



Effectiveness of Power Point Teaching Programme on Impact of Plastics and its Safe Disposal among the Rural Community in A Selected Area at Indore, M.P.

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INTRODUCTION

Plastic pollution threatens not only the environment, but also our health and that of future generations. This page is part of our Plastics and the Environment series, a set of online resources on the plastics crisis, its impact on people and the environment, and international cooperation to address this global problem. They include resources and news from organizations in Geneva and beyond, including UN-system organizations and other IOs, governmental authorities, civil society organizations, academic institutions and journals, and renowned newspapers. Combating the menace of plastic waste pollution has become a global environmental challenge. Plastic pollution is capable of affecting land, waterways and oceans as a large percentage of marine and land creatures have died due to the fact that plastic is non- biodegradable and it causes hazards to soil. It also emits toxic gasses when exposed or heated up. Plastics wastes are also harmful to human health; they may contain harmful acids which may lead to death. Nigeria, which is the biggest oil exporting country in Africa, relies mainly on the proceeds of the oil trade for its GDP and based strategy in growing her economy. However, with the declination of oil prices and increase in plastic wastes, the world is tending towards energy and sustainable development. Therefore, an urgent need for recycling plastic wastes into a solution for wealth creation is fundamental in Nigeria. This paper therefore seeks to identify favorable methods for recycling plastic wastes in Nigeria as a tool for solution Diversification and implementation. Evidence based examples are illustrated in the article with viables solution recommended for implantation.

Types of plastic debris

There are three main forms of plastic that contribute to plastic pollution: micro-, macro- and megaplastics. Mega- and microplastics have accumulated in the highest densities in the Northern Hemisphere and are concentrated around urban centers and bodies of water. Plastic production, Decomposition of plastics & Persistent organic pollutants,

Key finding of campaign:

S.NO	Marine litter item type / categories	% Contribution of marine litter number in different category	% Contribution of marine litter weight in different category
1	Plastics	55-57	30-31
2	Foam Plastic	0-2	0-2
3	Fabric	0-2	0-2
4	Paper	2-3	0-2
5	Glass	0-2	1-3
6	Religious materials	40-41	60-68

Previous estimates suggested that only 9 percent of plastic produced is recycled, leaving nine billion tons in our landfills, oceans and ecosystems.

It is worth mentioning the attempts of some organizations to save marine species from the wreckage. Their efforts on this front have shed light on the seriousness of the problem of ghost networks.

NEED FOR THE STUDY:

Plastic is everywhere in today's lifestyle. It is used to package, protect, serve and even dispose of all kinds of consumer goods. Through the industrial revolution, mass production of goods took off and plastic seemed to be a cheaper and more efficient raw material. Today, the application of plastics has practically revolutionized all important sectors of the economy, from agriculture to packaging, automobiles, construction, communication or InfoTech. The use of this non-biodegradable (according to recent studies, plastics can remain on Earth for up to 4,500 years) is growing rapidly, and the problem is what to do with plastic waste.

India has seen a significant increase in plastic consumption and increased production of plastic waste. On this basis, the total consumption of plastics is expected to increase six fold between 2000 and 2030. The consumption of the various end products is combined with their corresponding lifetimes to calculate the total amount of waste. The weighted average lifetime of plastic products was calculated to be 8 years. In India, 47 percent of the total plastic waste generated is currently recycled; this is much higher than the recycling rate in most other countries.

How much plastic waste is produced in India every year?

India produces 9.3 million tons of plastic annually, which are 25,490 per capita. The production of plastic waste in India has quadrupled in the last five years. The pandemic has also caused a surge in plastic production from the FMCG, e-commerce, food delivery, etc. markets.

The main problem is uncollected plastic waste, which accounts for 40% of landfills, clogs water bodies and pollutes streets. This untreated plastic waste facilitates entry into the stomachs of animals and at the same time the plastic crisis and plastic overproduction. 60% of plastic waste collected is not recycled and there are many reasons why not every type of plastic is recycled; by this we can understand that only a small percentage of plastic is recycled and all the rest end up in landfills.

