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USE OF OSCE TO ASSESS ANC EXAMINATION

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INTRODUCTION:

An Objective Structured Clinical Examination (OSCE) is a modern type of examination often used in health sciences. It is a form of performance-based testing used to measure clinical competence of client.

Systematic supervision (examination and advice) of a woman during pregnancy is called antenatal care. The primary aim of antenatal care is to achieve at the end of pregnancy a healthy mother and a healthy baby. (Dutta, 2004)

A woman plays different roles throughout her life. Pregnancy is one of the important vital events in a woman’s life. Pregnancy can be exciting and scary time as well, because the journey of the fetal growth in uterus in these nine months, 40 weeks, 280 days journey needs to be monitored. (Myles, 2003)

In a developing country like India, one woman in every 16, may die of pregnancy related complications compared to one in 2800 of developed countries. (Census India, 2001)

The routine clinical examination of an antenatal mother includes general observation of health, history taking, height, weight, assessment of hemoglobin, blood glucose levels, urine check up, abdominal examination and antenatal advice. (Bennet, 2004)

There are a number of steps a woman can take to reduce high risk delivery. One important step is regular antenatal visits to her health care provider. During these visits the provider can effectively examine the antenatal mother and monitor the progress of pregnancy, also identify and refer high risk pregnancies. (Molly, 2007)

Routine antenatal care is an example of preventive health care at its best. Its aim is to help and educate the mother to achieve optimum health so that the outcome of pregnancy and child birth is favorable both for the mother and her baby. From a cost benefit stand point antenatal care has proved effective at lowering maternal mortality and morbidity as well as improving perinatal outcome. (Holl and Brewis, 1999)

NEED FOR THE STUDY

According to Indian Council for Medical Research and Central Board of Health, Maternal Mortality in India in 1990 were 46/1000 live births but again it raised to 54/1000 live births in 2001 (WHO/UNICEF, 2000).

Infant Mortality rate 63% (Census, 2001)

A nurse-midwife-community health nurse plays a liaison role for early identification of at risk women in their antenatal period. (Allen, 1991)

Mother and child must be considered as one unit during antenatal period, as the fetus is the part of the mother. The development of fetus in mother’s uterus is about 280 days. A healthy mother brings forth a healthy baby; Certain diseases and conditions of mother during pregnancy like syphilis, German measles and drug intake are likely to have their effects upon the fetus; hence an antenatal mother must be regularly examined. (Park, 2005)

Since the inception of the National Health Service in 1948 the present pattern of antenatal care is in existence and many people are questioning the benefits of routine attendance at hospital antenatal clinics. Improvement at maternal health and social conditions coupled with advances in diagnostic screening techniques, now make it possible to revise current systems and implement new schemes for maximum efficiency. (Hall et all, 2002)

In an OSCE clinical skills are tested and then practiced repeatedly until one perfects the skill. Candidates rotate through stations, completing all stations in their circuit. It is considered to be an improvement over traditional examination methods because the stations can be standardized, fairer peer comparison and complex procedures can be assessed without endangering patient’s health.(Newble,2004)

PROBLEM STATEMENT

‘A study to assess antenatal examination with the help of OSCE among final year B. Sc. nursing students of Dr. D. Y. Patil College of Nursing, Pune.'
OBJECTIVES OF THE STUDY

1. To assess antenatal examination skills using OSCE.

METHODOLOGY: The Research design was evaluative, Pre experimental one group pretest posttest study, which was carried out to assess the antenatal examination skills of final year B.Sc Nursing students with the help of OSCE. The investigator delivered a planned teaching on the method of doing antenatal examination and demonstrated the same. An assessment format—OSCE was then developed; the tool consisted of two sections

SECTION-1 Consisted of 3 items on age and gender of sample and name of the assessor.

SECTION-2 Consisted of 6 OSCE stations,
1. viz: history taking skills
2. interpersonal skills
3. Blood Pressure measurement and weight measurement skill
4. Physical examination skill
5. abdominal examination skill
6. skill in antenatal advice.

VALIDITY & RELIABILITY:

The tool was validated by face and content validity. It was given to senior faculties and thus peer validity was done. Inter-rater reliability was done. Measure of reliability by comparing the observed and expected value to calculate the R value for pilot study, the R value calculated was 0.89 this showed that the tool was highly reliable.

There-after every student was assessed for 10 antenatal examinations each by using the newly developed format. The Research setting was the Antenatal OPD and Antenatal ward of Dr. D. Y. Patil Hospital. The investigator delivered a planned teaching on the technique of antenatal examination and demonstrated the same. An OSCE was then developed; thereafter students were given one week time for practice session. Using the newly developed format daily two students were assessed each for 10 antenatal examinations. Each student was given a feedback after the first assessment using OSCE. Thereafter the rest of the clinical examinations were assessed using the same OSCE assessment format.

The sample comprised of all the Final Year B.Sc Nursing students studying in Dr. D. Y. Patil College of Nursing, Pimpri, Pune:18. Non-Probability Convenient Sampling Technique was used for selection of the sample.

RESULTS: As all the observations of OSCE’s for the individual sample as well as for every OSCE station were within the 6 sigma limits, it reflects the reliability, consistency of the data as well as that of the tool. This means that the data is perfectly under prescribed limits and statistically said to be highly reliable within the 99% Level Of Significance. The 6 sigma safety limits of the study prove that the study is authentic, genuine and practically applicable in academic career, counseling and evaluation process. Also all the OSCE stations are well within the limits of consistency, where the limits range from 8-20%
The present pattern of antenatal assessment for final year B.Sc nursing students of Dr. D. Y. Patil University can be modified by making an assessment with the help of OSCE.

REFERENCES
EFFECTIVENESS OF PLANNED TEACHING PROGRAMME ON ANXIETY LEVEL OF RELATIVES OF PATIENTS UNDERGOING ELECTRO CONVULSIVE THERAPY FOR THE FIRST TIME

MRS. SHUBHADA KALE,
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ABSTRACT:
In the study an evaluative approach and quasi experimental pre-test post-test (non-equivalent control group) research design was used to assess the effectiveness of planned teaching programme on anxiety level of relatives of patients undergoing Electro Convulsive Therapy for the first time in selected hospitals of Pune city. The findings of the study concluded that planned teaching programme is effective in minimizing the anxiety level of relatives of patients undergoing Electro Convulsive Therapy for the first time.

PROBLEM STATEMENT:
‘A study to assess the effectiveness of planned teaching programme on anxiety level of relatives of patients undergoing Electro Convulsive Therapy for the first time in selected hospitals of Pune city.’

OBJECTIVES:
1. To assess the anxiety level of relatives of patients undergoing electro convulsive therapy.
2. To assess the effectiveness of planned teaching on anxiety level of relatives of patients undergoing electro convulsive therapy.
3. To compare the effectiveness of planned teaching on anxiety level of relatives of patients in control and experimental group.
4. To correlate the anxiety level with selected demographic variables.

