

7-1-2017

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Recommended Citation

Bhavyashri; Jose, Tessy Treesa Dr; and Nayak, Shalini Devendra Ms (2017) "A study to determine the effectiveness of Mental Health Promotion Program (MHPP) among students of selected pre-university colleges of Udupi district," *Manipal Journal of Nursing and Health Sciences*: Vol. 3: Iss. 2, . Available at: <https://impressions.manipal.edu/mjnhs/vol3/iss2/8>

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Cover Page Footnote

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A study to determine the effectiveness of Mental Health Promotion Program (MHPP) among students of selected pre-university colleges of Udupi district

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Abstract

Adolescence is the phase of transition between the childhood and adulthood, which leads to changes in physiological and psychological aspects. The present study pointed out the effectiveness of mental health promotion program on pre-university students. It brings positive outlook in their future life in various aspects. **Objectives:** Determine the knowledge of Pre-university students on mental health promotion and evaluate the effectiveness of Mental Health Promotion Program (MHPP) among pre-university students. **Materials and Methods:** Research design adopted in this study was quasi experimental pre-test and post-test control group design with an intervention to assess the effectiveness of program. Data was collected using demographic pro forma and knowledge questionnaire on mental health promotion. Data analysis was done using SPSS software 16 version. **Results:** In the pre-test, most 95.71% of the students had poor knowledge, 4.29% students had average knowledge scores in mental health promotion knowledge questionnaire. In the post-test, most of 52.85% had poor knowledge, 30% had average knowledge and 17.15% had good knowledge scores. **Conclusion:** Mental health promotion program was very effective in boosting the adolescent's knowledge on mental health promotion. In present study, only 8.57% students had poor knowledge in the post-test of experimental group and in control group most of them (97.14%) had poor knowledge scores on MHPP.

Key words: Mental Health Promotion, adolescent, pre-university students, knowledge

Introduction

Adolescence is a crucial period for any individual to establish values, attitudes, and character building. This is also an empirical truth that growth and development, in terms of physiological, psychological and sociological aspects is determined the childhood experience, where family, school and society play a major role. The situation demands high expectations and smartness, irrespective of understanding the attitude, ability and interest of children, which may result in conflict and mental disorders. Adolescents are under tremendous pressure

and are forced to knock the doors of psychiatrists and mental health specialist. Mental wellbeing of every child is very important. Many children may have problems with mental health, which can result in serious problems. Mental health issues are highly prevalent among adolescents. Many of them do not receive needed care, even though there are resources available for the same. School mental health services are essential network points for youths with problems of mental health. But their competency and the facility available to provide comprehensive treatment are confined to particular area. These school mental health services may be helpful to the adolescents if specialized mental health clinics are established, which could highlight the relevance of school mental health services. The purpose of the study was to assess the existing knowledge of students of pre-university towards mental health promotion. The study would promote their knowledge through mental health promotion program.

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How to cite this article: Bhavyashri, Jose, T. T., & Shalini. (2017). Effectiveness of mental health promotion program. *Manipal Journal of Nursing and Health Sciences*, 3(2), 38-42.

Materials and Methods

The present study aimed to assess the knowledge of pre-university students and evaluate the effectiveness of MHPP in Udupi and Malpe Government pre-university colleges. Objectives of the study were to determine the knowledge on mental health promotion among pre-university students as measured by knowledge questionnaire and to evaluate the effectiveness of the MHPP on knowledge on mental health promotion of pre-university students.

To achieve the objectives, evaluative approach was used. Research design adopted for this study was quasi experimental pre-test and post-test control group design with an intervention of assessing the effectiveness of program on mental health promotion. Based on the findings of pilot study, sample size was calculated and estimated as 70. Experimental and control group had 35 students each from first year pre-university course (PUC). Ethics committee clearance was obtained from the institutional ethics committee and permission was obtained from the principals of the government pre-university colleges, where the study was conducted. An informed consent was taken from the participants during the study.

Data were collected using demographic pro forma and knowledge questionnaire on mental health promotion. Background pro forma consisted of items such as age in years, sex, residential area, education of parents, number of siblings, knowledge of mental illness, sources of knowledge, and history of mental illness in family, etc. Knowledge questionnaire on mental health consisted 26 multiple choice questions. It included the areas like meaning of health, purpose of awareness program, mental health promotion, adolescent depression, suicide, schizophrenia, levels of prevention, complication of alcoholism, stress management, etc. Scores were divided into three categories like poor, average, and good and 26 was the maximum possible score.