Plastic waste from the oceans is also a serious problem in India; According to the Phew Trusts (2022) study, 11 metric tons of plastic waste enters the oceans annually, harming marine life and damaging habitats. If it continues, it poses a significant risk, especially in waterways and as wind drives plastic deeper into the oceans. The oceans around Mumbai, Kerala and the Andaman and Nicobar Islands are among the most polluted in the world.

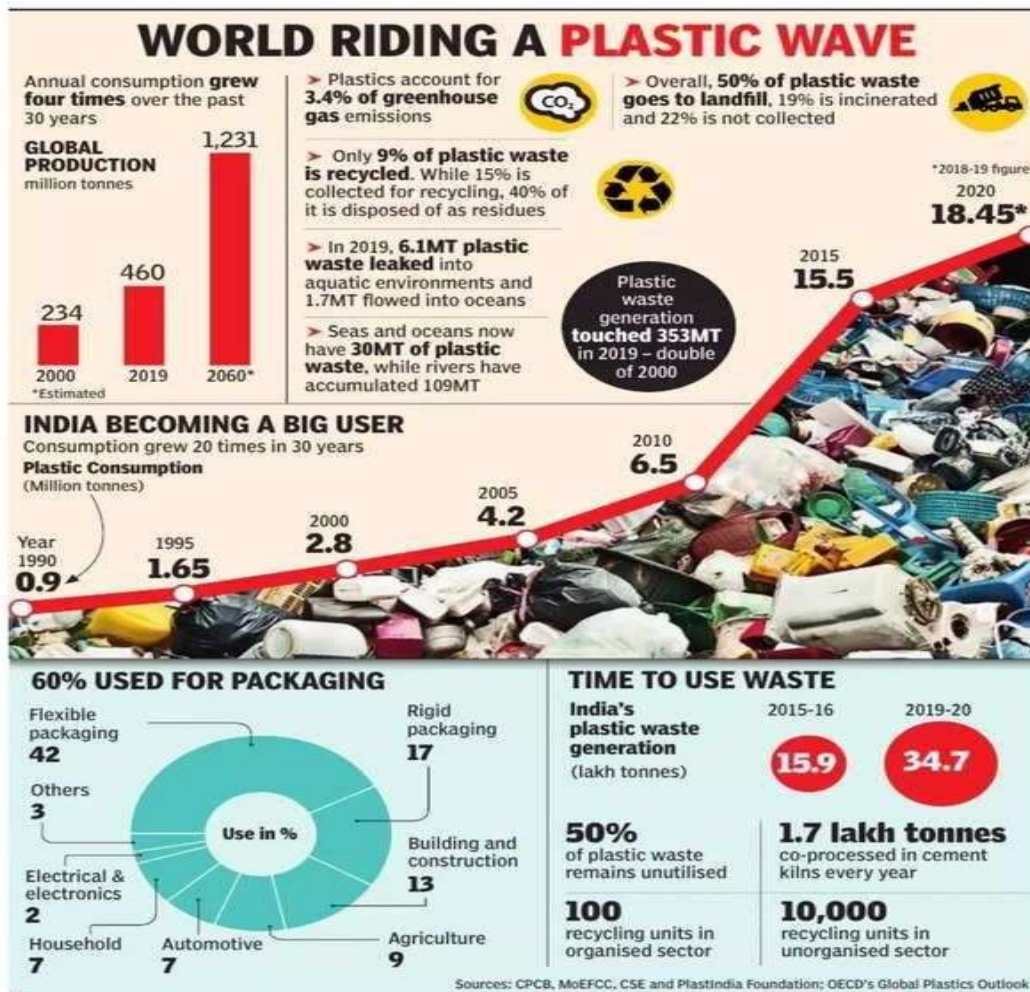
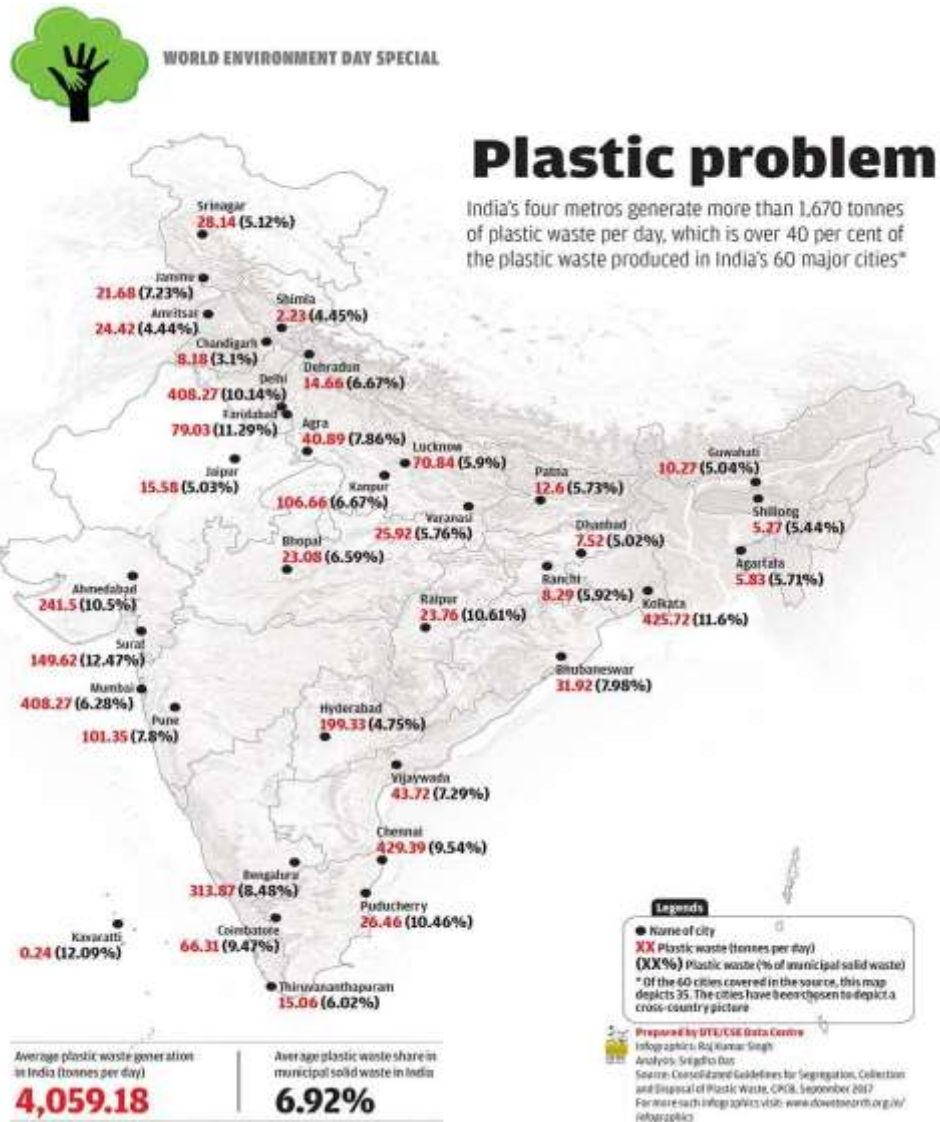


