Effectiveness of Health Education on Knowledge Regarding Bad Impact of Video Game Among Teenager Students In Selected School of The City – A Pre-Experimental Study

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Abstract: **The researcher adopted Quantitative approach with one group pre-test post-test design. 50 teenager student's 7ths, 8th, 9th was selected non-probability convenient sampling technique include base on health education bad impact on video game was given by investigator, that post-test was done after one week with the help of self-structured questionnaire. The collected data were analysis base on the above-mentioned objectives**

Pre-experimental one group pre-test and post-test research design with the objective of assessing the effectiveness of health education on knowledge regarding bad impact of video game among teenager student. A pre-test was administered by means of structured questionnaire depicted as '01'and the structured teaching program depicted as 'x' post test was conducted using the same structured questionnaire and depicted as '02'. Sample consisted of 50 teenager students in selected school of the city who were available at the time of data collection

Present study was aimed assessment of the teenager student knowledge regarding bad impact of video game. So sample was selected from selected school of the city by non-probability convenient sampling technique. After selection consent was taken and self-structured questionnaire was given. The time allowed was 30 minutes for questionnaire. Then a health education was given on knowledge regarding bad impact of video game. Later after 7 days post-test was taken. According to age of the teenager students at selected schools, in the study 40% from the age group 13 and 14 years, 20% of teenager students from 15years of age. According to gender of the teenager students at selected schools, in the study 60% of students were male, 40% were female According to education of parents of the teenager students at selected schools, in the study parents of 46% in the primary education, 30% had graduate, 24% of the teenager students' parents were in secondary education. According to family income of the teenager students at selected schools, in the study teenager students are 40% of the teenager students were from 10000- 15000 income, 30% in the less tan 10000 and above 15000 incomes

According to types of electronics devices using of the teenager students at selected schools, in the study mobile were 48%, all of above were 22%, television were 16% and video game were 14%.

According to area of residency of the teenager students at selected schools, in the study 64% of them urban area and 36% of them rural area. According to do you have mobile of the teenager students at selected schools, in the study 70% of the teenager students were have yes and 30% were have no. According to awareness of bad impact of video game of the teenager students at selected schools, in the study 56% of the teenager students were from yes and 44% were from no.

The comparisons of the pre-test and post-test means of the knowledge were done by the paired t test. The pre-test average score was 12.22 with standard deviation of 1.89. The post-test average score was 21.61 with standard deviation of 2.32. The test statistics value of the paired t test was 30.06 with p value 0.00. The p value less than 0.05, hence accept the h1.

Shows that, health education on knowledge regarding bad impact of video game among teenager students at selected schools was effective. The chi-square test was conducted to see the association of knowledge regarding bad impact of video game with selected demographic characteristics of teenager students at selected schools. The chi-square test was conducted at 5% level of significance. For the demographic variable's type of electronic device using and monthly income, the p value of the association test with knowledge was less than 0.05, hence h2 is accepted.

Concludes that, there was significant association of theses demographic variables with knowledge regarding bad impact of video game among teenager students at selected schools of city.

Keywords: **Effectiveness, Health Education, Knowledge, Bad Impact, Video Game, Teenager Students**

INTRODUCTION

Video games are electronic games played on a video screen (normally a television, a built-in screen when played on a handheld machine, or a computer). People can also use computers to play games, which are sometimes called PC games. The older consoles do not have new games developed for them often, although console games are emulated for PCs. This means that new computers can play many old console games along with games made just for new computers. Older games are often more popular emulated than when they were first on sale, because of the ease of download. People can play portable video games anywhere. Mobile devices (running operating systems such as iOS or Android) also can download games, making them portable game machines. Mobile phones have many games, some of them using a mobile emulator for games from consoles. Not all PC or console Games are on mobile or iPad/ iPod/Tables. A condition that poses or constitutes an undue or unreasonable hazards or risk to life or health of any person on or about a property.[1]

Spending a lot of time playing video games instead of indulging in physical activities can be detrimental to a child's health in several ways. A child's cognitive development may get affected if he doesn't get out and socialise in the real world. Constantly sitting in one place and playing video games at length can increase the chances of obesity, weaken the muscles and joints, make hands and fingers numb due to over-exertion, and multiple studies suggest that it can even weaken the eyesight. One of the severe disadvantages of video games is related to the health of the child. An individual with continuous exposure to games may become obese and get affected with life threatening disease over a period of time. Obesity is a modern-day scourge for the people and causes in order to ward off the problem, plan a schedule to play the video game but do not extend the time. Make sure that it doesn't impact your daily life or else all the advantages can go down the drain resulting in tremendous problems[2].