SAMPLE SIZE: 60

SAMPLING TECHNIQUE:
Non-probability - Purposive sampling technique.

TOOL: The tool used for data collection consisted of:
1. Questionnaires to assess the anxiety level of relatives of patients undergoing electro convulsive therapy for the first time.
2. Planned teaching module on electro convulsive therapy.

CONTENT VALIDITY: of the tool was ensured by verifying it with experts from the field of psychiatric medicine and nursing.

RELIABILITY: of the tool was tested by using split half method, by calculating r correlation coefficient, tool was found to be highly reliable.

PILOT STUDY: was conducted on six relatives of patients undergoing electro convulsive therapy for the first time.

DATA COLLECTION: in the data gathering process, the investigator conducted an interview schedule with anxiety assessment questionnaire.

A pre-test was administered before the first electro convulsive therapy to the control and experimental group, planned teaching was imparted to the experimental group, and post-test was administered to both groups on the second setting of electro convulsive therapy. The data collected was analyzed in terms of frequency, percentage, ‘t’ test and coefficient of correlation and presented in the form of tables and graphs.

MAIN FINDINGS OF THE STUDY:
Distribution of demographic data:

Age: data showed that majority i.e. 36.66% of relatives from control and experimental group belong to the age group between 48-58 years.
Gender: the analysis of the gender of the samples showed that the control and experimental group had 50% male and 50% female sample.

Relationship with patient: about 40% from control group and 33.33% from experimental group were mothers of patient. In the control group 16.66% were husband and brother, in the experimental group 20% were father and 16.66% were brother of the patient.

Occupation: it was found that in control group 33.33% and in experimental group 40% were into service i.e. in control group 100% were male and in the experimental group 80% and 20% female. In control group 23.33% were housemaid and in experimental group 26.66% were into farming.

Education: the analysis of educational statistics showed that 43% from control group and 36.66% from experimental group were educated up to secondary school. In the control group 23.33% and in experimental group 33.33% had studied up to graduate level and above. In the control group 33.33% and in experimental group 30.33% were illiterate.

Income: in the control group 20.00% and in the experimental group 40% had income ranging from 5001 and above, and in the experimental group 23.33% had income ranging from rupees 1001-3000.

**Findings Related to Effectiveness of Planned healthy teaching:**

- Comparison in scores of pre-test and post-test in control group: the average anxiety score in the pre-test is 38.26% is reduced to 27.23% in the post-test.
- Comparison in scores of pre-test and post-test in experimental group: the average anxiety score in the pre-test is 37.88% is reduced significantly to 10.73% in the post-test.
- Comparison in scores of pre-test in control and experimental groups: the control group and experimental group were having nearly same average anxiety scores in pre-test i.e. 38.26% and 37.88% respectively. This indicates that initially selected groups were homogeneous.
- Comparison in scores of post-test in control and experimental groups: there is significant difference in average anxiety scores in post-test of experimental group i.e. 10.73% which is significantly less than control group i.e. 27.23%.
- The findings claim that reduction in score in experimental group is large than the reduction in scores in control group. This indicates the acceptance that planned teaching is effective in reducing anxiety level of relatives of patients undergoing electro convulsive therapy for the first time.
- Association of anxiety level and selected demographic variables: the findings suggest that anxiety shows no variation in the variables like age, occupation, and income, while education, gender, relationship with patient, shows significant association with anxiety.

**REFERENCES:**

EFFECTIVENESS OF PATTERNED BREATHING TECHNIQUE IN REDUCTION OF PAIN DURING FIRST STAGE OF LABOUR AMONG PRIMIGRAVIDAS.

MS. ELIZABETH THOMAS  
M. Sc. Obstetrics and Gynecological Nursing.  

MS. SAVITA DHIWAR  
Asso. Professor,  
M.Sc. Obstetrics and Gynecological Nursing.

INTRODUCTION:  
During nine months of pregnancy the women has to undergo so many changes physiologically and psychologically. Pregnancy is one of the biggest fantasies and it changes into a worse nightmare when labour pain develops. Labour can seems to be like a painful experience for many pregnant women. During labour the woman is about to undergo one of the most meaningful and stressful events of her life. Indeed, pregnancy is a very crucial stage of motherhood and almost all women want to choose giving birth naturally without the many external intervention involved. Of course, she can also help herself to make her labour and delivery easier. The adequacy of her preparation for childbirth, including the coping mechanism, communication and support systems that have been established will be put to test.

STATEMENT:  
‘A study to assess the effectiveness of Patterned Breathing Technique in reduction of Pain during first stage of labour among primigravida women admitted in labour units of selected hospitals of Pune city.’

OBJECTIVES OF THE STUDY WERE:  
• To assess pain level among primigravida women during first stage of labour in experimental group and control group before practicing patterned breathing technique.  
• To assess pain level among primigravida women during first stage of labour in experimental group and control group after practicing patterned breathing technique.  
• To compare the pain level among primigravida women in experimental and control group.

RESEARCH DESIGN  
A Non Equivalent Pre-test Post-test control group design was adopted for the study.

SAMPLING TECHNIQUE  
Non-Probability purposive sampling technique was followed to select 60 primigravida women in the first stage of labour in selected hospitals of Pune city. Then the subjects were assigned to the experimental group (30) and control group (30). Inclusion criteria were primigravida women who were in active phase of labour (with cervical dilatation of 4 cm), undergoing normal vaginal birth, were ready to participate in the study and could understand Marathi and English.

TOOLS  
• Interview Schedule for collecting Demographic and base line data.  
• Standardized, Numeric Pain Intensity Scale (NPIS) for assessment of pain.  
• An Observation Checklist for assessment of progress of labour was also recorded.  
• Content validity of the tool was ensured by thirteen experts from the field of Obstetrics & Gynaecology, two Obstetrician and Gynaecologists; nine nursing experts, one expert from physiotherapy and one from Biostatistics. The Numeric Pain Intensity Scale (NPIS), used for the study is a standardized scale used for the assessment of pain intensity. Therefore, further establishment of validity for NPIS was not considered necessary. Suggestions proposed were incorporated in tool and appropriate changes were made.

RELIABILITY:  
As, Numeric Pain Intensity Scale (NPIS) is already a standardized reliable tool. Therefore, further establishment of reliability was not considered necessary.
A Pilot study was conducted in the labour room of selected hospital of Pune city. As per laid down criteria 10 samples were selected by non-probability purposive sampling who were available during the study. These samples were not included in the final study.

Data gathering process for final study was done from selected hospitals of Pune. The samples were selected according to the inclusion criteria from those who were admitted in the labour room for delivery. After explaining the objectives and purpose of the study to the primigravida women, written consent was obtained from each one of them for participation in the study. Pre-test score (on admission) of the pain level was assessed and recorded in both the experimental and control group.