Figure : Plastic waste ration (India Becoming a big user)



STATEMENT OF THE PROBLEM:

“Effectiveness of Power Point Teaching Programme on Hazards of Plastics and its Safe Disposal among the Rural Community in a selected area at Indore, M.P.”

OBJECTIVES:

- ✦ To assess the pre test knowledge about the hazards of plastics and its safe disposal among the Rural Community in a selected area at Indore, M.P.”
- ✦ To assess the effectiveness of Power Point Teaching Programme on hazards of plastics and its safe disposal among the Rural Community in a selected area at Indore M.P.
- ✦ To assess the post test knowledge level regarding hazards of plastics and its safe disposal among housewives residing at Indore M.P.
- ✦ To compare the pretest and post test knowledge about the hazards of plastics and its safe disposal among the Rural Community in a selected area at Indore M.P.
- ✦ To associate the findings with the selected demographic variables.

HYPOTHESIS

H1: There will be a significant difference between the mean pre-test and post-test score of housewives with knowledge regarding hazards of plastics.

H2: There will be a significant association between the post-test level of knowledge and selected demographic variables of the Rural Community regarding hazards of plastics.

ASSUMPTIONS:

The study assumes that:

- ✦ Housewives will have some knowledge regarding management of plastic waste.
- ✦ Knowledge encourages to fostering desirable habits.
- ✦ Power Point Teaching Programme is an acceptable teaching strategy.
- ✦ Rural Community are the best mediators to transfer the knowledge to others.

CONCEPTUAL FRAMEWORK

A conceptual framework is a type of intermediate theory that has the potential to connect all aspects of the inquiry. They take different forms depending upon the research question of the problem. Conceptual framework based on J.W.Kenny's Open System Model.

REVIEW OF LITERATURE

This will be divided into five different categories.

- ✦ Review Of Literature Related Hazards of plastic use on human health,
- ✦ Review Of Literature Related Hazards of plastic use of the environment,
- ✦ Review Of Literature Related Knowledge of plastic waste management,
- ✦ Review Of Literature Related Habits on management of plastic waste,
- ✦ Review of Literature Related Generation of plastic waste in various households and cities.

Research Approach: The research approach adopted for this study is a quantitative approach.

Research Design: The research design selected for the present study was pre experimental one group pretest post test design.

$O_1 \longrightarrow X \longrightarrow O_2$

O_1 =Pre test to assess knowledge on hazards of plastics and its safe disposal among Rural Community in a selected at Indore M.P.

X =Administration of Power Point Teaching Programme on the hazards of plastics and its safe disposal among Rural Community.

O_2 =Post test to evaluate the level of knowledge about the hazards of plastics and its safe disposal among Rural Community.

Sampling Technique: Non probability convenience Sampling technique was used for this study.

DATA ANALYSIS AND INTERPRETATION

Results:

Section – A - Description of Rural Community by their demographic variables.

Section – B - Pretest level of knowledge among Rural Community regarding hazards of plastics and its safe disposal.

Section – C - Post test level of knowledge among Rural Community regarding hazards of plastics and its safe disposal.

Section- D - Comparison of pre and post test level of knowledge.

Section – E - Effectiveness of Power Point Teaching Programme.

Section – F - Association of post test knowledge with selected demographic variables.

TABLE 1: DEMOGRAPHIC PROFILE

Demographic variables		No. of Rural Community	%
Age	18 - 22 yrs	15	5.0%
	23 - 27 yrs	69	23.0%
	28 - 32 yrs	96	32.0%
	> 32 yrs	120	40.0%
Educational Status	1 – 6 th std	60	20.0%
	7 – 12 th std	135	45.0%
	Diploma	66	22.0%
	Degree	39	13.0%
Family Income Per Month	Rs.1590-4726	30	10.0%
	Rs.4727-7877	129	43.0%
	Rs.7878-11,816	105	35.0%
	> Rs.11,816	36	12.0%
Religion	Hindu	246	82.0%
	Muslim	15	5.0%
	Christian	30	10.0%
	Others	9	3.0%
Method of waste disposal	Open land	141	47.0%
	Dustbin	111	37.0%
	Burning	15	5.0%
	Other methods	55	11.0%

The above table reveals that study group of 40% of Rural Community were in the age group of >32 yrs, 32% of Rural Community were in the age group of 28-32 yrs, 23% of housewives were in the age group of 23-27 yrs, and 5% were in 18 – 22 yrs of age.

Educational status of the study group reveals that 45% of Rural Community had education up to 7 – 12th std , 22% had education up to diploma , 20% of Rural Community had education up to 1 – 6th std , 13% had education up to degree.

The data regarding monthly income of study group reveal that 43% of Rural Community were in Rs 4272-7877 income, 35% were at Rs 7878-11,816 income, 12% were in > Rs 11,817, and 10% of Rural Community were at Rs 1590- 4726.

Regarding religion most of the study group (ie). 82% of them were Hindus, 10% were Christian, 5% of them were Muslims and 3% of them were other type of religion.

The data regarding method of waste disposal of study group illustrate that 47% were in disposing in open land, 37% were disposed in the dustbin, 11% were using another method, 5% were burning the waste.

