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Efficacy of structured Teaching Programme on knowledge Regarding Vaginitis Among Girls in Selected Schools at Kanpur

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Introduction

Almost half of the population, or nearly 3 million people, are under the age of 25.In other words, one out of every five people on the planet is an adolescent, with developing countries accounting for 85 of every 100 adolescents. With an estimated 105 million girls aged 10 to 19, India has one of the world's fastest growing populations. Every year, an estimated 250 million years of productive life are lost due to reproductive health issues. Vaginitis is a common problem among adolescents. Vaginitis is an inflammation of the vaginal lining. The vaginal lining creates its own environment and maintains a balance between normal bacteria and hormonal changes in a woman's body.

Due to vaginitis, approximately 3 million people in the United States visit a reproductive clinic on a regular basis.Bacterial vaginitis accounts for 40-50 percent of vaginitis cases, with candidiasis and trichomoniasis accounting for the remaining 15-20 percent. Vaginitis in adolescents is primarily caused by unsanitary practises, vaginal hygiene products, vaginal douching, insertion of foreign bodies, vaginal allergies, unprotected sex, menstrual hygiene, frequent micturation, wearing of tight synthetic undergarments, and so on. It can also be caused by long-term use of antibiotics, hormonal contraceptives, excessive sweet consumption, and so on.

Vaginitis can be avoided by following a variety of hygienic measures, such as avoiding vaginal douching, vaginal sprays, strong soaps, frequently changing sanitary napkins and tampons, wearing loose cotton undergarments, abstaining from sexual contact, using hormonal contraceptives, and limiting your intake of sweets and alcohol.

Understanding of the pathophysiology of certain causes of vaginitis has improved diagnosis and treatment of these patients. There are various. There are three types of vaginitis. Nurses can assist adolescent girls in resolving some basic health related problems such as vaginitis, which includes candidiacausevaginosis, herpes vaginosis, bacterial specific vaginosis, trichomoniasis, and others. They can assist adolescent girls in understanding the aetiology, clinical features, and preventive measures of vaginitis, which adolescent girls can use to improve their health.

Adolescence is a period of physical and psychological development as well as behavioural experimentation, and it is also associated with risky sexual behaviour in terms of STDs. Reproductive hormones cause significant physiological and tissue changes during this period of life, which may increase susceptibility to infections. At this stage, the endocervical channel's cylindrical epithelium is more ectopic and exposed to various agents that commonly infect their tissues after infection. Discharge from the vagina occurs on a daily basis as the body's way of maintaining a normal, healthy environment. Normal discharge is usually clear or milky and odourless. A change in the amount, colour, or smell; irritation; or itching or burning could all be symptoms of vaginitis caused by an imbalance of healthy bacteria in the vagina. Vaginitis can be caused by a number of factors, including an allergic reaction to an irritating chemical (deodorant, douche, or bath soap), a foreign body (tampon or napkin), an oestrogen effect, or sebaceous skin activity.

According to the WHO, the prevalence of vaginitis ranges between 10% and 25%.Vaginitis affects at least one-third of all women at some point in their lives. Vaginitis affects 10% of all adolescents worldwide. The prevalence of vaginitis in India is 21.32 percent 2. The prevalence of vaginitis in Tamil Nadu ranged from 4-62 percent. Adolescent girls suffer as a result of a lack of adequate and accurate sexual and reproductive health information. They are hesitant to seek medical attention because of the lack of confidentiality and privacy regarding reproductive health. A sizable number of adolescent girls have incorrect knowledge and information about reproductive tract infections. Adolescent girls' reproductive health awareness can be improved through strong efforts in the media and health education.

The nursing profession has the potential to play a significant role in encouraging a broader social discussion of reproductive health among adolescents. This would create a more tolerable environment for adolescents while also recognising the public health benefits of increased access to youth-friendly sexual and reproductive health services for adolescents.

In India, there has been very little research on the prevalence and awareness of vaginitis among adolescents. In light of this, the investigator felt compelled to assess adolescent girls' knowledge of vaginitis, provide them with education about its prevention through a structured teaching programme, and assess the effectiveness of the structured teaching programme.

Methodology

The study's population consisted of adolescents attending a specific school in Kanpur. The purposive sampling technique was used to select 100 adolescent samples. The study was described using a pre-experimental approach, i.e., one group pre-test post-test design. Purposive sampling was used

to select the samples using a non-probability sampling technique. Structured questionnaires were used to assess knowledge levels as data collection tools. The pretest level of knowledge was assessed first, followed by a structured teaching programme and a posttest one week later. The descriptive and inferential statistics were used to analyse the data.

Results

The assessment of knowledge among school girls revealed that the majority of the girls (30 percent) had average knowledge and 70 percent had inadequate knowledge. Nobody had sufficient knowledge.

The overall knowledge score was 10.15, with a mean percent of 33.01 percent indicating that higher secondary school girls have average knowledge of vaginitis and its prevention. The pre-test mean was 9.98 with a standard deviation of 1.15, and the post-test mean was 22.2 with a standard deviation of 2.89. The average pre-test knowledge level of all adolescent was 30 percent, 70 percent inadequate, and 0 percent adequate, and the post-test knowledge level was 20 percent average, 80 percent adequate, and 0 percent inadequate. The mean post-test knowledge score (18.77) was higher than the mean pretest knowledge level (9.98). At 0.05, the obtained t-value (15.12) was statistically significant.The mean difference between pretest and posttest scores was 8.79, which was significant at the 5% level (*p0.05).

Conclusion

Th study concluded that the structured teaching programme on vaginitis was effective.

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