



E-ISSN: 2664-1356
P-ISSN: 2664-1348
www.psychiatricjournal.net
IJAPN 2022; 4(2): 77-85
Received: 06-04-2022
Accepted: 08-05-2022

S. Simon Samuvel
Assistant Professor,
Vivekananda College of
Nursing, Hydcolony, Nirala
Nagar, Lucknow, Uttar
Pradesh, India

Effects of planned teaching programme on prevention of suicidal behavior of school students among school teachers

S. Simon Samuvel

Abstract

Background: Today India has a population of adolescents that is among the largest in the world. This is the generation, which will shape India's future. Worldwide, suicide is among the top five causes of mortality in the 13 to 19 years of age group. According to world health organization, every year, suicide is committed by at least 8 million people in the world. The number of suicide attempts is probably ten times higher. India occupies the first highest rate of suicides in youth. When corrected for underreporting, these rates are likely to be much higher. While 8,068 students committed suicide in 2014, the number increased to 8,934 in 2015 and to 9,474 in 2016.

Materials and Method: A quantitative evaluative study was carry out on school teachers who are handling 6th to 12th in government higher secondary school at Karur Tamil Nadu. A total of 50 teachers were selected by convenient sampling techniques. Data was collected using self-administered questionnaire. Data were analyzed in term of descriptive and inferential statistics.

Results: The study revealed that the pre-test, before the administration of planned teaching programme, 5 (10%) school teachers had inadequate level knowledge, 42 (84%) school teachers had moderate level of knowledge and 3 (6%) school teachers had adequate level of knowledge. In the post-test, after the administration of planned teaching programme, no school teachers had inadequate level knowledge, 7 (14%) school teachers had moderate level of knowledge and 43 (86%) school teachers had adequate level of knowledge. The chi-square shows that there is significance association between residential area of teachers and Educational status of the teachers, However, remaining all are have no significance association with age, Gender, religion, total experience, history of suicide, marital status and previous knowledge about suicidal prevention.

Conclusion: The result of the study showed that there was a improvement in knowledge of school teachers after planned teaching programme and it suggest the need for education for prevention of suicidal behaviour of school students.

Keywords: Effects, planned teaching programme, school teachers, suicidal behavior

Introduction

“Suicide is not chosen; it happens when pain exceeds”

The word ‘suicide’ has its origin in Latin; ‘sui’, of one self and ‘caedere’, to kill: the act of intentionally destroying one’s life. The tragedy of self-inflicted death always attracted the attention of the medical as well as the legal fraternity. People who have committed suicide or have been thinking about committing suicide probably feel overwhelmed by their problem. They might not be able to handle that kind of pressure and feel that death would be the only way to escape it. Suicidal behavior represents a spectrum, ranging from suicidal ideation to suicidal plan to suicidal attempts to completed suicide.

According to world health organization, every year, suicide is committed by at least 8 million people in the world. In Europe, suicide is committed by about 43 thousand people a year, most frequently by middle-aged and elderly males, and attempted by 700 thousand people. In Sri Lanka, in 2018, 28.8% people committed suicide. The number of suicide attempts is probably ten times higher. Suicide is rare in childhood and early adolescence, and becomes more frequent with increasing age. Suicide in those ages 15-24 years once accounted for 5% of all suicides but it now accounts for 14%. Teen suicide statistics, according to the 2011 youth risk and behavior survey, indicate 15.8% seriously considered suicide, 12.8% made a plan for suicide, 7.8% attempted suicide one or more times, 2.4% made a suicide attempt that required medical intervention. In India, rate of 11 per 100000 suicides per year, India occupies the first highest rate of suicides in youth.

Corresponding Author:
S. Simon Samuvel
Assistant Professor,
Vivekananda College of
Nursing, Hydcolony, Nirala
Nagar, Lucknow, Uttar
Pradesh, India

When corrected for underreporting, these rates are likely to be much higher. While 8,068 students committed suicide in 2014, the number increased to 8,934 in 2015 and to 9,474 in 2016, the last year for which such data is available. In 2016, a total of 1,350 students ended their lives in Maharashtra. In the same year, West Bengal witnessed the second highest number of student suicides (1,147), followed by Tamil Nadu (981). Puducherry (43.2%), Sikkim (37.5%) and Tamilnadu (22.8%) had the highest rates of suicide. They were 19,120 suicides in India's 53 cities. Among the cities, Chennai (2,183), Bangalore (1,989), Chennai and Delhi (1,397) accounted for nearly 50% of the total suicides in the country. Suicide is now recognized as a public health and social problem in every country including India. In India still the causes of suicide are treated as more of a medico legal problem than a health or societal problem.