TABLE 2: EACH ASPECTWISE PRETEST PERCENTAGE OF KNOWLEDGE ON HAZARDS OF PLASTIC AND ITS SAFE DISPOSAL AMONG RURAL COMMUNITY

KNOWLEDGE ON	Hazards of plastic use	No. of questions	Min-Max score	Pretest score		Posttest score	
				Mean score	SD	Mean score	SD
GENERAL ASPECTS ON HAZARDS OF PLASTIC USE	General aspects	6	0 -6	3.49	1.23	5.53	0.73
OTHER HAZARDS OF PLASTIC USE	Human beings	4	0 -4	1.95	1.13	2.98	0.84
	Coastal Region	3	0 -3	1.04	0.68	2.22	0.73
	Environment	4	0 -4	1.60	0.85	3.13	0.79
	Animals	2	0 -2	1.10	0.76	1.78	0.42
	Prevention	3	0-3	1.28	0.84	2.34	0.68
	Total	22	0 -22	10.46	3.85	17.98	1.74

Table 2 shows each aspect wise pre test knowledge about the hazards of plastics and its safe disposal among Rural Community.

In pretest, they are having more knowledge in **General aspects** (58.2%) and minimum knowledge in **the Coastal region aspect** (34.7%). Overall, they are having 47.5% of knowledge score.

TABLE 3: COMPARISON OF PRETEST AND POSTTEST MEAN KNOWLEDGE SCORE

KNOWLEDGE ON	Knowledge score				Paired t-test
	Pretest		Posttest		
	Mean	SD	Mean	SD	
General aspects	3.49	1.23	5.53	.73	t=13.56, P=0.001*** Significant
Human beings	1.95	1.13	2.98	.84	t=9.56, P=0.001*** Significant
Coastal region	1.04	.68	2.22	.73	t=14.15, P=0.001*** Significant
Environment	1.60	.85	3.13	.79	t=13.40, P=0.001*** Significant
Animals	1.10	.76	1.78	.42	t=8.34, P=0.001*** Significant
Prevention	1.28	.84	2.34	.68	t=9.98, P=0.001*** Significant

* significant at $P \leq 0.05$ ** highly significant at $P \leq 0.01$ *** very high significant at $P \leq 0.001$.

Table no.3 compares pretest and posttest Mean knowledge score. Considering **General aspects**, in pretest, Rural Community are having 3.49 score where as in posttest they are having 5.53 score, so the difference is 2.04. This difference between pretest and posttest is large and it is statistically significant. Considering **Human beings** aspects, in pretest, Rural Community are having 1.95 score where as in posttest they are having 2.98 score, so the difference is 1.03. This difference between pretest and posttest is large and it is statistically significant. Considering **costal region** aspects, in pretest, Rural Community are having 1.04 score where as in posttest they are having 2.22 score, so the difference is 1.18. This difference between pretest and posttest is large and it is statistically significant. Considering **Environmental** aspects, in the pretest, Rural Community are having 1.60 score where as in posttest, they are having 3.13 scores, so the difference is 1.53. This difference between pretest and posttest is large and it is statistically significant. Considering **Animals** aspects, in pretest, Rural Community are having 1.10 score where as in posttest they are having 1.78 score, so the difference is 0.68. This difference between pretest and posttest is large and it is statistically significant. Considering **Prevention** aspects, in pretest, housewives are having 1.28 score where as in posttest they are having 2.34 score, so the difference is 1.06. This difference between pretest and posttest is large and it is statistically significant.

TABLE 4: COMPARISON OF OVERALL KNOWLEDGE SCORE

	No. of housewives	Mean \pm SD	paired t-test
Pretest	300	10.46 \pm 3.84	t=24.03 P=0.001***
posttest	300	17.98 \pm 1.74	Significant

*significant at $P \leq 0.05$ ** highly significant at $P \leq 0.01$ *** very high significant at $P \leq 0.001$.

Table no 4 shows the comparison of overall knowledge score between pretest and posttest. On an average, in pretest, Rural Community are having 10.46 score and in posttest, Rural Community are having 17.98 score. The difference is 7.52 score. The difference between pretest and the posttest knowledge score is large and it is statistically significant. Differences between pretest and posttest score was analyzed using paired t-test.