BAGROUND OF THE STUDY

According to Holly B, Tired, Michigan State University Extension "The conducted research on how video games have a positive or a negative impact on the children. They had selected a bunch of teenagers between 13-19 years for their research. They found out that video games have a positive and a negative impact. On the positive side they found out that the child's hand eye coordination and computer skills had improved. On the downside they noted, that the more time teens spend playing violent video games, the more likely they are to display aggressive behavior"[6]

Children and teenager frequently use video game as form as an entertainment. Although the India has one of the fasted growing video game user populations, most study need more national data to demonstrate the prevalence of playing video game and its effect of aggressive and mental health behaviour. Therefore, this study aims to assess the prevalence of video game use and its association with aggression behaviours among teenager student in India[6]

World of the Video games have proved itself as an attractive entertaining industry in this modern world. Being a large industry, it has also brought some effects on our society especially on our teenager student and children. These effects can be described as of two kinds, Positive effects and Negative effects.[6]

OBJECTIVES OF THE STUDY

Primary objective:

- To assess the effectiveness of health education on knowledge regarding bad impact of video game among teenager student in selected school of city

Secondary objectives:

- To assess the pre-test knowledge regarding bad impact of video game among teenager student in selected school of city.
- To assess the post-test knowledge regarding bad impact of video game among teenager student in selected school of city.
- To evaluate the effectiveness of health education knowledge regarding bad impact of video game among teenager student in selected school of city.
- To associate the post-test knowledge score with selected demographic variables.

RESEARCH APPROACH

A quantitative approach was selected to assess the effect of VATM on child restraints among nursing students studying in selected nursing institutes of Vidarbha region, Maharashtra

RESEARCH DESIGN

A pre-experimental design with to assess the effectiveness of health education on knowledge regarding bad impact of video game among teenager student in selected school of city

RESULT

SECTION I

Deals with analysis of demographic data of teenager students at selected school of city in terms of frequency and percentage.

Table 1: Frequency & percentage distribution of teenager students at selected school of city in terms of frequency and percentage

Sr. No.	Variable	Groups	Frequency	Percentage
1	Age (in years)	1 3	20	40.00
		1 4	20	40.00
		15	10	20.00
2	Gender	Male	30	60.00
		Female	20	40.00
3	Education of Parents	Graduate	15	30.00
		Primary Education	23	46.00
		Secondary education	12	24.00
4	Monthly income	less than 1000	15	30.00
		10000-15000	20	40.00
		above 15000	15	30.00
5	types of electronics devices using	television	8	16.00
		mobile	24	48.00
		video game	7	14.00
		all of above	11	22.00
6	area of residency	Urban	32	64.00
		rural	18	36.00
7	Do you have mobile	yes	35	70.00
		no	15	30.00
8	awareness of bad impact of video game	yes	22	44.00
		No	28	56.00

According to age of the teenager students at selected schools, in the study 40% from the age group 13 and 14 years, 20% of teenager students from 15years of age.

According to gender of the teenager students at selected schools, in the study 60% of students were male, 40% were female.

According to education of parents of the teenager students at selected schools, in the study parents of 46% in the primary education, 30% had graduate, 24% of the teenager students' parents were in secondary education

According to family income of the teenager students at selected schools, in the study teenager students are 40% of the teenager students were from 10000-15000 income, 30% in the less tan 10000 and above 15000 incomes.

According to types of electronics devices using of the teenager students at selected schools, in the study mobile were 48%, all of above were 22%, television were 16% and video game were 14%.

According to area of residency of the teenager students at selected schools, in the study 64% of them urban area and 36% of them rural area.

According to do you have mobile of the teenager students at selected schools, in the study 70% of the teenager students were have yes and 30% were have no.

According to awareness of bad impact of video game of the teenager students at selected schools, in the study 56% of the teenager students were from yes and 44% were from no.

SECTION II

Deals with analysis of data related to assessment of the knowledge among teenager students at selected schools regarding the bad impact of video game of frequency and percentage.