Then, in the experimental group, Patterned Breathing Technique was demonstrated and instructed by the investigator to the primigravida women in the labour room. After that the women were instructed to practice Patterned breathing technique during each contraction. The women practiced Patterned breathing technique during each contraction from the beginning of contraction and continued till the contraction ceased, in front of the investigator. As, the variations in the pain level could not be completely assessed by a single post test observation because as the time passes the intensity of uterine contractions also increases; hence the pain level would also increase. Therefore, 5 observations (at 1, 2, 3, 4 & 5 hours) at the interval of every one hour were recorded.

5 post tests scores were recorded using Numeric Pain Intensity Scale for assessment of pain level at the interval of every 1 hour (O2, O3, O4, O5 and O6). Similarly, in the control group, 5 post tests scores were recorded using the same Numeric Pain Intensity Scale for assessment of pain level at the interval of every 1 hour (O2, O3, O4, O5 and O6) without practicing Patterned breathing technique.

THE MAJOR FINDINGS OF THE STUDY

Findings related to sample characteristics:

- Majority of the women (80%) were registered cases, whereas only (20%) of women were unregistered.
- Most of the women (71.67 %) were in the age group of 22-25 years of age, whereas only (25%) were in between age group 18-21.
- (91.67%) of the women had spontaneous delivery, whereas only (8.33%) had induced delivery.
- Most of the women (71.67%) were educated upto SSC. whereas (28.33%) were educated upto HSC.
- Majority of the women (60%) belonged to Hindu religion, whereas (31.67%) and (8.33%) belonged to Muslim and Christian religion.
- Most of the women (83.33%) were housewives whereas some (11.67%) were in service.
- Majority of the women (83.33%) had a monthly income between Rs.30001-6000 whereas only few (10%) had an income between Rs.6001-9000.
- (73.33%) of the women belonged to joint family and (26.67%) of women belonged to nuclear family.

Findings regarding assessment of pain level primigravida women in experimental group

- The mean pre test score (on admission) and for overall mean post test scores (at 1st, 2nd, 3rd, 4th and 5th hour) of pain level before and after practicing Patterned breathing technique during first stage of labour, among primigravida women in experimental group, has p-value 0.00, which is less than 0.05 level of significance.

Therefore, it was concluded that on admission the pain level during the active phase of first stage of labour, was less after that with the progress of labour there was significant increase in the level of pain every hourly. The level of pain on admission was mild then increased moderately at the end of 5th hour.

Findings regarding assessment of pain level primigravida women in control group

- The pre test score (on admission) and overall mean post test scores (at 1st, 2nd, 3rd, 4th and 5th hour) of pain level without practicing Patterned breathing technique during first stage of labour, among primigravida women in control group, has p-value 0.00, which is less than 0.05 level of significance.

Therefore, it was concluded that on admission the pain level during the active phase of first stage of labour, the pain level was less after that as the labour progressed there was a significant increase in the level of pain every hourly. And the level of pain on admission was mild then increased severely at the end of 5th hour.

Findings regarding comparison of primigravida women's pain level in experimental and control group.

- The mean pre-test score of pain level in primigravida women before practicing Patterned breathing technique in experimental was (2.6) which is less than control group which is (2.8) with a mean difference of (0.2), which is not significant as evident from ‘z’ value of (1.68) which is less than 0.05 level of significance.

Therefore, it was concluded that on admission before practicing Patterned breathing technique the level of
The pain experienced by the primigravida women in experimental and control group was almost same with no significant difference.

- The overall mean post test scores of pain level at 1st, 2nd, 3rd, 4th and 5th hour after practicing Patterned breathing technique among primigravida women during first stage of labour, in experimental and control group has p-value of 0.000, which is less than 0.05 level of significance.
- Therefore it was conclude that there was significant reduction in pain level among primigravida women in experimental group after practicing selected Patterned breathing technique during first stage of labour without practicing Patterned breathing technique.
- The pain level experienced at the end of 5th hour, among the women in experimental group was moderate (6-7) and in control group the women experienced severe (8-9) level of pain.

**CONCLUSION:**

Therefore it was concluded from the statistical tests that practicing selected Patterned breathing technique was effective in reduction of pain among primigravida women during first stage of labour. Analysis of data showed that there was significant difference between pre test and post test pain scores of pain level in experimental group after practicing Patterned breathing technique and without practicing Patterned breathing technique control group.

**REFERENCES**

‘ASSESSMENT OF RISK FACTORS FOR CORONARY ARTERY DISEASES IN EMPLOYEES OF SELECTED EDUCATIONAL INSTITUTES’

MS. MANISHA SHRIKANT GAIKWAD  
M.Sc. Medical Surgical Nursing  
MR. SHREENATH KULKARNI  
M.Sc. Psychiatric Nursing  
Associate Professor,  
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ABSTRACT:
In the present study a descriptive exploratory research design was used to achieve the objectives of the study. The study was conducted in five selected educational institutes of Pune city. In the present study the sample comprised of 60 teachers of primary and secondary schools and higher secondary colleges in selected educational institutes of Pune city, a semi structured questionnaire regarding assessment of risk factors of coronary artery diseases was prepared to study the sample. Descriptive and inferential statistics had been used to analyze the data obtained through interviews. This study showed that teachers, based on their prevalence of CAD risk factors, are at increasing risk of CAD.

PROBLEM STATEMENT:
‘Assessment of risk factors for coronary artery diseases in employees of selected educational institutes of Pune city in view to prepare and validate a SIM.’

INTRODUCTION:
The global burden of coronary heart disease (CHD) is rapidly increasing to the effect that it is likely to be the most common cause of disability-adjusted life years (DALY) loss in year 2020 as compared to fifth position in 1990. The major risk factors responsible for the CAD epidemic in India are smoking, high blood pressure, high cholesterol, high saturated fat diet and lack of physical activity. These factors should remain the focus of action in arresting and reversing this epidemic. Since adverse effects of these factors are greater in Indians, the benefits of modifying them are also correspondingly greater.

In India, the prevalence of CHD has been reported at 4% in the rural and 11% in the urban populations. There are several biological, behavioral, psychological and social risk factors that have been well recognized as risk factors for CHD.

Several aspects need to be recognized in this framework. Multiplicative risk arising from a combination of risk factors might help in explaining the recent emergence, and underlie the projected escalation of the CAD epidemic in the developing countries

OBJECTIVES OF THE STUDY
• To assess the risk factors of coronary artery disease among employees in selected educational institutes of Pune city.
• To associate the selected background variables with the risk factors of coronary artery disease among employees in selected institutes.
• To prepare and validate a self instructional module on awareness of risk factors of coronary artery disease.

HYPOTHESIS/ RESEARCH QUESTION
What is the prevalence of risk factors of coronary artery disease in employees of age group of 40-60 years in selected educational institutes of Pune city?