TABLE 5: COMPARISON OF PRETEST AND POSTTEST LEVEL OF KNOWLEDGE

Level of knowledge	Pretest		Posttest		Chi square test
	n	%	n	%	
Inadequate	186	62.0%	0	0.0%	$\chi^2=127.11$ P=0.001*** Significant
Moderate	93	31.0%	57	19.0%	
Adequate	21	7.0%	243	81.0%	
Total	300	100%	300	100%	

* significant at $P \leq 0.05$ ** highly significant at $P \leq 0.01$ *** very high significant at $P \leq 0.001$

Table no.5 shows the pretest and posttest knowledge among Rural Community. Before Power Point Teaching Programme, In pretest 62.0% of the Rural Community are having inadequate knowledge, 31.0% of them are having moderate knowledge and 7% of them are having adequate knowledge. After Power Point Teaching Programme, In posttest none of the Rural Community are having inadequate knowledge, 19.0% of them are having moderate knowledge and 81% of them are having adequate knowledge Chi square test was used to test statistical significance.

Section – E - EFFECTIVENESS OF POWER POINT TEACHING PROGRAMME.**TABLE 6: EFFECTIVENESS OF POWER POINT TEACHING PROGRAMME**

Knowledge on	Pretest Knowledge	Posttest Knowledge	% of knowledge Gain
General aspects	58.2%	92.2%	34.0%
Human beings	48.8%	74.5%	25.7%
Coastal region	34.7%	74.0%	39.3%
Environment	40.0%	78.3%	38.3%
Animals	55.0%	89.0%	34.0%
Prevention	42.7%	78.0%	35.3%
OVERALL	47.5%	81.7%	34.2%

Table 6 shows each domain wise knowledge gain. In pretest Rural Community are having 47.5% of knowledge score on the hazards of plastics and its safe disposal; In posttest Rural Community are having 81.7% of knowledge score on the hazards of plastics and its safe disposal. Overall, they gained 34.2% of knowledge on hazards of plastics and its safe disposal after having Power Point Teaching Programme.

Section – F: Association of post test knowledge with selected demographic variables.**TABLE 7: ASSOCIATION BETWEEN LEVEL OF KNOWLEDGE GAIN SCORE AND RURAL COMMUNITY DEMOGRAPHIC VARIABLES**

Demographic variables		Level of knowledge gain				Chi square test
		Below average (<7.5)		Above average (>7.5)		
		n	%	n	%	
Age	18 - 22 yrs	12	80.0%	3	20.0%	$\chi^2=9.33$ $p=0.02^*$
	23 - 27 yrs	45	65.2%	24	34.8%	
	28 - 32 yrs	54	56.3%	42	43.7%	
	> 32 yrs	39	32.5%	81	67.5%	
Educational Status	1 - 6 th std	42	70.0%	18	30.0%	$\chi^2=10.71$ $p=0.01^{**}$
	7 - 12th std	75	55.5%	60	44.5%	
	Diploma	27	40.9%	39	59.1%	
	Degree	6	15.4%	11	84.6%	
Family Income Per Month	Rs.1590-4726	24	80.0%	6	20.0%	$\chi^2=9.77$ $p=0.02^*$
	Rs.4727- 7877	72	55.8%	57	44.2%	
	Rs.7878- 11,816	48	45.7%	57	54.3%	
	> Rs.11,816	6	16.7%	30	84.3%	
Religion	Hindu	129	52.4%	102	47.6%	$\chi^2=2.93$ $p=0.40$
	Muslim	6	40.0%	6	60.0%	
	Christian	9	30.0%	21	70.0%	
	Others	6	66.7%	3	33.3%	
Method of waste disposal	Open land	63	44.7%	78	55.3%	$\chi^2=1.49$ $p=0.68$
	Dustbin Burning	63	56.8%	48	43.2%	
		6	40.0%	9	60.0%	
	Other methods	18	54.5%	15	45.5%	

* Significant at $P \leq 0.05$ ** highly significant at $P \leq 0.01$ *** very high Significant at $P \leq 0.001$

Table no 7 shows the association between level of knowledge gain and their demographic variables. Elder, more educated and more income Rural Community are gaining more knowledge. Statistical significance was calculated using chi square test.

