knowledge mean score is found to be statistically significant at 1% level.

This is supported by the study conducted by Terry P.E. et al (2006) where the researchers concluded that progress in some areas does not assure progress in all areas.

The findings is also supported by the study conducted Al-Muzrou (2005) that there was lack of knowledge mainly in the area of HIV/AIDS transmission.

The data reveals that there is significant change in level of knowledge is noticed in post-test of experimental group by almost all respondents i.e. 99.3% had adequate knowledge showing the effectiveness of structured teaching programme.

This is supported by the study conducted by Tavoori and et al (2004) where the study reports that the knowledge level of students were moderately high.

The findings of the study shows that in experimental group 95.7% of respondents fall in favourable level of attitude in post-test when compared to 51.3% in pre-test. With regard to level of behaviour, majority of the respondents i.e. 97.3% fall in the category of non-risk prone behaviour (>75%) and no one in the risk prone behaviour (<50%) category. As compared to the pre-test
where 52.0% fall under risk prone behaviour [<50%], 41.0% falling under moderately risk prone behaviour (51-75%) and very few have 7.0% falling under non-risk prone behaviour (>75%).

No related studies are available for comparison of these findings.

The findings reveals that the enhancement of knowledge mean score is 1.57, the attitude mean score is 3.3 and the behaviour mean score is 0.37 in post-test and post post-test of experimental group.

The ‘t’ value was computed and found to be statistically significant with regard to knowledge (t=11.06 p<0.01), attitude (t=8.81 p<0.01) and behaviour (t=5.73 p<0.01). In post post-test in post-post test there is decline in knowledge score whereas with regards attitude and behaviour there is minimal enhancement indicating that the structured teaching programme is effective and there is a need for repeated re-inforemant

No related studies are available for comparison of these findings.

4. **Findings related to correlation between knowledge, attitude and behaviour.**

The findings of the study revealed that, co-efficient of correlation computed between pre-test and post-test of experimental group with regard to knowledge, attitude and behaviour scores r (0.01, 298)= 0.149 was found to be positive
and statistically significant between knowledge and attitude, knowledge and behaviour and non-significant in behaviour and attitude where as in control group the relationship between knowledge, attitude and behavioural aspects was found to be positive and significant in both pre-test and post-test.

This is contradicted by the study conducted by Ogbuui (2005) where there is no correlation between knowledge and behaviour. And also the study conducted by Tavoori et al (2004) states that there is no correlation between knowledge and attitude. But the study is supported by Deshmukh et al (1998) where there is positive correlation between knowledge and attitude. Further, the study conducted by Sheikh F.D. et al (2007) also reports that there exists a correlation between knowledge and attitude.

The findings reveals that Coefficient of correlation computed between post-test and post post-test of experimental group with regard to knowledge, attitude and behaviour score r(0.01, 58)=0.149 was found to be positive and it is significant between knowledge and attitude, knowledge and behaviour where as non-significant between behaviour and attitude in between post-test and post post-test.

No related studies are available for comparison of these findings.

5. Findings related to association of knowledge, attitude and behaviour with selected socio-demographic variables.
There was significant association found at 0.01 level between pre-test level of knowledge score of pre-university students and their selected socio-demographic variables i.e. course of study, gender, age, family size and at 0.05 level, it was found to be significant with regard, to number of siblings, type of family and area of residence. Hence it can be interpreted that the pre-test knowledge score of pre-university students regarding AIDS and its prevention is dependent on course of study, gender, age, number of siblings, type of family, family size and area of residence.

There is no significant association found at 0.05 level between pre-test level of knowledge score of pre-university students with regard to ordinal position. Hence it can be inferred that, the pre-test level of knowledge score of pre-university students on AIDS its prevention is independent of ordinal position.

There was significant association found at 0.01 level between pre-test level of attitude score and course of study and number of siblings. And at 0.05 level it was found to be significant with regard to gender. Hence it can be interpreted that the pre-test knowledge score of pre-university students regarding AIDS its prevention is dependent on course of study, number of siblings and gender.

There was no significant association found at 0.05 level between pre-test level of attitude score and selected socio-demographic variables i.e. age, ordinal position, type of family,
family size, area of residence. Hence it can be inferred that pre-test attitude level of pre-university students on AIDS and its prevention is independent of age, ordinal position, type of family, family size and area of residence.

There was a significant association found at 0.01 level between pre-test level of behaviour score of pre-university students and their selected socio-demographic variables i.e. course of study, age, number of siblings, type of family, family size and gender. Hence it can be inferred that pre-test behaviour level of pre-university students on AIDS and its prevention depend on course of study, age, number of siblings, type of family, family size and gender.

There was no significant association found at 0.05 level between pre-test level of behaviour score of pre-university students with regard to ordinal position and area of residence. Hence it can be interpreted that the pre-test level of behaviour score of pre-university students on AIDS and its prevention is independent of ordinal position and area of residence.

No studies are available for comparison of the study findings.

This chapter has dealt with the discussion of results with reference to the objectives and hypotheses stated and with findings of other studies.