RESEARCH METHODOLOGY
A descriptive exploratory research design was used to achieve the objectives of the study. The study was conducted in five selected educational institutes of Pune city. The samples were teachers between the age group of 40 to 60 years with total sample size of 60. The study was based on simple random sampling technique.

TOOLS AND TECHNIQUES
The tool for the study was prepared by referring to books, internet and related researches. Blue print for the sections was prepared and then the items were finalized. For each section a separate criteria checklist was prepared.
## VALIDITY AND RELIABILITY

The content validity for research tool was done by various experts like medical surgical nurse, Community health nurse, cardiologist and from preventive and social medicine. The suggestions were discussed with the guide and the tool was finalized. Reliability for the tool was calculated by using Cronbach's rank correlation formula.

## DATA GATHERING PROCESS

The researcher had given semi structured questionnaire to teachers for tool 1 and tool 2 and took anthropometric measurement for tool 3. Based upon the findings the researcher has prepared the master data sheet as per suggestion given by the statistician.

## MAJOR FINDINGS OF STUDY AND DISCUSSION:

The collected data was analyzed under various sections. The analysis was done by using descriptive and inferential statistics. The important findings were as follows:

Section I: Baseline characteristic of employees of selected educational institute.

Average number of teachers was of B.Ed. qualification (45%). Maximum of them (75%) are having income of 20,001-30,000. The sample size contains majority (96.7%) with Hindu religion. Many of the teachers were married (95%) and having nuclear family (71.7%) most of them (50%) having an experience of 11-20 years. Majority of them (41.67%) had reading as most preferred leisure time activity.

Section II: Findings of assessment of high risk factors for coronary artery diseases.

Maximum number of teachers had mild risk factors (62%), many of them had moderate risk factors (28%) and none of them had severe risk factors and 6 of them (10%) did not have any risk factors.

Average no of teachers having family history of acute and chronic medical condition (46.47 %) maximum of them (90%) are not having high blood sugar level. Minimum of them have investigated serum cholesterol level (18.33%), there was an equal (50%) consumption of vegetarian and non vegetarian diet.

![Fig: 4.1: Risk of coronary artery diseases](image)

Maximum number of teachers was having a normal body mass index (BMI) (56.67%) and remaining was having abnormal (43.33%). Male teachers (23.33%) were having abnormal waist hip ratio (WHR) where as only 10% are having normal ratio. For female maximum (35%) were having WHR abnormal and (31.67%) of them has normal WHR.

Maximum of teachers (83.33%) were having more than normal pulse and (16.67%) were having normal pulse. Majority (83.33%) of teachers was having a normal systolic blood pressure and only (16.67%) were having more than normal systolic blood pressure.

Maximum (75%) of teachers were having normal cholesterol and (25%) were having more than normal.

Many of them are having (95%) normal high density lipoprotein (HDL) and remaining (5%) were having abnormal HDL in their blood. Maximum of them (77.5%), (70%) were having normal low density lipoprotein (LDL) and triglyceride, remaining (22.5%), (30%) having abnormal LDL and triglyceride respectively.
Section III: Other findings.

Association between high risk factor and selected demographic variable were checked using Chi–Square test. The following associations were checked:

Association between years of experience, type of family, educational status, marital status, religion with the risk factors of coronary artery disease in study group

For all the above associations there was significant correlation found between the years of experience and educational status with risk factors of coronary artery disease as calculated value that is Chi-Square was greater than table value at 0.05 level of significance other factors were not having significant correlation as calculated value that is Chi-Square was lesser than table value at 0.05 level of significance.

PREPARATION OF SELF INSTRUCTED MODULE:

Based upon the above findings the researcher has prepared module on “prevention and control coronary artery diseases” which reveals in brief, Structure and function of heart, Causes and risk factors of coronary artery diseases, development of coronary artery disease, indicative signs and symptoms of coronary artery disease, investigation for coronary artery diseases, Management and risk prevention for coronary artery diseases.

CONCLUSION

The following conclusion were drawn based upon the data analysis

- Maximum no of teachers were in a mild risk (62%), many of them in moderate risk (28%), and none of them were in a sever risk of getting coronary artery diseases.
- Average no of teachers were having a family history of acute and chronic medical condition. Minimum of them have investigated serum cholesterol level. There is equal consumption of vegetarian and non vegetarian food among study group. Many of them experience work related stress. Many of them perform exercise. Maximum of them are not smoking cigarette and not taking alcohol.
- Average no of sample (43.33%) was having abnormal BMI. Male teachers were having abnormal waist hip ratio (WHR) (23.33%) where as only (10%) are having normal ratio. Maximum numbers of females were having abnormal (35%) and normal (31.67%) WHR.
- Maximum (75%) of teachers were having normal cho-

lesterol and (25%) were having more than normal.
- There was significant correlation found between the years of experience and educational status with risk factors of coronary artery disease.

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INTRODUCTION:
Coronary heart disease is a major cause of death and disability. Coronary heart disease may be treated by coronary artery bypass graft (CABG) surgery. Following surgery, patients routinely spend the immediate post-operative period in the intensive care unit (ICU) to allow intensive medical and nursing monitoring and management. Given that it has been suggested that many patients have found the ICU to be an especially ‘alien’ environment, it is not surprising to find that links have been made between admission to such an environment and exacerbations of existing anxieties that some patients suffer. For many such patients, the ICU environment can be a ‘wildly unfamiliar’ one, depriving them of normal interactions and sensations while constantly bombarding them with strange sensory stimuli. This situation can exacerbate the feelings of anxiety that the patient may already be experiencing from the surgery and consequently, trigger psychological abnormalities collectively referred to as ‘Intensive care syndrome’. ‘Intensive care syndrome’ is a phenomenon of altered mental function (e.g. confusion, disorientation and hallucinations) that occurs in some patients while in intensive care and resolves after transfer.

ABSTRACT:
Surgery, whether elective or emergent, is a stressful and complex event. In cardiac surgery, the patient is transferred to an intensive care unit. These intensive care units are triumphs of technological medicine and surgery. So, the atmosphere leads to the development of anxiety which results in psychological disturbances. Studies have reported increasing knowledge and advanced interventions relieve pre-operative anxiety. The nurse plays an integral member of the multidisciplinary team to provide patient education and orientation to patients regarding intensive therapy unit which relieves anxiety. The study finding suggested that providing Pre-operative orientation programme in pre-operative period assists in the reduction in physiological parameters (blood pressure, pulse and respiration) in pre-operative period and reduction in subjective feeling of anxiety of the participants in pre and post-operative period.

Problem statement: -
Effect of Pre-operative orientation programme on pre and post-operative anxiety of CABG patients in selected hospitals of Pune.

OBJECTIVES OF THE STUDY:
1. To assess the baseline data of anxiety level in pre-operative period for both the control and experimental groups.
2. To determine the anxiety level in pre-operative period after the intervention.
3. To determine the anxiety level in post-operative period after the intervention.
4. To compare the anxiety level between both the groups in pre-operative and post-operative period.