The post test knowledge score has a significant association with the age of the Rural Community ($\chi^2=9.33p=0.02^*$), Education of the Rural Community ($\chi^2=10.71$ $p=0.01^{**}$) and income of the Rural Community ($\chi^2=9.77$ $p=0.02^*$).

DISSCUSSION:

The discussion about the study findings were presented in this chapter to arrive at a conclusion based on the objectives, the related literatures and hypothesis.

The first objective was to assess the pre test knowledge about the hazards of plastics and its safe disposal among Rural Community residing at Indore M.P. In assessing the pre-test level of knowledge 62.0% of the Rural Community are having inadequate knowledge, 31.0% of them are having moderate knowledge and 7% of them are having adequate knowledge. In pretest, they are having more knowledge in **General aspects** (58.2%) and minimum knowledge in **the Coastal region** (34.7%). Overall, they are having 47.5% of knowledge score.

The present study was supported by M.Sc nursing students (2018), in an analysis which was conducted among hundred people about the harmful effects of plastic and its management. Primary data was collected through questionnaire. The overall response pattern is very good.

The second objective was to assess the effectiveness of Power Point Teaching Programme on hazards of plastics and its safe disposal among Rural Community in a selected at Indore M.P.

In pretest housewives are having 47.5% of knowledge score on the hazards of plastics and its safe disposal, In posttest Rural Community are having 81.7% of knowledge score on the hazards of plastics and its safe disposal Overall, they gained 34.2% of knowledge on hazards of plastics and its safe disposal after having Power Point Teaching program.

The present study was supported by Shiny Mary D. (2011) conducted a quasi experimental study on the effectiveness of the Power Point teaching Pogamme in practice of post operative exercise among selected LSCS mothers. The result shows the excellent effectiveness of Power Point Teaching program.

The third objective was to evaluate the post test knowledge level regarding hazards of plastics and its safe disposal among Rural Community in a selected at Indore M.P.

In assessing the post test level of knowledge, none of the Rural Community are having inadequate knowledge, 19.0% of them are having moderate knowledge and 81% of them are having adequate knowledge.

The fourth objective was to compare the pretest and post test knowledge of the hazards of plastics and its safe disposal among Rural Community in a selected at Indore M.P.

After comparing the pretest and the post test mean score of knowledge, there is a significant difference between the pre-test and the post test mean score and it is statistically significant. It was assessed by using a paired t - test.

The finding was supported by **Kaur M (2012)** that the overall mean score of pre-test was **14.91** with the S.D. **3.84**, whereas in post-test the overall mean score of **23.01** with S.D. of **3.72**. The t-test value was **-8.1*** which is statistically significant at $p < 0.005$ level of significance. The study finding implied that the education had a vital role in improving the knowledge of housewives regarding plastic management.

The fifth objective was to associate the findings with the selected demographic variables.

The study concluded that there is a good correlation between post test knowledge score and the score is statistically highly significant ($p=0.001$) with the age of the Rural Community ($\chi^2=9.33p=0.02^*$), education of the Rural Community ($\chi^2=10.71 p=0.01^{**}$) and income of the Rural Community housewives ($\chi^2=9.77 p=0.02^*$). It means adequate education which increases the knowledge among the samples.

The finding was supported by **Rann PM, Hill HJ., et.al. (2008)** conducted campaign on the use of reusable bags for shopping since 2005 and through a descriptive survey approach they assessed the existing habits of people related to plastic bags. The investigator thus said that people have adequate knowledge on effect of plastic, yet, they need stimulation and reinforcement to cultivate the habit of carrying their own bags for shopping.

MAJOR FINDINGS OF THE STUDY

- 40% of Rural Community were in the age group of >32 years.
- Majority of Rural Community (45%) had education up to 7 – 12th std.
- Maximum Rural Community (43%) were at Rs 4272-7877 income.
- Regarding religion most of the study group (ie). 82% of them were Hindus.
- Majority of method of waste disposal of the study group illustrates that 47% were in disposing in open land.

The major objectives brought out the following:

- In assessing the pre-test level of knowledge 62.0% of the Rural Community are having inadequate knowledge, 31.0% of them are having moderate knowledge and 7% of them are having adequate knowledge.