The tools were given to seven experts from the field of psychiatry, psychiatry social work, psychiatric nursing, community health nursing, clinical psychology, and child health nursing for content validity. The modifications were made as per experts' suggestion, by adding two questions in socio demographic pro forma, three items were simplified and seven items were removed in knowledge questionnaire on mental health

promotion. MHPP had three sessions of one hour, including activity session. Topics like post-traumatic stress disorders and complications of alcohol were simplified and techniques of stress management were added.

Reliability of knowledge questionnaire on mental health promotion was established by administering the tool to 20 samples of Kemmannu government pre-university college, Udupi and calculated the reliability using split half method and Spearman Brown prophecy formula and it was found to be $r = .863$. MHPP had three sessions, one hour each including activity sessions like lecture, discussion and power point presentation along with activities.

Pilot study was conducted in Brahmavara government pre-university college, Brahmavara. It was conducted among 20 students with 10 each in intervention group and control group. The subjects were assigned to intervention group and control group through lottery method. Initially, questionnaire was administered to both experimental and control group and thereafter intervention was given to the experimental group. Post-test was done on eighth day by administering the same questionnaire to both the group to see the effectiveness of MHPP. The study design was found to be feasible.

The data were analyzed in terms of objectives of the study using descriptive and inferential statistics by using SPSS package. All the data were tested at 0.05 levels of significance. The significance between the pre-test and post-test knowledge score was computed using paired sample 't' test, since the data followed normal distribution.

Results

Data presented in Table 1 show that, 22 (62.9%) and 28 (80%) males were present in both experimental and control group respectively. Most (51.4%) of students in experimental group belonged to semi-urban area and in control groups belonged to rural area. Fathers of 20 students (57.1%) in experimental group had high school education whereas; in control group seventeen students' (48.6%) fathers had only primary education. Majority (68.6%) of students' mothers in experimental group had high school education where as in control group, 48.6% had primary education. Fourteen percentage of subjects in experimental and 11 (31.42%) in control group had two siblings. In

experimental group, 20 (57.1%) and in control group 18 (51.4%) students have heard of mental illness before. The source of information for ten students (34.5%) were from social media in experimental as well as in control group and for eight students (50%) television

was the source of information. In both experimental and control group, there was no history of mental illness in family members.

Knowledge on mental health promotion

Table 1:

Distribution of Sample Characteristics in Frequency and Percentage

N = 70

Sample characteristics	Experimental group (n=35)		Control group(n=35)	
	Frequency	Percentage	Frequency	Percentage
Age in years				
15 – 16	26	74.28	14	40
17 – 18	09	25.72	21	60
Sex				
Male	22	62.9	28	80
Female	13	37.1	07	20
Residential area				
Rural	08	22.9	18	51.4
Semi urban	18	51.4	06	17.1
Urban	09	25.7	11	31.4
Education of father				
Illiterate	-	-	07	20.0
Primary	10	28.6	17	48.6
High school	20	57.1	09	25.7
Pre-university college	05	14.3	01	2.9
Graduate	-	-	01	2.9
Education of mother				
Illiterate	01	2.9	07	20.0
Primary	9	25.7	17	48.5
High school	24	68.6	9	25.7
Pre-university college	01	2.9	01	2.9
Graduate	-	-	01	2.9
Number of sibling				
Only child	03	8.57	01	2.85
One	11	31.43	09	25.71
Two	14	40	11	31.42
Three	07	20	09	25.71
More than three	-	-	05	14.28
Knowledge of mental illness before				
Yes	20	57.1	18	51.4
No	15	42.9	17	48.6
If yes specify the source*				
Television	07	24.1	09	50
Social media	10	34.5	08	44.4
Website	01	3.4	-	-
Others	02	6.9	01	100
History of mental illness in family				
Yes	-	-	-	-
No	35	100	35	100

*More than one response

This section describes the knowledge on mental health promotion of pre-university students in terms of good, average, and poor scores. Figure 1 shows that in the pre-test scores, larger part (95.71%) of the students had poor knowledge and 4.29% students had average knowledge on mental health promotion.

