International Journal of Nursing and Medical Science 2022:11(1) 01-05

IJNMS ISSN: 2454-6674

INTERNATIONAL JOURNAL OF NURSING AND MEDICAL SCIENCE

Nursing Education Health Science Research

PANACEA INTERNATIONAL JOURNAL

PRL PUBLISHER

Original research Article Volume 11 Issue 1 Jan 2021

EVALUATE THE EFFECTIVENESS OF COMPUTER ASSISTED TEACHING ON THE LEVEL OF KNOWLEDGE REGARDING THE EFFECTS OF JUNK FOODS ON HEALTH AMONG ADOLESCENT CHILDREN

[1]Dr. Peter Jasper Youtham and [2]Mr. Manish Sharma

[1]Research Guide, [2]Ph.D. Scholar

Abstract

In This Pre Experimental Design, Sample Consisted Of 120 Adolescent Children Selected By Non Probability Purposive Sampling Technique. Self Structure Questionnaire Tools Was Used For Assessing The Knowledge Of Adolescent Children Pre Test Was Conducted By Using The Same Structured Questionnaire And After 30 Days Post Test Was Conducted Using The Same Structured Questionnaire For Assessing The Effectiveness Of Computer Assisted Teaching Regarding The Effects Of Junk Foods On Health Mean Percentage Of The Knowledge Score Of Post Test Mean 22.58 Was Higher Than Mean Pre Test 5.73 The 'T' Value For Total Pre Test And Post Test Was 26.6 The Data Was Analyzed In Terms Of Descriptive And Inferential Statistics.

INTRODUCTION

Healthy eating has been replaced by the new food mantra "JUNK FOOD". Malnutrition includes anything quick, tasty, simple and fashionable. It seems to cover every age, every race and the new entry of children. The children grow up to be very hungry. He may come to the table ready to eat anything.

Malnutrition is an unhealthy term used for other foods that are thought to be low or non-nutritious (i.e., "high calorie content"); in nutritious products, but also contain ingredients that are considered unhealthy if eaten regularly; or for those considered unhealthy to be eaten at all. The name was coined by Mr. Michael Jacobson, Director of the Center for Science in the Public Interest, in 1972, which is why these foods are

called waste products that contain high levels of refined sugar, white flour, trans fats and polyunsaturated fats. fats, salts, and many food additives such as monosodium glutamate and tartrazine; at the same time, it is deficient in protein, vitamins, essential minerals, fiber, among other healthy properties. These foods have a small enzyme that produces vitamins and minerals but contain high levels of calories in your area. Foods high in fat, sodium, and / or sugar and high-calorie but low in calories are commonly referred to as junk food. Instead, junk food is easy to carry, buy and eat.

Malnutrition is usually a ready-to-eat diet that contains high levels of saturated fat, salt, or sugar, with little or no fruit, vegetables, or dietary fiber and is considered to have little or no health benefits. Common unhealthy foods include light salty foods such as chips (crisps), sweets, amber, many delicious desserts, fast fried foods and carbonated beverages (soda) and alcoholic beverages.

Eating properly and exercising are not just diet or exercise. These are the keys to a healthy lifestyle. With healthy habits we can reduce the chances of developing many chronic diseases such as heart disease. Many unhealthy foods are high in carbohydrates, low in fiber, high in fat and low in vitamins. Junk Food includes those foods that do not add any value to a person's diet. Here the number means the essential elements, vitamins and minerals. Street food and fast food are also treated in the same way as waste.

Objectives

- To assess the pre and post test level of knowledge regarding the effects of junk foods on health among adolescent children in selected school.
- To evaluate the effectiveness of computer assisted teaching on the effects of junk foods on health in terms of gaining knowledge among adolescent children in selected school.
- To find out the association between the post test level of knowledge regarding the effects of junk foods on health among adolescent children and their selected demographic variables.

Hypothesis:

The hypotheses will be tested at 0.05 level of significance.

H1. There is a significant difference between the pre test and post test level of knowledge regarding the effects of junk foods on health among adolescent children

H2. There is a significant association between the post test levels of knowledge regarding the effects of junk foods on health among adolescent children with their selected demographic variables.

Methods and Material

An extensive review of literature was undertaken. The conceptual framework based on Betralanff's theory (1968) the general system theory An experimental research approach was used to assess the knowledge Computer Assisted Teaching Regarding The Effects Of Junk Foods On Health among adolescent children.

