

# AN EXPERIMENTAL STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAM ON KNOWLEDGE REGARDING GOOD TOUCH AND BAD TOUCH AMONG STUDENTS

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**Abstract:** Child abuse is a state of emotional, physical, economic and sexual maltreatment meted out to a person below the age of eighteen and is a globally prevalent phenomenon. The growing complexities of life and the dramatic changes brought about by socio-economic transitions in India have played a major role in increasing the vulnerability of children to various and newer forms of abuse. Child abuse has serious physical and psycho-social consequences which adversely affect the health and overall well-being of a child.<sup>1</sup>

**Methodology:** Quantitative research approach with Quasi-experimental research design has been adopted for the study and purposive sampling technique was used. Total 50 school children of the age group 7-10 year were taken for the study. Data was collected with the help of child abuse questioner with the structured interview technique from children.

**Results:** Findings of the study clearly illustrate the more than half children were lies in the category of 9-10 year of age group. Before the intervention maximum students have the poor knowledge regarding good touch and bad touch but after teaching program there is significant improvement in the knowledge regarding good touch and bad touch among school children.

**Conclusion:** The purpose of this study was to evaluate the effectiveness of the level of knowledge regarding good touch and bad touch among school going children in selected school. The present study findings indicate children had poor knowledge regarding good touch and bad touch in beginning After teaching program appreciable hike can be seen in knowledge among the children regarding good touch and bad touch.

**Keywords:** structure teaching program, child Abuse, Good Touch Bad Touch.

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## 1. INTRODUCTION

The first sensory input in life comes from the sense of touch experienced by a baby while he is in the mother's womb and feels protective touch experienced by all of us through childhood, adulthood and into the older age. Parents, siblings, elders and friends play an important role in child development and teachers also play an important role.<sup>2</sup>

Sex education is important; every child should have sex education incorporated in to their schooling. Sex educations should be mandatory comprehensive medically accurate and taught student's school years just like math. It's our fundamental duty as society to educate the next generation about child sexual abuse. Parents are not comfortable talking up these sensitive topics, but the learning has to start at home and it's all about the child's safety. Doubts are put aside and talk with a child about the good touch and bad touch.<sup>3</sup>

Good touch and bad touch is gradually learnt through a child's day to day activities. We can increase this learnt behavior by making an efforts to teach a child about the difference between good touch and bad touch in early age.<sup>4</sup>

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 Samvada, 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.

According the United Nations study about the 20 to 65% of the school children have reported sexually harassment, and they have direct effect on their educational performance. Girls report losing the concentration, bad feel about themselves, dropout the school and absence in the class.<sup>5</sup>

The world wide survey was conducted and it is estimated that at least 1 in 10 girls and 1 in 20 boys had experienced sexual abuse in childhood. The children who experienced the sexual abuse are more prone to depression, eating disorder, drug and alcohol abuse and suicidal behavior and more prone to become victim in adulthood.<sup>6</sup>

## 2. METHODOLOGY

Quantitative research approach with Quasi-experimental research design has been adopted for the study with the help of purposive sampling technique was used.<sup>7</sup>

Children from age group 7 to 10 year were taken in the study. Children with any disorder or from any other age group were excluded. Children's knowledge of abuse questionnaire-Revised was used. It is a standardized knowledge questionnaire given by LESLIE M TUTTY, D.S.W. Questionnaire contains 24-items. Children responses were collected in the digamous form. A total of 25 boys and 25 girls included were included in the study. To check the reliability KR 20 was used (0.70). Content validity was determined by nine experts of different Nursing and Medical personals.

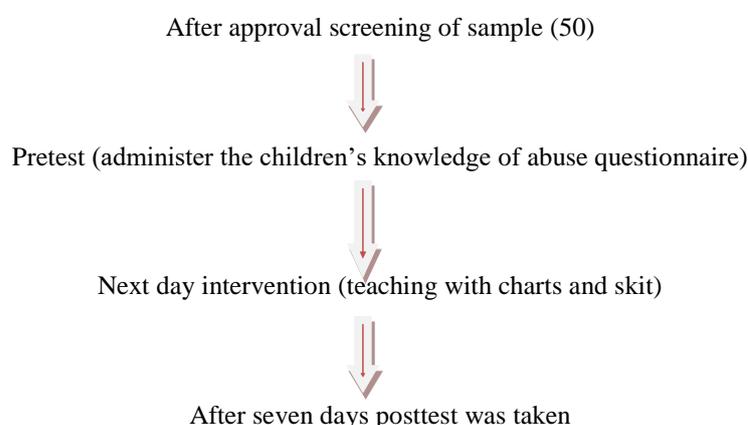
### TEACHING PROGRAM:

Structured teaching program organized for the children to give the education regarding good touch and bad touch. Teaching was given to the children with the help of charts. Material of teaching was taken online from kids safety council, **small modification is done**, after that evaluation of material was done by six pediatric and psychiatric experts (**Kids safety council**)

### ETHICAL CONSIDERATION:

Institution ethical committee approval was obtained for the study. Following this, a pilot study was conducted in the month of January 2017 with a sample size of 20 students to find out the feasibility of conducting the study and to decide the plan of statistical analysis. After analysis of the pilot sample further study was planned. For this the permission for conducting study was taken from Principal of Government Senior Secondary School, Mullana, Ambala. Consent form was prepared for the study subjects regarding their willingness to participate in the study. The purpose for carried out research project was explained to the study subjects.

