Chapter VI

SUMMARY AND CONCLUSION

The ongoing and a constant question is why there is a constant vigilance and concentration on the adolescents and especially on the adolescent girls and their related behaviours. The values expected by the traditional parents, demands from the society, pressure from the peers, limited and narrowed opportunities for the girls and her own self-defiance (efficiency) to overcome problems and the belief entrusted over the girl child leads more stress in the adolescent girls. So it is necessary to provide an experience that would strengthen and enhance the adolescents’ living abilities to overcome or counter the stressful and disadvantageous environment with which they live.

One of the best methods of WHO to promote the health of the growing population i.e. the adolescents holistic health is through the Life Skill Training. It is one of the basic survival skills. It aims at promoting the acquisition of socio-cognitive and emotional coping skills. Family and cultural factors are no longer an adequate mechanism to shape a young adolescent girl’s development. Life skills education based on the teaching of generic
life skills including the practice of skills in relation to major health and social problems promotes the health of the school going adolescent girls.

The present study was carried out to assess the effectiveness of structured teaching module on Life skill approaches to promote the health by improving the practices related to reproductive health and enhance the self-esteem of the school going adolescent girls.

**STATEMENT OF THE PROBLEM**

A Study to assess effectiveness of structured teaching module on Life skill approaches to promote the health of the school-going adolescent girls in Puducherry.

By carrying out the study, the following objectives were achieved.

**OBJECTIVES**

1. To evaluate the knowledge of adolescent girls towards reproductive health.
2. To elicit the attitude of the adolescent girls towards reproductive health.
3. To assess the level of self-esteem of the school going adolescent girls.
4. To assess the effectiveness of teaching module using selected life skill approaches.

5. To associate self-esteem, knowledge and attitude towards reproductive health with selected socio-demographic variables (Type of school, medium of instruction, and parental education).

The study was conducted at Government high schools and Private schools of Puducherry. The sample consisted of 358 school going adolescent girls from four Government and four Private schools. Stratified sampling technique was used to select the type of schools and simple random sampling technique was used to select the sample.

Pretest was conducted by using the structured interview, Socio-Demographic Variables, Questionnaire on Reproductive Health, i.e., Knowledge on Reproductive Health and Attitude Towards Reproductive Health and Rajini’s Scale (Self-esteem scale).

The Teaching Module using Life Skill approaches was administered to all the subjects who participated in the study.

**Characteristics of the subjects:**

Among the total subjects, 212 (59.20%) of them belong to the age group of 13 years.
About half of the subjects 185 (51.70%) were from the private schools.

Majority 270 (75.40%) of the subjects were from English medium schools.

More than half 212 (59.20%) of the subjects’ fathers were educated up to the high school level.

About 194 (54.30%) of the fathers were working such as tailor, carpenter and shop keepers etc.

Regarding the monthly income, 50.30% of the fathers income was between Rs 1000-5000/-. 

Nearly 182 (50.80%) of the mothers of the subjects were educated up to high school level.

Majority 266 (74.70%) of the mothers were doing jobs such as tailors, shop owners etc.

Nearly 180 (50.30%) of the mothers were earning in the range of Rs. 1000-5000/per month.

**MAJOR FINDINGS**

**Pretest**

All the subjects had very low level of knowledge on menstrual health.
About 46.65% of the subjects had high positive attitude towards the reproductive health.

Majority 271 (75.14%) of the subjects had moderate level of personal self-esteem.

Majority 250 (69.83%) of the subjects had moderate level of family self-esteem.

Majority 267 (74.58%) of the subjects had moderate level of social self-esteem.

Majority 267 (74.58%) of the subjects had moderate level of self-concept self-esteem.

The findings in the pretest indicate the need for empowering the adolescents to improve the practices related to reproductive health and enhance their perceived level of self-esteem.

**Association of Demographic Variables**

There was significant difference in the pretest with regard to the level of knowledge on reproductive health among the subjects from private schools compared to the subjects from the Government schools.
The subjects from private school scored better knowledge and showed positive attitude than the subjects from Government school. The difference is statistically significant $P < 0.001$.

The subjects from private schools had better perceived level of self-esteem than the subjects from Government school. The difference is statistically significant $P < 0.001$ showing an association between the type of school and level of knowledge and attitude towards reproductive health and self-esteem.

The subjects studying in the English medium had higher level of knowledge and attitude toward reproductive health. The difference is statistically significant $P < 0.001$.

The subjects from English medium had enhanced perceived level of self-esteem than the subjects studying in Tamil medium. The difference is statistically significant $P < 0.001$. It showed that there is an association between knowledge, attitude towards reproductive health and self-esteem in relation to medium of instruction.

In relation to mothers education the subjects whose mother had higher education had better knowledge and attitude towards reproductive health and better level of perceived self-esteem. There is an association between the mothers’ education and level of
knowledge and attitude towards reproductive health and self-esteem. The difference is statistically significant.

There is no difference in the level of knowledge and attitude towards reproductive health and level of self-esteem in relation to fathers education. Hence there is no significant association in relation to fathers’ education.