RESEARCH METHODOLOGY:
Research design and sample:
In this study the quasi-experimental - non-equivalent control group before-after design was selected. The sample consisted of forty (twenty in the control group and twenty in the experimental group) who were undergoing coronary artery bypass grafting for the first time and non-probability purposive sampling was adopted.

Tools and technique:
The tools used in this study for data collection are:
Section I: Demographic profile.
Section II: Physiological Parameter Measurement Scale (PPMS).
Section III: Modified Self-Evaluation Questionnaire Based on Spielberger’s State anxiety Inventory (SSAI).

Data collection process:
- The written permission was obtained from selected multispeciality hospitals of Pune prior to the data collection. The data collection was done in the period of
one month in April 2010.

- A written consent was obtained from them.
- As baseline data i.e. 24 hours before scheduled surgery the data were collected from both the groups by the demographic profile, Physiological Parameter Measurement Scale (PPMS) and Modified Self-Evaluation Questionnaire based on Spielberger’s State Anxiety Inventory (SSAI).
- After that in the experimental group the Pre-operative orientation programme was introduced which included giving information to participants related to cardiac recovery unit, post-operative activities and a visit was arranged to cardiac recovery unit for the participants which included showing the unit, talking to recovery unit staff, talking to patients who had undergone CABG operation. At the same time the control group followed the hospital policy.
- During pre-operative period i.e. 4 hours before scheduled surgery the post-intervention data were collected from both the groups by the Physiological Parameter Measurement Scale (PPMS) and Modified Self-Evaluation Questionnaire based on Spielberger’s State Anxiety Inventory (SSAI).
- On the third post-operative day again the post-intervention data were collected from both the groups by the Physiological Parameter Measurement Scale (PPMS) and Modified Self-Evaluation Questionnaire based on Spielberger’s State Anxiety Inventory (SSAI).

**Data analysis:**

The analysis and interpretation of data in this study were based on data collected from demographic profile, Physiological Parameter Measurement Scale (PPMS) and Modified Self-Evaluation Questionnaire based on Spielberger’s State Anxiety Inventory (SSAI) and as per the objectives of the study. Descriptive statistics were used. Mean and standard deviation with graphical presentation of data. Inferential statistics was used to test hypothesis was t-test.

**Significant finding and discussion:**

Comparison of baseline anxiety in the study groups:

The finding showed that the p-value is greater than 0.05, which accepted HO at 5% l.o.s. i.e. there was no significant difference in anxiety level between the two groups in baseline anxiety before intervention by using Physiological Parameters Measurement Scale (PPMS) and Spielberger’s State anxiety Inventory (SSAI).

Table 5.1 Comparison of baseline anxiety in the study groups using t-Test: Two Samples for Means N=40

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Tool</th>
<th>t statistic</th>
<th>df</th>
<th>Table Value</th>
<th>p-Value</th>
<th>Conclusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>PPMS</td>
<td>0.126</td>
<td>38</td>
<td>2.024</td>
<td>0.900</td>
<td>Accept Ho (At 5% l.o.s.)</td>
</tr>
<tr>
<td>2</td>
<td>SSAI</td>
<td>-0.667</td>
<td>38</td>
<td>2.024</td>
<td>0.509</td>
<td>Accept Ho (At 5% l.o.s.)</td>
</tr>
</tbody>
</table>

Comparison of post intervention anxiety in pre-operative period:

From PPMS the finding showed that the p-value is 0.164 (p-value > 0.05), which rejected Ho at 10% level of significance. From SSAI the finding showed that the p-value is 0.024 (p-value < 0.05), which rejected Ho at 5% level of significance. It is clear that the experimental group had comparatively less anxiety than the control group after the study intervention which was measured by PPMS and SSAI in pre-operative period which is accepting the alternative hypothesis H1 that there is a significant difference in anxiety level between the two groups in pre-operative period.

Table 5.2 Comparison of post-intervention anxiety in pre-operative period using t-Test: Two Samples for Means N=40

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Tool</th>
<th>t statistic</th>
<th>df</th>
<th>Table Value</th>
<th>p-value</th>
<th>Conclusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>PPMS</td>
<td>1.674</td>
<td>38</td>
<td>1.304</td>
<td>0.051*</td>
<td>Reject Ho (At 10% l.o.s.)</td>
</tr>
<tr>
<td>2</td>
<td>SSAI</td>
<td>2.034</td>
<td>38</td>
<td>1.686</td>
<td>0.024**</td>
<td>Reject Ho (At 5% l.o.s.)</td>
</tr>
</tbody>
</table>

Comparison of post intervention anxiety in post-operative period:

From PPMS the finding showed that the p-value is 0.051 (p-value < 0.1), which rejected Ho at 10% level of significance. From SSAI the finding showed that the p-value is 0.000 (p < 0.000), which rejected Ho at 1% level of significance. It also shows that the experimental group had comparatively less anxiety than the control group after the study intervention which was measured by PPMS and SSAI in post-operative period which is accepting the alternative hypothesis H1 that there is significant difference in anxiety level between the two groups in post-operative period.
It is clear from the findings that the Pre-operative orientation programme played a significant role in the reduction of anxiety in pre and post-operative periods. These findings correlated with the various literature reviews which supports the findings.

CONCLUSION:

The findings showed that the experimental group had comparatively less anxiety than the control group after the study intervention which was measured by PPMS and SSAI in pre-operative period which is accepting the alternative hypothesis H1 that there is a significant difference in anxiety level between two groups in pre-operative period. It also revealed that there was statistically no significance difference seen in anxiety level between the two groups after the study intervention which was measured by PPMS in post-operative period which is accepting the null hypothesis H0 that there is no significant difference in anxiety level between the two groups in post-operative period. It also showed that the experimental group had comparatively less anxiety than the control group after the study intervention which was measured by SSAI in post-operative period which is accepting the alternative hypothesis H1 that there is a significant difference in anxiety level between the two groups in post-operative period.

These results suggested that providing Pre-operative orientation programme in pre-operative period assists in the reduction in physiological parameters (blood pressure, pulse and respiration) in pre-operative period and reduction in subjective feeling of anxiety of the participants in pre and post-operative period.

REFERENCES:


ABSTRACT

In the present study a Quasi Experimental Study a research design was used to achieve the objectives of the study. The study was conducted in selected slums of selected areas of Pimpri Chinchawad. In the present study the sample comprised of 60 people. A structured questionnaire knowledge regarding swine flu was prepared to study the sample. Descriptive and inferential statistics had been used to analyze the data obtained through interviews. This study indicates that the planned teaching is effective in increasing the knowledge of people regarding swine flu.

PROBLEM STATEMENT:

‘A study to assess the effect of planned health teaching regarding knowledge of swine flu among people residing in selected slums of Pimpri Chinchwad area.’