### PROCEDURE OF DATA COLLECTION:



### 3. DATA ANALYSIS

The data presented in Table 1, more than half of children (66%) were in the age group of 9-10 years. Majority of subjects were Hindu by religion (90%); more than half of subjects hailed from nuclear family (68%). Less than half of subjects (44%) father's age was in the age group of 36-40 years. More than half of subjects (66%) mother's age was in the age group of 26-30 years. Majority of subjects (72%) the monthly family income was 5001-10000 Rs/month.

**Table-1 Frequency, Percentage distribution of level of knowledge regarding good touch and bad touch before and after administration of structured teaching program**

N=50

Sr. No.	Level of knowledge	Knowledge Score	Pre-test f (%)	Post-test f (%)
1	Poor	0-50%	27 (54%)	0 (0%)
2	Good	51-75%	23 (46%)	12 (24%)
3	Very Good	76-100%	0 (0%)	38 (76%)

Minimum Score-0

Maximum score-24

Data presented in table-1 reveals that in pre-test most of the children (54%) had poor level of knowledge, 46% had good level of knowledge and none had very good level of knowledge regarding good touch and bad touch. However, in posttest most of the children (76%) had very good level of knowledge, (24%) had good level of knowledge and none had poor level of knowledge regarding good touch and bad touch.

**Table-2 Mean, Mean difference, Standard deviation and t value of knowledge regarding good touch and bad touch among children.**

N=50

Area	Mean	Mean Difference	Standard Deviation	t value
PRE-TEST	12.92	1.7 2.32	2.32	36.98
POST-TEST	20.32		2.66	

Data presented in table-2 reveals that knowledge score of children in posttest was 20.32 with a mean difference of 1.7. The computed "t" value of 36.985\* was found to be statistically significant at 0.05 level of significance so hypothesis H1 is accepted.

**TABLE -3 Chi square showing the association of levels of knowledge regarding good touch and bad touch among children with demographic variables**

Sr. No. Demographic Variables	Very Good	Good	df	X <sup>2</sup>
<b>1.Age (In years)</b>			1	0.22NS
7-8	13	5		
9-10	25	7		
<b>Gender</b>			1	3.34NS
Male	17	9		
Female	21	3		
<b>Birth Order</b>			3	3.9NS
1	1	4		
2	13	1		
3	10	3		
4 & above	6	4		
<b>Class</b>			2	2.5NS
3rd	4	3		
4th	18	3		

5th	16	6		
<b>.No. of Siblings</b>			1	1.19NS
1-2	18	4		
3 & above	20	8		
<b>Religion</b>				
Hindu	37	9		
Sikh	0	1		
Muslim	1	2	2	6.6NS
<b>Type of family</b>			2	1.63NS
Nuclear	28	8		
Joint	8	8		
Extended	2	2		
<b>Mode of Transport</b>				
Walking	35	11		
Own vehicle	3	0		
Other Transport	0	1	2	4.1NS
<b>Father's Age (In years)</b>				
25-30	4	1		
31-35	17	3		
36-40	15	7	3	1.81NS
<b>Mother's Age (In years)</b>				
20-25	4	2		
26-30	23	9		
31-35	7	1		
35 & above	2	2	3	1.49NS
<b>.Any marital disharmony</b>				
No	39	10		
Yes(Divorce)	1	0	1	1.42NS
<b>Father's Education</b>				
No formal education	4	1		
Primary education	14	7		
Secondary education	16	3		
Senior secondary education	4	1	3	1.7NS
<b>Mother's Education</b>				
No formal education	11	5		
Primary education	13	4		
Secondary education	12	3		
Senior secondary education	2	0	3	1.79NS
<b>Father's Occupation</b>				
Laborer	19	5		
Private job	4	1		
Business/Self employed	15	6	2	0.41NS
<b>Mother's Occupation</b>				
Homemaker	32	10		
Private job	1	0		
Government job	1	0		
Business/Self employed	4	2	3	0.9NS
<b>Total monthly income</b>				
Below 5000	3	1		
5001-10000	28	8		
10001-15000	7	3	2	0.26NS
<b>History of substance abuse</b>				
No	24	5		
Yes(Alcohol, Smoking)	14	7	1	1.7NS
<b>Type of Accommodation</b>				
Own house	24	10		
On rent	10	6	1	0.22NS

Data presented in table no- 3. Chi square test revealed that the computed chi square value of level of knowledge of good touch and bad touch among children regarding with age (0.22), gender (3.34), birth order (3.9), class (2.5), number of siblings (1.19), type of family (1.63), father's age (1.81), mother's age (1.47), father's occupation (0.41), mother's occupation (0.91), monthly family income (0.26), history of substance abuse (1.7) and type of accommodation (0.22) were statistically non-significant at 0.05 level of significance. This indicates that the level of knowledge were independent on age, gender, class, religion, birth order so the hypothesis  $H_2$  is rejected.

#### 4. DISCUSSION

Researchers choose the school based education rather than parent teaching because Y. Jin, J. Chen, Y. Jiang, B. Y. found in their study that school based education is more effective than home teaching. The aim of their study was to evaluate the effectiveness of a child sexual abuse (CSA) prevention program; for which they divided the 484 children into two groups. One group was taught by teachers and one group by parents, children recruited from one primary school in Beijing, China, were randomly assigned to a CSA prevention program and results show that school based education is more effective than the parent teaching.<sup>8</sup>

Similar results were found by Zwi KJ<sup>1</sup>, Woolfenden SR, Wheeler DM, O'Brien TA, Tait P, Williams KW. They assessed the if school-based programs are effective in improving knowledge about sexual abuse among children with the RCT. They took two groups to assess the intervention one is experimental and one is control. Results show the increase in knowledge regarding child sexual in the experimental group show a great increase in knowledge of children about child sexual abuse.<sup>9</sup>

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