**Posttest**

All the subjects (100%) acquired knowledge related to reproductive health.

Majority 286 (79.89%) of them had high positive attitude towards reproductive health.

Majority 321 (89.66%) of the subjects attained high level of personal self-esteem.

About 340 (94.97%) of the subjects attained high level of family self-esteem.

Majority 336 (93.86%) of the subjects attained high level of social self-esteem.

About 324 (90.50%) of the subjects attained high level of self-concept.
The change in the level of knowledge and attitude towards reproductive health and enhancement in the perceived level of self esteem in all domains such as, personal, family, social and self-concept reveals the effectiveness of the teaching module using life skill approaches.

Hence the following hypotheses

1. The Adolescent girls after receiving teaching module based on life skill approaches will demonstrate significantly better level of knowledge on reproductive health in the posttest.

2. The Adolescent girls after receiving teaching module based on life skill approaches will demonstrate significantly positive attitude towards reproductive health in the posttest.

3. The Adolescent girls after receiving teaching module based on life skill approaches will demonstrate significantly higher level of perceived self-esteem in the posttest.

4. The Adolescent girls receiving structured teaching module based on life skill approaches will demonstrate significantly higher level of the perceived self-esteem related to the domain of Personal Self-esteem in the posttest.

5. The Adolescent girls receiving structured teaching module based on life skill approaches will demonstrate significantly higher level of perceived self-esteem in the
domain related to the Family self-esteem in the posttest.

6. The Adolescent girls receiving structured teaching module based on life skill approaches will demonstrate significantly higher level of perceived self-esteem in the domain of social self-esteem in the posttest.

7. The Adolescent girls receiving structured teaching module based on life skill approaches will demonstrate significantly higher level of perceived self-esteem in the domain of Self-concept self-esteem in the posttest.

are all accepted.

**IMPLICATIONS**

The study has a wide range of scope and implications in the field of nursing such as community health nursing, paediatric nursing and psychiatric nursing, **Frank D, and Williams T, (1999)** in their study revealed, the importance of nursing implication. They stated that Nursing implications include the need for school nurses to provide ongoing education for young females and encourage them to communicate effectively with their support systems.

A nurse plays a pivotal role in the health care delivery system. Her role includes extended and expanded roles. A nurse serves as an Educator, Nurse Researcher, Nurse Administrator, Nurse Practionnaire and a best counselor. Nurse as a teacher, had
a responsibility of educating the adolescent girls in the school health programme. Nurses working in the school health programme have to educate the adolescent girls about enhancement of self-esteem and reproductive health in order to promote their health.

**Nursing Education**

Participative activity session-cum-explanatory lecture and discussion programmes can be added to the nursing curriculum. A unit may be added in the nursing curriculum on methods of improving the health of the adolescent girls by participative activity method. Community oriented health education programme can also be added on adolescent health. Focus on the problems of the adolescents and methods to prevent the problems.

**Nursing Administration**

As a nurse administrator, a nurse can plan and conduct continuing nursing education programme, in-service education programme, workshops, seminars, symposium for the nurses with the experts to enhance the self-esteem of the participants. Many activity sessions can be planned to empower the nurse administers. Enhancement of self-esteem of the administrator not only help them to understand the self fully, but also to understand the team members equally with respect and maintain a cordial relationship with them.
Nursing Service

On the service side, self-awareness helps to provide quality care to the patients.

The nurse should also participate by conducting surveys to identify the at risk adolescent girls. The nursing staff have to educate the adolescent girls along with the nurse administrator in the self-esteem promotion activities. The school health nurse jointly with the community health nurse can educate school going adolescent girls by conducting camps in schools, family, and also in the local community. The girls should be taught about the pubertal, bodily changes that take place during the adolescent period, the emotional problems, peer pressure and about identification of role confusions. They should also be taught about the role demands expected by the parents and the society.

The psychiatric mental health nurse in collaboration with the school and Governmental programmes can contribute in educating the adolescent girls, teachers and the parents.

The psychiatric mental health nurse can participate in the tertiary prevention by preventing them from problems arising out of the emotional problems and the related consequences, especially, the adolescents suicidal preventions. She can also conduct camps to identify the at risk adolescents.
The hospital nurses should have collaboration with the Adolescent Health Friendly associations. The nurse should be involved in their programmes and be trained. It helps to meet the needs of the adolescent girls, while providing care and to solve their problems.

**Implications for Nursing Research**

The findings from this study indicate the need for replication and expansion of this study with larger sample at national level.

Qualitative research can be carried out to explore the problems of the adolescents. Multi-methods studies can be carried out on adolescent health in relation to self-esteem, and reproductive health. Long term follow-up studies on life skills have to be conducted and assessed for its effectiveness.

**RECOMMENDATIONS**

- A study can be conducted to assess the role of the parents in the adolescent education.
- A study can be conducted at the early, middle and late adolescent periods separately.
- A study can be conducted to compare the boys and girls.
A study can be conducted in different settings such as the rural and urban area to identify the psychosocial and health problems of the adolescents girls.

A longitudinal study can be carried out.

A qualitative time series study may be carried out.