INTRODUCTION:

Swine influenza is a highly contagious respiratory disease of pigs caused by one of several swine influenza viruses. Outbreaks are common in pigs all the year round, and infection in humans is a result of close contact with infected animals. This virus is a new subtype of influenza A (H1 N1) that was not previously detected in swines or humans.

H1N1 was first reported in Mexico on 18th March, 2009 and then spread to neighboring United States and Canada. As on 21st June 2009, World Health Organization has reported 44,287 laboratory –confirmed cases of influenza- A H1N1 infection with 180 deaths from 94 countries spread over America, Europe, Asia and Australian continent.

The 2009 flu pandemic was a global outbreak of a new strain of influenza A virus subtype H1N1, identified in April 2009 and commonly referred to as swine flu. According to the World Health Organization (WHO), about 52,160 laboratory confirmed cases of swine flu have been reported from 99 countries till June 25.

Incidence in Maharashtra, Pune: The H1N1 flu toll in the city rose to 61. Mean while, as many 16 people tested positive for the H1N1 influenza in the city. Total 526 suspected patients are on Tamilflu while approximately 22,784 have been given tablet. Around 6,081 people were screened across the district and 84 were discharged. All the 53 screening centers in PMC around 4.78 lakh people have been screened across the district.

Pimpri Chinchwad: Until now limited to the city of Pune, swine flu has now made its presence felt in the twin industrial township of Pimpri Chinchwad. So far, five cases have been detected from different parts of the town, especially from the areas falling on left side of Pavana River. Two cases are from Pimple Saudagar, one from Sangvi, one from Wakad and one from Gav Pimple. Citizens should get in touch with the in-charges of eight PCMC-run hospitals including the YCMH, Jijamata, Sangvi, Bhosari and Akurdi Hospitals. (November 2010.)

OBJECTIVES OF THE STUDY

1. To identify the existing knowledge related to swine flu among people.
2. To assess effectiveness of planned health teaching regarding knowledge of swine flu among people.
3. To find a relationship between the level of knowledge people with selected demographic variables.

HYPOTHESIS/ RESEARCH QUESTION

Ho- There will be no significant difference between pre-test and post-test knowledge score.

H1- There will be significant difference between pre-test and post-test knowledge score.

RESEARCH METHODOLOGY

A quasi experimental research design was used to achieve the objectives of the study. The study was conducted in selected slums of Pune city. The samples were peoples all the people (male and female) above 12 years of age. Sample size was 60. A non probability convenient purposive sampling technique uses convenient sampling method.
TOOLS AND TECHNIQUES
The tool for the study was prepared by referring to books, internet and related researches. Blue print for the sections was prepared and then the items were finalized. For each section a separate criteria checklist was prepared.

Section I This section included items seeking information on demographic profile of sample.

Section II In - This section comprised 20 knowledge items with a maximum score 20, categorized under two broad areas one score was given for each correct response and zero for wrong response. The maximum score was minimum was zero.

Health teaching was prepared in Marathi language which is local language of the people, the language of the teaching was kept as simple as possible. The health teaching titled ‘Health Teaching on Swine flu’.

VALIDITY AND RELIABILITY
The validity was established by experts from different specialties i.e. from Preventive and Social Medicine, Community Health Nursing, Medical Surgical Nursing, Medicine Department and Statistics. The experts were selected based on their clinical expertise, experience and interest in the problem being studied. The suggestions were discussed with the guide and the tool was finalized. Reliability for the tool was calculated by using Cronbac’s rank correlation formula.

DATA GATHERING PROCESS
The investigator herself administered the Structured Questionnaire for the pre-test. Everyday 20 samples were taken. The duration of data collection for pre-test was 30 minutes. Health teaching was given to these study groups after seventh day of the pretest; the post-test was conducted. Based upon the findings the researcher has prepared the master data sheet as per suggestion given by the statistician.

MAJOR FINDINGS OF STUDY AND DISCUSSION
The collected data was analyzed under various sections. The analysis was done by using descriptive and inferential statistics. The important findings were as follows:

Section I: most of the samples (55%) were in the age group 18-28 yrs and very few (0.8.33%) were in the age group 49 – 58yrs. Most of the samples who participated in study were females (53.33%). Majority of the people (51%) were graduates and few (21%) were primary educated. Most of the samples (43.33%) were in service and very few (.8%) were earning daily wages. Most of the samples (76.66%) were having monthly income of above Rs. 2,500 per month and very few (5%) earn below Rs. 500 per month. Almost same percentage of the people came to know the details about swine flu through newspapers and television.

SECTION II: Analysis of data related to effect of planned health teaching on the knowledge based on the correct answers in study group

The researcher applied paired ‘t’ test to know the difference between average scoring of before and after planned teaching to respondents. Since P value is less than 0.05 (P value = 0.00) there is a significant difference in the average score. The researcher can conclude at 5% level of significance and 59 degrees of freedom that planned teaching provided by them is really increasing the average score. It means planned teaching was effective.

The calculated ‘P’ value is 0.000 at 0.05 level of significance, which means that H0 is rejected and H1 is accepted. There is a significant difference between the average values of pre and post related to the knowledge of swine flu, which gives an interpretation, that there is a significant gain in knowledge score of the samples in the post-test phase. This indicates that the planned teaching is effective in increasing the knowledge of people regarding swine flu.

Section III: The findings on relationship of the selected variable of people show that, there is a significant association between age, educational qualification.

CONCLUSION
The health teaching on knowledge of swine flu found to be effective in increasing the knowledge in people. The
samples had a highly significant gain in knowledge after the planned teaching program.

In the age group of 18-28yrs. showed a gain in knowledge in all the content areas of planned teaching.

The planned teaching on knowledge of swine flu was found to be effective in enhancing to take the preventive measures for swine flu.

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A DESCRIPTIVE STUDY: PROBLEMS FACED BY FIRST YEAR BASIC B.S.C NURSING STUDENTS

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ABSTRACT:
This study was based on exploratory approach. The population was First Year Basic B.Sc. Nursing students in selected colleges of Nursing in Pune city. The sample size for the study was 150 students in selected Nursing Institutes. Inclusion criteria were only for fresher nursing students from selected colleges of Nursing in Pune city and who are willing to participate in the study.

The sampling technique used in the study was Non-Probability convenient Sampling. The tool was semi-structured questionnaires. The technique adopted was likert scale.

PROBLEM STATEMENT:
'A study to assess the adjustment problems faced by First Year Basic B.Sc Nursing students in selected colleges of Nursing in Pune city.'

INTRODUCTION:
Adolescence is the most important period in once life. It is a period of stress and strain, of day dreams, of intense affection and excitement the mind is pious and pure, free of all wickedness. The adolescent is still teen and lacks of maturity of thought and experiences. He and she is not aware of what is proper and what is improper and therefore is danger of going on the wrong path.