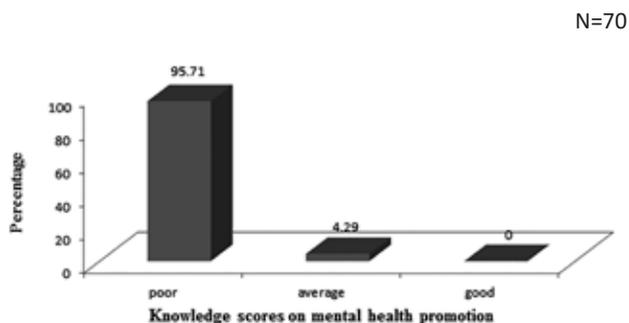


Figure 1: Bar diagram showing knowledge scores of pre-university students on mental health promotion

Table 2: Mean, SD, Standard Error Mean, Mean Difference, 't' Value and p Value of Post-Test Score of Knowledge of Experimental and Control Group.

Knowledge	Mean	Std.error mean	SD	Mean difference	t value	df	p value
Experimental group (n=35)	19.02	0.63	3.73	12.97	14.66	68	.001
Control group (n=35)	6.05	0.61	3.66				

Significance at <.05

The data in Table 2 shows that 't' value is 14.66, which is significant at 0.05 level. Since p value is 0.001 in experimental and control group, the difference between the mean pre-test and the post-test is statistically significant. Hence, the null hypothesis was rejected and the research hypothesis was accepted. It infers that the MHPP was effective by increasing the knowledge level on mental health promotion among the adolescent in pre-university students.

Discussion

In pre-test scores, a majority of 95.71% of the students had poor knowledge and 4.29% students had average knowledge scores in mental health promotion knowledge questionnaire. In post-test of knowledge scores, 52.85% had poor knowledge, 30% had average knowledge and 17.15% had good knowledge scores.

Difference between mean pre-test and post-test knowledge scores were statistically significant (p = .001) in experimental group, hence the null hypothesis was rejected and accepted the research hypothesis. It indicates that there is significant improvement in knowledge score of students after intervention. This study shows that in experimental group majority, 32 (91.43%) of the students had poor knowledge and 8.57% students had average knowledge. In control group 100% had poor knowledge. The present study findings are contradictory with the results of study conducted by Campose, Dias & Palha (2014) in Portugal, on finding gap to promotional programs for mental health among youngsters. In pre-test knowledge, 38.8% of the participants were not aware of mental health problems. Twenty five percent of the adolescents did not know any person with mental health problem and most of them had poor knowledge and were unaware of mental illness.

During the pre-test, majority of pre-university students had poor knowledge score and poor psychological wellbeing. After the MHPP, during the post-test, among 35 samples of experimental group, 20 students were having good, 12 having average and 3 were in poor knowledge in experimental group, where as in post-test of control group, most of (97.1%) them had poor knowledge and (2.9%) had average knowledge, which indicates the strength and success of the intervention program. Differences between mean pre-test and post-test knowledge scores were statistically significant in experimental group (p=.001). A similar study was conducted by Sahare, (2012) on implementation and impact of life skill development program among adolescents, in Pune. The sample size of the study was 54 students, out of these 30 were males and 24 were females. The sample was collected from the Epiphany English medium school, Pune. Scores of the subjects i.e. pre- and post-training were compared. It is noticed that after the interactive sessions, there was improvement in ability to develop life skills, like problem solving, communication skill, and interpersonal skills.

Conclusion

The MHPP programs are essential. This study proved that adolescents are not having adequate knowledge on mental health promotion. The teaching program along with activity sessions helped them to gain knowledge

on mental health promotion. During the post-test among 35 samples of experimental group, 20 (57.1%) students were having good, 12 (34.30%) in average and 3 (8.6%) were in poor knowledge scores on mental health promotion program, where as in post-test of control group most of them, 34 (97.1%) students had poor knowledge, only 1 (2.9%) student had average knowledge score. Adolescents learned new information through the MHPP. Thus, MHPP programs will help in improving the knowledge towards mental health promotion among pre-university students.

Acknowledgements

We express our thanks to Dr Anice George, Dean, MCON, Manipal and the Principal of Government PU Colleges for giving permission to conduct the study.

Sources of support: None

Conflict of interest: None declared

Source of support in form of grants: None

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