Suicide is one of the commonest causes of death among young people. Due to the growing risk for suicide with increasing age, adolescents are the main target of suicide prevention. Reportedly, less than half of young people who have committed suicide had received psychiatric care, and thus broad prevention strategies are needed in healthcare and social services. Teachers are key professionals in recognizing youth at risk for suicide school professional is in a unique position to play a strategic role in the early identification and prevention of adolescent suicidal behaviour. So the investigator feels it as a pressing need of the hour and is interested to provide planned teaching programme for the school teachers to increase or to promote their awareness about suicidal behaviour in school students and its preventive management.

Statement of the problem

A study to evaluate the effectiveness of planned teaching programme on knowledge regarding prevention of suicidal behavior of school students among school teachers in selected schools at Karur, Tamil Nadu.

Objectives of the study

- To assess the knowledge regarding prevention of suicidal behaviour of school students among school teachers in selected school at Karur.
- To evaluate the effectiveness of planned teaching programme on knowledge regarding prevention of suicidal behaviours of school students among school teachers at Karur.
- To associate the post-test level of knowledge score regarding prevention of suicidal behaviour of school students among school teachers with selected demographic variables.

II. Material And Method

This quantitative evaluative study was carry out on school teachers who are handling 6th to 12th in government higher secondary school at Karur Tamil Nadu from September 2018 to February 2019. A total of 50 teachers were selected by convenient sampling techniques. Data was collected using self-administered questionnaire.

Study design: Pre-experimental Research design- one group Pre-test and post-test

Study Location: Government higher secondary school at karur Tamil Nadu.

Study duration: September 2018 to February 2019

Sample Size: 50 School Teachers

Subjects & Selection Method: The study population drawn from who are handling 6th to 12th in government higher secondary school at Karur, Tamil Nadu by using Non Probability Convenient Sampling.

Inclusion criteria

- Teachers who are willing to participate in this study.
- Who are able to communicate in Tamil and English.

Exclusion criteria

- Teachers those who are on leave during the data collection.
- Who have attended any training programme about prevention of suicide

Tool for data collection

- The tools included were Self-Administionaire questionnaire for socio-demographic variables of the participants viz. age of the teachers, sex of the teachers, religion, educational status of the teachers, residential area of the teachers, total experience in teaching profession, any history of suicide, marital status and previous knowledge about prevention of suicide.
- Self-administered Questionnaire tool, each question consist of 4 alternatives with one correct answer and 3 distracters. Each question carries the score one. The maximum possible score is 30.the score are interpreted by inadequate knowledge 1 to 10 marks (<34%), Moderate knowledge 11 to 20 marks (35-67%), Adequate knowledge 21 to 30 (68-100%).

Ethical consideration

- The proposed study was conducted after the approval of the dissertation committee of Sri Aurobindo college of Nursing, Karur. Permission was obtained from the Headmaster of Government higher secondary school. Assurance was given to all the study subjects that anonymity of each individual will be maintained.

Procedure for data collection

The prior permission was obtained from the principal.Oral consent was obtained from the each samples before the data collection. The 50 samples was selected by using the convenient sampling technique. The pre-test was conducted by using self-administered questionnaire. The data was collected for the period 1hour. After the data collection the planned teaching programme was given with the help of PowerPoint presentation and flash card and it was in the same day. The post test was conducted with the same tool after 7 days at the same settings.

Statistical analysis

Descriptive statistics methods like Mean, standard deviation, percentage distribution and frequency was used to assess the pre-test and post-test knowledge score regarding prevention of suicidal behaviour of school students. Inferential statistics like Chi-square test was used to associate posttest knowledge with selected demographic variables. The level of significance was set at 0.05 to interpret the findings.

Result

Descriptive and inferential statistics were used for analysing data in the light of the objectives of the study. The findings of the study were discussed in the following sections.