OBJECTIVES:
- To assess the adjustment problems faced by the first year Basic B.Sc. Nursing students in selected colleges of Nursing in Pune city.
- To find the association between selected demographic variables and the adjustment problem among the nursing students in selected colleges of Nursing in Pune city.

MATERIALS AND METHODS
The tool used for the data collection consisted of semi-structured questionnaire:

The development of the tool was a step by step procedure. The 40 semi-structured closed ended questionnaire was prepared for assessing the determining the adjustment problems among first year B.Sc. Nursing student.

Open ended question were prepared which are descriptive, narrative in nature. A semi structured questionnaire is prepared and will be used for data collection; questionnaire is a quick and generally inexpensive means of obtaining data from a large number of respondents. The semi-structured questionnaire is administered by the investigator herself. The duration of data collection is 60 to 90 minutes.

The tool used in this study is a use of likert scale. The likert scale is 4 rated scales in which
4- never,
3- some times,
2-most of times and
1- yes always.

Study instruments used by the researcher consisted of:-
Consent form, Semi structured questionnaire, which has two sections

Section I – It consisted of 11 items as demographical data to assess the adjustment problems faced by the first year Basic B.Sc. Nursing students of selected colleges of Nursing in Pune city.

Section II – Semi-structured questionnaire distributed among the first year Basic B.Sc. Nursing students of selected colleges of Nursing in Pune city.

Section II A-1) collection of information on the physical adjustment problems faced by the first year Basic B.Sc. Nursing students.

a. Open ended questions
b. Closed ended questions
Section II B-1) collection of information on the psychological adjustment problems faced by the first year Basic B.Sc. Nursing students.

a. Open ended questions
b. Closed ended questions

Section II C-1) collection of information on the social adjustment problems faced by the first year Basic B.Sc. Nursing students.

a. Open ended questions
b. Closed ended questions

c. After this the data collection tool is sent for the validation to 14 experts of various departments which include Sinhgad college of education co-ed,Bed,Narhe , and experts from field of Nursing i.e. Psychiatric nursing department ,Psychiatric department ,Education, Research, Statistics Psychology department and Sociology department on 16/09/10. On 29/9/10 I received all the tools back in which some of the experts have given their valuable advices/ suggestions.

d. The experts were selected based on their clinical expertise, experience and interest in the problem being studied. They were requested to give their opinions on the appropriateness and relevance of the items in the tool. Necessary modifications were made as per the expert’s advice. The area on allocating more weight-age to physical, psychological, social and economical section of the adjustment problems questionnaire was implemented as suggested by the experts. In section one, item number 9 were added to know about the total number of siblings. Rest of the questions remained the same except few modifications in choices given for items in demographic data.

e. On common agreement specific modification made and final tool was prepared with the help of Mrs.Monita Thochom Mental (Psychiatric) health Nurse.

MAJOR FINDINGS OF THE STUDY WERE:

- 147(98%) were between the age group of 17 – 19 years.
- Gender shows that 16 (10.66%) of the samples were male and 134 (89.33%) samples were female.
- Finding regarding religions Shows that majority of the samples 79 (52.66%) were belonged to Christian religion. 71 (47.33%) were belonged to Hindu religion.
- Type of family shows that 111 (74%) of samples were from nuclear family and 32 (21.33%) samples were belonged to joint family and 7 (4.66%) of samples were from extended family.
- Nationality shows that all 148 (98.66%) samples were of Indian nationality and 1 (0.66%) samples were of NRI nationality and 1 (0.66%) samples were foreigner. Fathers’ occupation shows that 61 (40.66%) of the students’ fathers were servicemen,30 (20%) students’ fathers were businessmen, 28 (18.66%) student’s fathers’ were farmers’, 31(20.66%) students’ fathers’ were from other occupations.
- Mothers’ occupation shows that 98 (65.33%) of the students’ Mothers’ were from other occupation, 36 (24%) student’s Mothers were servicewomen, 14 (9.3%) student’s mothers’ were farmers’, 2(1.33%) students’ Mothers’ were businesswomen.
- Family income shows that 84 (56%) of students’ family income was below Rs. 15,000 / month, 44 (29.33%) of students’ family income was between Rs. 15,000 – 25,000/ month, 12 (8%) of students’ family income was between Rs. 25,000 – 35,000/ month and above.
- Total number of siblings shows that 24 (16%) of samples were having 1 sibling, 76 (50.66%) of samples were having 2 sibling, 40 (26.66%) of samples had 3 sibling and 10(6.66)% samples were having 4 sibling. Maximum sample were samples had 2 siblings under study.
- Medium of instruction in Higher secondary school shows that majority of the samples 147(98%) had English language as their Medium of instruction in Higher secondary school, 3 (2%) samples were studied from other language.
- Native place shows that 80 (53.33%) of students were from urban area and 70 (46.66%) of students were from rural area.
- The 40 semi- structured closed ended questionnaire was prepared for assessing the determining the adjustment problems among first year B. Sc. Nursing student.
- Open ended question were prepared which are descriptive, narrative in nature. The tool used in this study is
a use of likert scale. The likert scale is 4 rated scales in which 4- never, 3- some times, 2-most of times and 1- yes always.

- It was noted that all the closed ended question on physical, psychological, social and economical adjustment problem. Most of the nursing students have moderate adjustment problems which is ranging from 50-100.
- Overall adjustment problems shows that 126 (84%) of students were having moderate adjustment problem and 24 (16%) of students were having severe adjustment problem.
- Mean and standard deviation calculated for the scores obtained from 40 closed ended questions asked in the semi structured questionnaire to 150 nursing students and the findings were mean (2.5) and standard deviation (1.34).
- Findings suggested that there is no significant association between selected demographic variables and the adjustment problems among the first year Basic B.Sc. Nursing students in selected colleges of Nursing of Pune city.
- Summary of the open ended questions for Physical adjustment Problem
- After getting admission to the First year Basic B.Sc. Nursing course, most of the student started a problem with hair fall and dandruff within two months, headache almost daily, loss of appetite within three month, loss of adequate sleep due to change in the physical environment, reduction in the weight within four months due to food and water problem, inadequate time for study due to more written assignments, started acidity due to stressors.
- Some of the students are not suffering from any physical adjustment problem.
- Summary of the open ended questions for Psychological adjustment Problem
- After getting admission to the First year Basic B.Sc. Nursing course, some of the student started a problem of feeling uncomfortable with new friends and teachers, unable to cope to with the discipline imposed by the college, always feeling lonely due to staying in the hostel, not communicating any problem with anyone.
- Most of the students are satisfied with their social relations as they have new groups for their study and other co-curricular activity, they feel free to talk with seniors rather than teachers so they are not facing any social adjustment problem.
- Summary of the open ended questions for economical adjustment Problem
- After getting admission to the First year Basic B.Sc. Nursing course, some of the student started with a problem of managing monthly expenditure from pocket money only, cannot arrange money immediately to purchase books, uniform, can not offered watching cinema and having outside food.
- Few of the students have arranging their fees by taking educational loan.
- Most of the students are able to manage their expenditure from their pocket money only and enjoy watching cinemas with their friends as they are not facing any economical adjustment problem.