- In pretest, they are having more knowledge in **General aspects** (58.2%) and minimum knowledge in **the Coastal region** (34.7%). Overall, they are having 47.5% of knowledge score.
- In posttest none of the Rural Community are having inadequate knowledge, 19.0% of them are having moderate knowledge and 81% of them are having adequate knowledge
- On an average, After PPT, Rural Community are gained 34.2% of the knowledge than pretest.
- There is a good correlation between post test knowledge and the score is statistically highly significant ($p=0.001$).
- There is significant improvement in the level of knowledge after the Power Point Teaching programme.

IMPLICATIONS OF THE STUDY

The findings of the study have implication for the nursing profession. The implications drawn from the study were of vital concern for community nursing practice, nursing education, nursing research and nursing administration.

NURSING PRACTICE

- ✦ The study findings related that there is a relationship between the knowledge on hazards of plastics and its safe disposal among the Rural Community in Indore, M.P.
- ✦ The community health nurse can be resource personnel for the community area and they can also educate them at the grass root level in imparting knowledge regarding hazards of plastics and its safe disposal among the Rural Community.
- ✦ The community health nurse has to educate the community people regarding hazards of plastics and its safe disposal both in urban and rural areas.
- ✦ Health education regarding the importance of environmental sanitation should be provided to the community people.
- ✦ Training and in-service education to the school teachers to utilize the knowledge in hazards of plastic use among the school children. Posters can be displayed on the importance of the correct technique of using and disposing plastics in the rural areas to increase the knowledge of the community.
- ✦ Not only nurses, but all the health care providers such as auxiliary nurses and midwives, village health guides, nurses working in community center should provide in-service education regarding hazards of plastics and its safe disposal.

NURSING EDUCATION

- ✦ To provide the knowledge, the nursing personnel need to be equipped with adequate knowledge and conduct mass health education program on hazards of plastic use and its safe disposal.
- ✦ The community health nursing curriculum needs to be strengthened and should include more content towards school based health services, which should enable the students to know about the importance of environmental hygiene.
- ✦ The female health workers' curriculum needs to be strengthened and should include more content regarding effects of plastic use.
- ✦ The study also emphasizes the special needs for the preparation of health education material among nursing students who were engaged in school health services.

NURSING ADMINISTRATION

- The health administration of nursing at the national, state, district, institutional and local level should focus their attention on making the public aware regarding hazards of plastic use and its safe disposal.
- The nurse administrator should arrange the appropriate training and teaching material regarding hazards of plastic use and its safe disposal for the school children, parents and the teachers.
- The administrator can organize educational programs in schools and community areas to provide knowledge regarding importance of effects of hazards of plastic use.
- The nurse administrator should motivate the students and make arrangements for periodic health education to the school children regarding environmental hygiene in the school and in their area.
- The nurse administrator should recommend to the superior for the supply of suitable posters, pictures related to plastic use, which can be displayed in the school premises, temples, and in all public areas.

NURSING RESEARCH

- ✦ The findings of the study help the professional nurses and the students to develop inquiry by providing a base.

- ✦ The study provides baseline for conducting similar studies in different settings.

RECOMMENDATIONS

On the basis of the present study the following recommendations have been made for further study.

- ✦ The study can be repeated on the large scale sample to validate and for better generalization of the findings.
- ✦ Descriptive study can be conducted to assess knowledge, attitude and practice of housewives regarding hazards of plastic use and its safe disposal.
- ✦ Comparative study may be conducted to find out the similarities or differences between the knowledge and practices of urban and rural people.
- ✦ Power Point Teaching programme on plastic use can be compared with other teaching Strategies.
- ✦ A similar study can be done by using various teaching methods.
- ✦ School syllabus may include topic related to plastic use and environmental hygiene.

CONCLUSION:

The study was conducted to assess the effectiveness of Power Point Teaching programme on level of knowledge of Rural Community regarding hazards of plastic use and its safe disposal in a selected at Indore, M.P. The finding of the study showed that the video assisted teaching was very effective in improving the level of knowledge. This study will help the health care professionals to develop appropriate teaching materials. Power Point Teaching programme is a proven method to improve the knowledge of the housewives which will help to facilitate the healthy growth and development and healthy practices in day to day activities.

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