Table 2: General assessments of Knowledge - Pre Vs Post Test

Groups		Pre-Test		Post-Test	
		Frequency	Percentage	Frequency	Percentage
Poor	0-6	20	20	0	0
Average	7--12	80	80	0	0
Good	13-18	0	0	20	20
Very good	19-24	0	0	35	35
Excellent	25-30	0	0	45	45
Minimum		10		12	
Maximum		30		30	
Average (SD)		12.20 (1.8)		21.61 (2.32)	

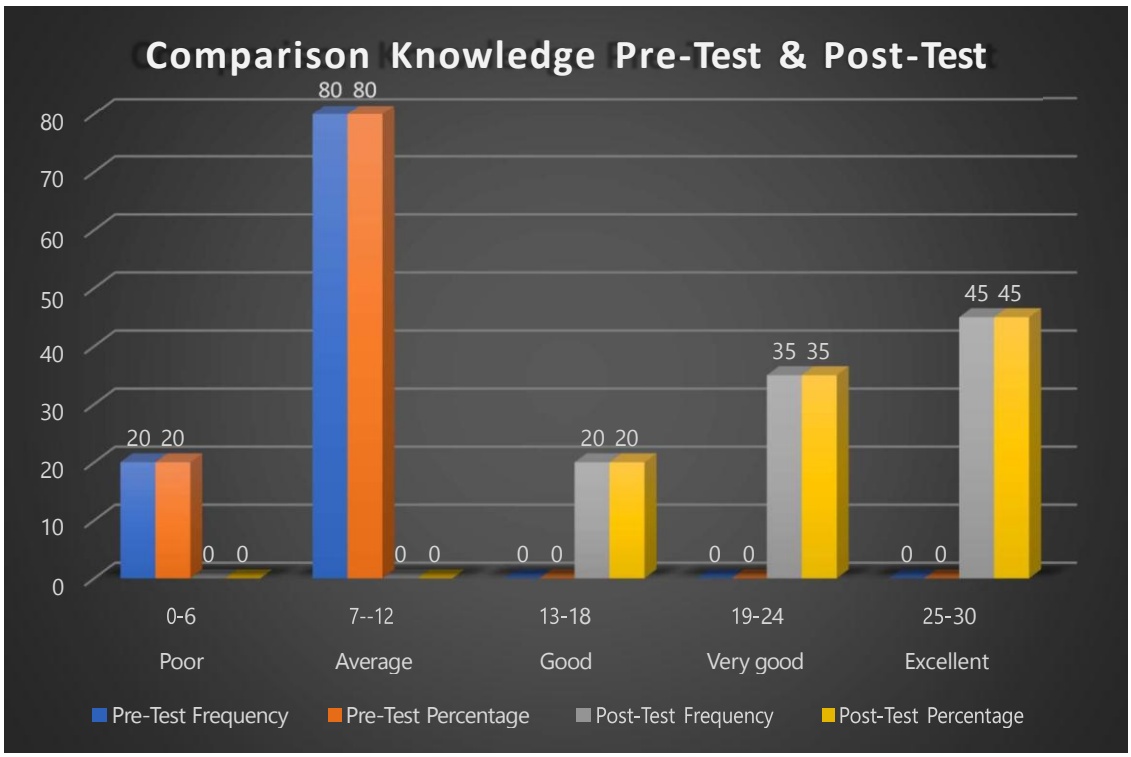

Figure No- 1: General assessments of pre and post-test knowledge

For the assessment purpose the total score of knowledge was divided in to three groups like poor (0-6score), average (7-12 score), good (13-18 score), very good (19-24) and excellent (25-30).

Pre-Test:

At the time of pre-test, 80% teenager students had average knowledge and 20% of teenager students had poor knowledge and no one had good very good and excellent knowledge, regarding bad impact of video game. Average knowledge score at the time of pre-test was 12.22 with standard deviation of 1.89.

post-Test:

At the time of post-test, 20% teenager students had good knowledge and 35% of teenager students had very good knowledge, 45% teenager students had excellent knowledge and no one had poor and average knowledge, regarding bad impact of video game. Average knowledge score at the time of pre-test was 21.61 with standard deviation of 2.32.

SECTION III

Deals with analysis of data related to the effectiveness of health education on knowledge regarding bad impact of video game among teenager students at selected schools in terms of average pre and post-test.