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KNOWLEDGE AMONG TEACHERS RELATED TO BEHAVIORAL PROBLEM IN SCHOOL CHILDREN.

MR. PRIYESH BHANWARA
M.Sc. Community Health Nursing.

ABSTRACT:
In the present study A Quasi Experimental Study a research design was used to achieve the objectives of the study. The study was conducted in selected schools of Pune city. In the present study the sample comprised of 60 people. A structured questionnaire knowledge regarding behavioural problem was prepared to study the sample. Descriptive and inferential statistics had been used to analyze the data obtained through interviews. This study indicates that the planned teaching is effective in increasing the knowledge of teachers regarding behavioural problem.

Problem statement:
‘Study to assess the effect of planned teaching among the school teachers regarding behavioural problem in the selected schools of PCMC in Pune city’

INTRODUCTION:
Children are the wealth of tomorrow; take care of them if you wish to have a strong India, every ready to meet various challenges. (Pandit Jawaharal Nehru)

Children are one third of our population & all of our future. In order to develop a healthy society, it is important that we have healthy children. (Shetty, 2009)

OBJECTIVES OF THE STUDY
1. To identify the existing knowledge among school teachers related to behavioural problem in school children.
2. To determine pre-test & post-test knowledge related to the behavioural problem in school children among teacher.
3. To find a relationship between the level of knowledge of school teachers with selected demographic variables.

HYPOTHESIS/ RESEARCH QUESTION
Ho- There will be no significant difference between pre-test and post-test knowledge score.
H1- There will be significant difference between pre-test and post-test knowledge score.

RESEARCH METHODOLOGY
A quasi experimental research design was used to achieve the objectives of the study. The study was conducted in selected schools of Pune city. The samples were teachers all the people (male and female). Sample size was 60. A non probability convenient purposive sampling technique uses Convenient sampling method.

TOOLS AND TECHNIQUES
The tool for the study was prepared by referring to books, internet and related researches. Blue print for the sections was prepared and then the items were finalized. For each section a separate criteria checklist was prepared.

Table 8.1: Incidence of behavioral problems in school children (yearly)

<table>
<thead>
<tr>
<th>S NO.</th>
<th>BEHAVIORAL PROBLEMS</th>
<th>INDIA</th>
<th>MAHA RASHTRA</th>
<th>PUNE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Pica</td>
<td>1167</td>
<td>418</td>
<td>132</td>
</tr>
<tr>
<td>2.</td>
<td>Temper Tantrum</td>
<td>2760</td>
<td>559</td>
<td>54</td>
</tr>
<tr>
<td>3.</td>
<td>School phobia</td>
<td>524000</td>
<td>19900</td>
<td>1275</td>
</tr>
<tr>
<td>4.</td>
<td>Sleep disorders</td>
<td>238000</td>
<td>24000</td>
<td>530</td>
</tr>
<tr>
<td>5.</td>
<td>Anti social behavior</td>
<td>1340000</td>
<td>57000</td>
<td>12400</td>
</tr>
<tr>
<td>a.</td>
<td>Stealing</td>
<td>278000</td>
<td>19800</td>
<td>1113</td>
</tr>
<tr>
<td>b.</td>
<td>Lying</td>
<td>748000</td>
<td>25600</td>
<td>10119</td>
</tr>
</tbody>
</table>
Planned teaching was prepared in English language. The language of the teaching was kept as simple as possible. The Planned teaching titled “Behavioural Problems in School Children”

**Validity and reliability**

The validity was established by experts from different specialties i.e. from Community Health Nurses, Medical-Surgical Nurses, Pediatric Nurses, Mental Health Nurses and Preventive Social Medicine and Pediatric Department and Statistician, Educationalists and School Psychologist. The experts were selected based on their clinical expertise, experience and interest in the problem being studied. The suggestions were discussed with the guide and the tool was finalized. Reliability for the tool was calculated by using Cronbac’s rank correlation formula.

**Data gathering process**

The investigator himself administered the structured interview questionnaire for the pre-test. Everyday 10 samples were taken for pre-test respectively. The duration of data collection for pre-test was 30 minutes. Teaching was given to these study groups by keeping the language simple.

The instruction about post-test was given to the respective participants, after the seventh day of the pre-test.

**Major findings of study and discussion**

The collected data was analyzed under various sections. The analysis was done by using descriptive and inferential statistics. The important findings were as follows:

Majority (45%) of the teachers were from the middle age group of 26-45 years. Majority of samples 88.34 % were females. Most of the samples were in the educational qualification of B. Ed. 40 % and only 3.34 % had M. Ed. education qualification. Majority of the teachers 86.66 % were married. Most of the samples (53.33 %) were in the Designation of Class Teacher. Majority of the teachers 38.33 % had 1-5 years teaching of teaching experience and a lesser number of teachers 20 % had above 15 years of teaching experience. Majority of the teachers 55 % had previous knowledge about behavioural problem in children and rest of them i.e. 45 % had no previous knowledge about behavioural problems in children. 33.33 % teachers had attended workshops or course related to learning of behavioural problem in school children.

Majority (93.34%) of the school teachers in pre-test of the experimental had an average knowledge score (8-14). Whereas in post-test a majority 75% of the school teachers had a good knowledge score (15-20).

The researcher applied paired ‘t’ test to know the difference between the average scoring of before and after planned teaching to respondents. Since P value is less than 0.05 (P value = 0.00), there is significant difference in the average score. The researcher can conclude at 5% level of significance and 59 degrees of freedom that planned teaching provided by them is really increasing the average score. It means planned teaching has proved to be effective.

The calculated ‘P’ value is 0.000 at 0.05 level of significance, which means that H0 is rejected and H1 is accepted. There is a significant difference between the average values of pre and post, related to behavioural problem in school children. This gives an interpretation, that there is a significant gain in the knowledge score of the samples in the post-test phase. This indicates that the planned teaching is effective in increasing the knowledge of the school teachers regarding behavioural problem seen in the school children.

The findings on relationship of the selected variable of School teachers show that, there is a significant association

**CONCLUSION:**

The various findings of the study show that the knowledge regarding behavioural problem in School children has been improved through planned teaching. There is an association between the knowledge level and variables such as age, designation and years of experience.

This study has shown that the knowledge in school teachers about the behavioural problem in School children is quite good, which can be updated through School teaching.

The study has provided the importance of having a School Health Nurse, who would place more importance on preventive, promotive and curative care too.
REFERENCES:

- Basavantappa BT, “Nursing theories”, Jaypee brothers, New Delhi first, edition Pp- 190-199
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