A pre experimental research design was Considered Appropriate For The Study "Evaluate The Effectiveness Of Computer Assisted Teaching On The Level Of Knowledge Regarding The Effects Of Junk Foods On Health Among Adolescent Children " One group pre test and post test design was used. In order to measure the content validity of the tool, the questionnaire schedule was given to the 12 experts from the field of child health Nursing and community health nursing. The experts were chosen on the basis of their clinical expertise, experience, qualification and interest in the problem area. The tool was found reliability of tool was calculated with split half method and found 0.87 which is statically reliable for the present study.

RESULT

The major findings of the study revealed that It was inferred that among 120 participants (92%) had inadequate knowledge and (8%) had moderately adequate knowledge and none of them had adequate knowledge. The post test was conducted after administration of computer assisted teaching regarding effects of junk food on health among adolescent children. On the seventh day post test was conducted by using the same questionnaire. The post test knowledge scores showed a significant difference. Majority of them (80%) gained adequate knowledge and (20%) gained

moderately adequate knowledge which showed that computer assisted teaching regarding effects of junk food on health among adolescent children was effective. The obtained pre test over all mean score was 5.73, SD 2.9, Mean percentage was 9.55% and range was 12. The obtained post test over all mean score was 22.58,SD was 2.8, Mean percentage was 37.63% and range was 8 .The mean difference between the pre test and post test score was 16.85 and the obtained 't' value 29.6 was significant at P< 0.05 level.

It was evident that compared to pre test knowledge score there is significant increase in the post test knowledge scores. Hence the research Hypothesis (H1) is accepted. Therefore it can be interpreted that the computer assisted teaching was effective in improving the knowledge of adolescent children regarding effects of junk foods on health.

It was inferred that the selected demographic variables such as Age, Gender, Religion, Class of studying, Type of family, Monthly income, Education of the father, Education of the mother, occupation of the father, occupation of the mother, were not significant with the post test level of knowledge at P>0.05.Hence the Hypothesis 2 was accepted.

CONCLUSION

The data analysis show that Majority 120 participants (92%) had inadequate knowledge and (8%) had moderately adequate knowledge and none of them had adequate knowledge. The post test was conducted after administration of computer assisted teaching regarding effects of junk food on health among adolescent children. On the seventh day post test was conducted by using the same questionnaire. The post test knowledge scores showed a significant difference. Majority of them (80%) gained adequate knowledge and (20%) gained moderately adequate knowledge which showed that computer assisted teaching regarding effects of junk food on health among adolescent children was effective.

The data revealed that computer assisted teaching programme regarding effects of junk foods on health.

REFERENCE

1. Dr. NaheedVai, (2013), Prevalence Of Fast Food Intake Among Urban Adolescent Students, The International Journal Of Engineering And Science, Volume 2 Issue 1, Page No: 353-359.
2. Hanan A. Alfawaz, (2012), The Relationship Between Fast Food Consumption and BMI Among University Female Students, Pakistan journal of nutrition 11(5): 406-410 .
3. Alphonsus N Onyiriuka, Amarabia N Ibeawuchi, Rita C Onyiruka, (2013), Assessment Of Eating Habits Among Adolescent Nigerian Urban Secondary Schoolgirls, srilanka journal of child health ,42(1):20-26
4. Massimo Santinello,Carine A. Vereecken, Chiara Verzeletti, (2009), Soft Drink Consumption In Adolescence: Association With Food – Related Lifestyles And Family Rules In Belgium Flanders And The Veneto Region Of Italy, European Journal Of Public Health, vol.20,no 3, page No : 312-317.
5. Ms. Vandana Sharma, (2013), Adolescents Knowledge Regarding Harmful Effects of Junk Food, IOSR journal of nursing and health science, volume 1, issue 6 page No: 1-4
6. Shanthy A. Bowman Steven L.Gortmaker ,Cara B. Ebbeling, (2004), Effects Of Fast- Food Consumption On Energy Intake And Diet Quality Among Children In A National Household Survey, Fast Food Energy Intake, And Diet Quality In Children, vol 113 no 1. Page No: 112- 118.
7. Dr. Radhana Grupta and Satyabhama. J. (2009), Health Action , Page No: 3-19
8. Little Flower A, Rashmi Hp, (2003), Prevalence Of Obesity Among Urban High School Ind J Comm Med. Page No: 187-190.
9. Camilla ChermontP.Estima Sonia Et Al Beverages And Soft Drink Consumption By Adolescents From A Public School. Paediaan Volume 29 Number 1.January.