Table 3: Comparison of pre and post-test Knowledge regarding bad impact of video game among teenager students

Test	N	Mean	S.D.	t value	P value
Pre-Test	50	12.22	1.89	30.06	0.000
Post-Test	50	21.61	2.32		

The comparisons of the pre-test and post-test means of the knowledge were done by the paired t test. The pre-test average score was 12.22 with standard deviation of 1.89. The post-test average score was 21.61 with standard deviation of 2.32. The test statistics value of the paired t test was 30.06 with p value 0.00. The p value less than 0.05, hence accept the H1.

Shows that, health education on knowledge regarding bad impact of video game among teenager students at selected schools was effective.

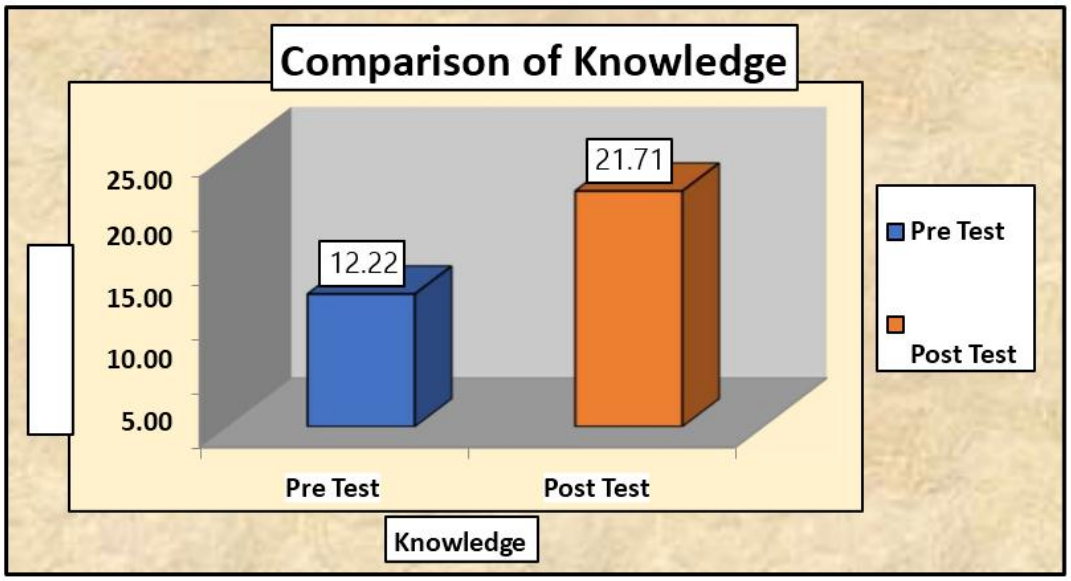

Figure 2: Comparison of the mean pre and post-test Knowledge

SECTION IV

Deals with analysis of data related to the association of knowledge regarding bad impact of video game with selected demographic characteristics of teenager students at selected schools.

The chi-square test was conducted to see the association of knowledge regarding bad impact of video game with selected demographic characteristics of teenager students at selected schools.

The chi-square test was conducted at 5% level of significance.

Significant Association:

For the demographic variable's type of electronic device using and monthly income, the p value of the association test with knowledge was less than 0.05, hence H2 is accepted.

Concludes that, there was significant association of theses demographic variables with knowledge regarding bad impact of video game among teenager students at selected schools of city.

CONCLUSION

Health education was effective on knowledge regarding bad impact of video game among teenager students at selected school of city. Knowledge regarding the bad impact of video game effects playing important role in life of teenager students. It encourages the teenager to know the effects of health education and to deal with that. Present study provides knowledge regarding effects of bad impact of video game about meaning and general information.

In this study, significant improvement in knowledge regarding bad impact of video game effects of junk food on mental health after providing health education.

NURSING IMPLICATIONS

Implication to nursing services

The findings of the study have implications for clinical nursing practice, nursing education, nursing administration and nursing research.

The nurse's role may be essentially unchanged or it may entail different duties by possessing and practicing competencies making nurses better prepared to handle all type of emergencies. The investigator has drawn the following implications from the study which is of vital concern to the field of Nursing practice, Nursing Education, Nursing Administration and Nursing Research.

RECOMMENDATIONS

- A similar study can be done on larger sample to validate and generalize the findings.
- A similar study can be conducted and evaluated using alternative informative teaching strategies like structured teaching program, planned teaching program and video assisted teaching etc.
- A comparative study can be done among rural and urban area knowledge regarding on bad impact of video game.
- A descriptive study can be done to assess the public perception about on bad impact of video game.

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