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A STUDY TO ASSESS THE EFFECTIVENESS OF TEACHING PROGRAMME ON KNOWLEDGE REGARDING DENGUE FEVER AMONG PEOPLES LEAVING IN SELECTED AREA OF RAJASTHAN

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Back ground:

The incidence of dengue has increased dramatically worldwide in recent decades, with cases reported by the WHO increasing from 505,430 cases in 2000 to 5.2 million in 2019. The vast majority of cases are asymptomatic or mild and self-limiting, thus the number of cases dengue fever is underestimated. Many cases are also misdiagnosed as other febrile illnesses.

One model estimate puts 390 million dengue virus infections per year, of which 96 million are clinically evident. Another dengue prevalence study estimates that 3.9 billion people are at risk of dengue virus infection.

Dengue is considered a year-round and nationwide risk in India, with the highest risk usually occurring from June to September. Authorities reported approximately 177,695 cases in 2021 and 32,796 cases in 2020.

A dengue vaccine is available in some countries. It is only recommended for people with a history of dengue infection and in a country with a high dengue burden. Dengue fever is transmitted by the bite of infected mosquitoes. Symptoms of dengue include a sudden onset of fever and at least one of the following: severe headache, severe pain behind the eyes, muscle and/or joint pain, rash, easy bruising, and/or bleeding from the nose or gums. Symptoms usually appear 5-7 days after being bitten, but can also develop up to

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10 days after exposure. Dengue fever can progress to a more severe form known as dengue hemorrhagic fever (DHF). DHF can be fatal if not recognized and treated early.
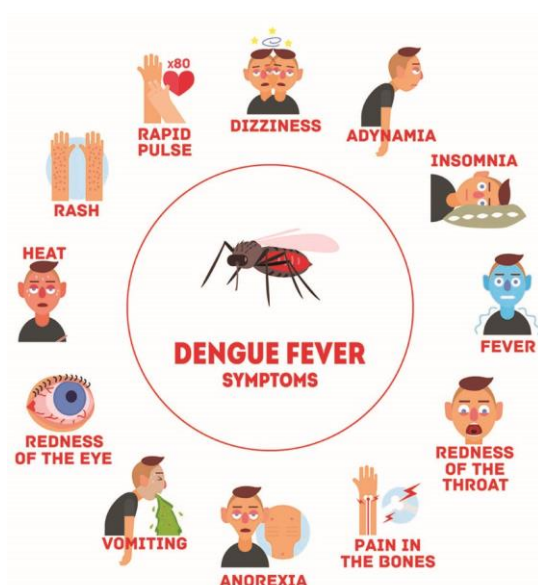
Dengue Cases and Deaths in the Country since 2017

Sl. No.	Affected States/UTs	2017		2018		2019		2020		2021		2022 (Prov.till 31st Oct)	
		C	D	C	D	C	D	C	D	C	D	C	D
1	**Andhra Pradesh**	4925	0	4011	0	5286	0	925	0	4760	0	4754	0
2	**Arunachal Pradesh**	18	0	1	0	123	0	1	0	7	0	163	0
3	**Assam**	5024	1	166	0	196	0	33	0	103	0	191	0
4	**Bihar**	1854	0	2142	0	6712	0	493	2	633	2	9374	7
5	**Chattisgarh**	444	0	2674	10	722	0	57	0	1086	0	2436	0
6	**Goa**	235	0	335	1	992	0	376	0	649	0	429	0
7	**Gujarat**	4753	6	7579	5	18219	17	1564	2	10983	14	4811	2
8	**Haryana**	4550	0	1898	0	1207	0	1377	0	11835	13	4551	12
9	**Himachal Pradesh**	452	0	4672	7	344	2	21	0	349	0	2563	0
10	**J & K**	488	0	214	0	439	0	53	0	1709	4	4927	10
11	**Jharkhand**	710	5	463	1	825	0	79	0	220	1	123	0
12	**Karnataka**	17844	10	4427	4	16986	13	3823	0	7393	7	7317	4
13	**Kerala**	19994	37	4083	32	4652	16	4399	5	3251	27	3446	24
14	**Lakshadweep**	0	0	0	0	0	0	0	0	1	0	56	0
15	**Madhya Pradesh**	2666	6	4506	5	4189	2	806	0	15592	11	1669	0
16	**Meghalaya**	52	0	44	0	82	0	4	0	129	0	15	0
17	**Maharashtra**	7829	65	11011	55	14907	29	3356	10	12720	42	6330	5

18	**Manipur**	193	1	14	0	359	0	37	0	203	0	313	2
19	**Mizoram**	136	0	68	0	42	0	67	0	83	0	437	0
20	**Nagaland**	357	0	369	0	8	0	1	0	24	0	68	0
21	**Odisha**	4158	6	5198	5	3758	4	496	0	7548	0	5728	0
22	**Punjab**	15398	18	14980	9	10289	14	8435	22	23389	55	5139	5
23	**Rajasthan**	8427	14	9587	10	13706	17	2023	7	20749	96	9283	6
24	**Sikkim**	312	0	320	0	444	0	11	0	243	1	209	0
25	**Tamil Nadu**	23294	65	4486	13	8527	5	2410	0	6039	8	4771	4
26	**Tripura**	127	0	100	0	114	0	24	0	349	0	44	0
27	**Telangana**	5369	0	4592	2	13331	7						

Objectives:

- To assess the level of knowledge Regarding Dengue Fever Among Peoples Leaving in Selected Area of Rajasthan.

- To find the effectiveness between post-test knowledge regarding Dengue Fever Among Peoples Leaving In Selected Area Of Rajasthan with selected demographic variables.

Design: Pre experimental- one group pre test and post test was used.

Setting: The study was conducted in Rajasthan**.**

Sample size: The total sample size was 600 Peoples residing in selected area of RJ

Sampling technique: Simple random sampling technique was used to select the sample.

Methods: Pre test was done by using structured questionnaires a it took around 30 minutes after teaching programme was given by using LCD Projector on Dengue Fever was done and post test was done by using the same scale on 8th day.

Findings: From

the findings of the study it can be concluded that most (61%) of the were in age group of 18-22 years. Most (69%) of the People were female. Most (41.67%) of the People knew the information through television . The pre test knowledge level of mean was assessed among peoples mean was 11.58 standard deviation was 1.22 that shows the People were in poor knowledge.. After teaching programme, the post test knowledge level of mean was 21.2, and standard deviation shows the People knowledge level was highly improved. And difference in mean percentage of pre and post test knowledge level was 39% and difference in mean percentage of pre and post test attitude level was 30% it seems to be the study was effective to the People regarding management of dengue hemorrhagic fever. Comparison of pre and post test lev

el of knowledge and attitude level was analyzed by using paired 't' test. Calculated 't' value was 0.9 which was greater than table value. So it was significant at P.0.05% level..The calculated ' r' value was higher than the table value. Hence it was a positive correlation between knowledge and attitude.

CONCLUSION

Dengue has evolved as a worldwide life-threatening public health problem affecting approximately 2.5 billion individuals in more than 100 countries. The physician should be aware of the various clinical manifestations of this condition and ensure a timely and adequate treatment plan. Future directions in the fight against this terrible disease focus on mosquito control methods, the development of vaccines and antiviral drugs.

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