



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

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Abstract

In this pre experimental design, sample consisted of 60 adolescent children selected by non probability convenient 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 15 days post test was conducted using the same structured questionnaire for assessing the effectiveness of computer assisted teaching regarding the effects of fast food on health mean percentage of the knowledge score of post test mean 21.32 was higher than mean pre test 12.91 the 't' value for total pre test and post test was 24.61 the data was analyzed in terms of descriptive and inferential statistics.

INTRODUCTION

Food is essential for the growth and development of the baby. A child cannot live without food. 'Good food means the right kind of food that is healthy; it is nutritious. It contains the nutrients that the body needs in order to thrive and stay healthy. We must choose the right foods in our daily diet to stay healthy for our baby. The socio-economic and cultural contexts of our society are changing. Our children's eating habits are also changing in the face of such changes. Many children love externally cooked food. Some observers even hesitate to change their eating habits. They agree on foods that are good for their children even if they like it. 'Fast food ready to be eaten immediately' refers to fast food. Fast food and junk food are often used interchangeably. Most junk food is fast food as it is prepared and served quickly. But not all fast foods are unhealthy, especially if they are cooked nutritious. The fast food culture is a growing trend among children. 'Foods high in sugar / fat / salt and low in protein, fiber, vitamin and mineral content

are called unhealthy foods'. Easy availability, taste, parenting work and marketing strategies that make them popular among children. One important feature of the fast food restaurant is that it is used to increase service speed and is positioned in the same way to reduce waiting time. So customers can save time by taking their food. Here, the food menu is limited in price. It has been found that on a typical day in the United States, about 30 percent of children aged 4-19 eat fast food.

Objectives

- To assess the pre and post test level of knowledge regarding the effects of fast food on health among adolescent children in selected school.
- To evaluate the effectiveness of computer assisted teaching on the effects of fast food 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 fast food 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 fast food on health among adolescent children

H₂. There is a significant association between the post test levels of knowledge regarding the effects of fast 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 Roy's adaptation theory the An experimental research approach was used to assess the knowledge Computer Assisted Teaching Regarding The Effects Of Fast 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 Fast 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 0.91 which is statically reliable for the present study.

RESULT

The major findings of the study revealed that It was inferred that among 60 participants (84%) had inadequate knowledge and (16%) 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 fast food on health among adolescent children. On the 15 day post test was conducted by using the same questionnaire. The post test knowledge scores showed a significant difference. Majority of them (91%) gained adequate knowledge and (9%) gained moderately adequate knowledge which showed that computer assisted teaching regarding effects of fast food on health among adolescent children was effective. The obtained pre test over all mean score was 12.91,. The obtained post test over all mean score was 21.32. The mean difference between the pre test and post test score was 8.41 and the obtained 't' value 24.61 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 fast 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 among 60 participants (84%) had inadequate

knowledge and (16%) 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 fast food on health among adolescent children. On the 15 day post test was conducted by using the same questionnaire. The post test knowledge scores showed a significant difference. Majority of them (91%) gained adequate knowledge and (9%) gained moderately adequate knowledge which showed that computer assisted teaching regarding effects of fast food on health among adolescent children was effective.

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

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