- **Section I:** Frequency and percentage distribution of demographic variables of the school teachers.
- **Section II:** Frequency and percentage distribution of level of knowledge score regarding prevention of suicidal behaviour of school students among school teachers in pre-test and post-test.
- **Section III:** Comparison of pre-test and post-test scores

on knowledge regarding prevention of suicidal behaviour of school students among school teachers.

- **Section IV:** Association between post test score of school teachers with selected demographic variables of the school teachers.

Section I; Description of study variables in frequency and percentage.

This section deals with the distribution of sample characteristics in accordance with the socio demographic variables. This section is depicted from figure 1.1 to N=50

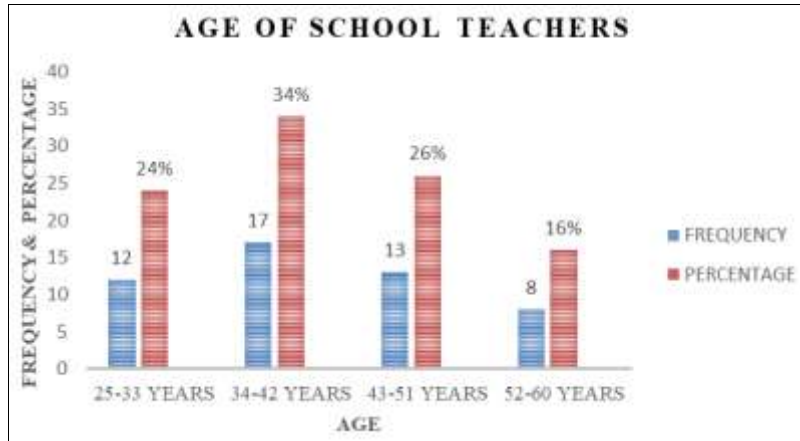


Fig 1: Frequency and Percentage distribution of age of school teachers. N=50

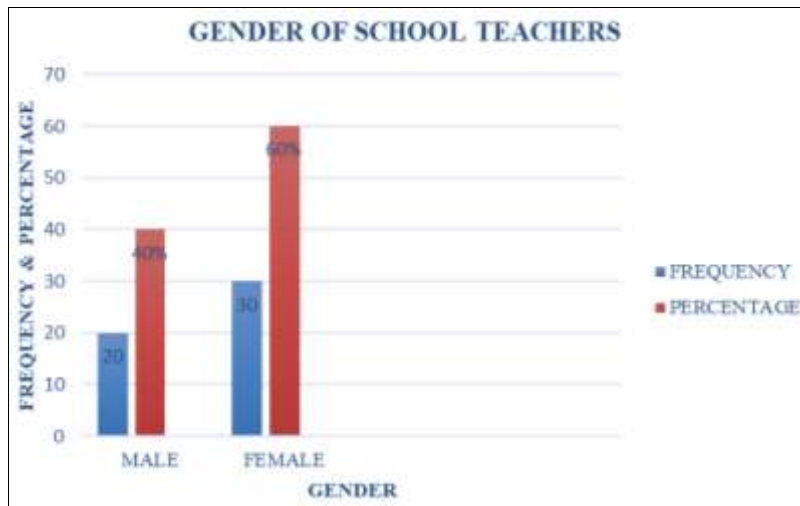


Fig 2: Frequency and Percentage distribution of gender of teachers. N=50

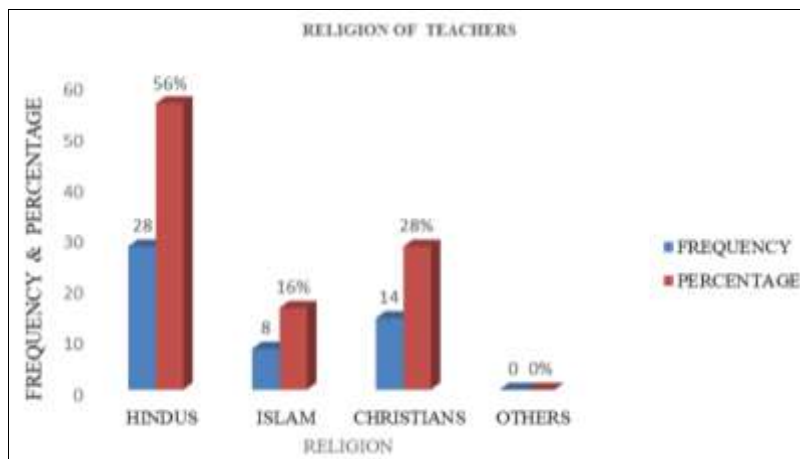


Fig 3: Frequency and Percentage distribution of religion of teachers. N=50

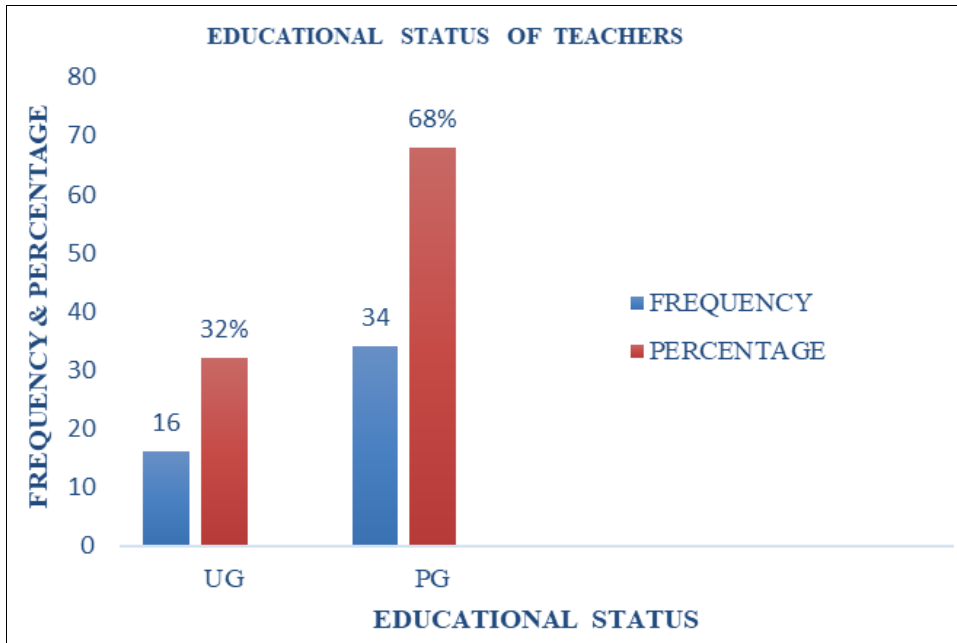


Fig 4: Frequency and Percentage distribution of educational status of teachers. N=50

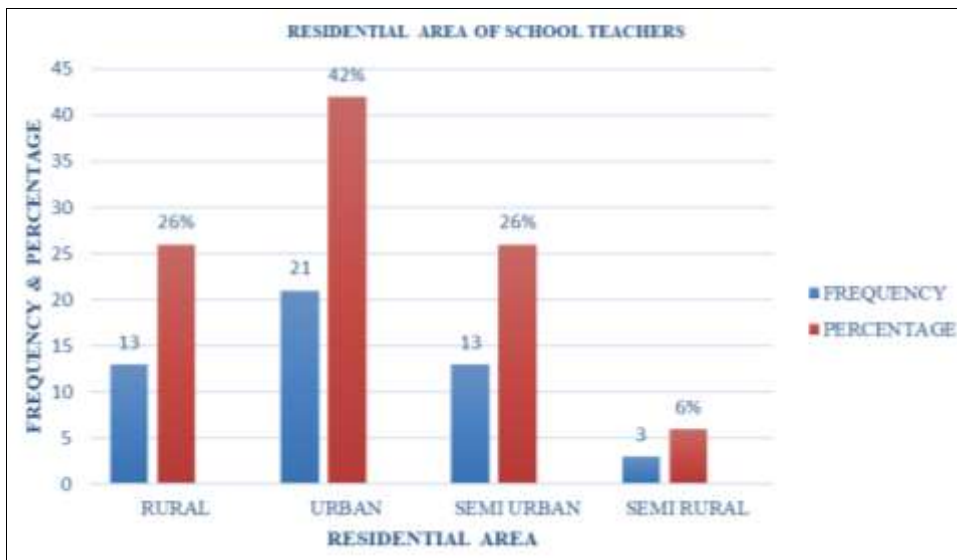


Fig 5: Frequency and Percentage distribution of Residential area of the teachers. N=50

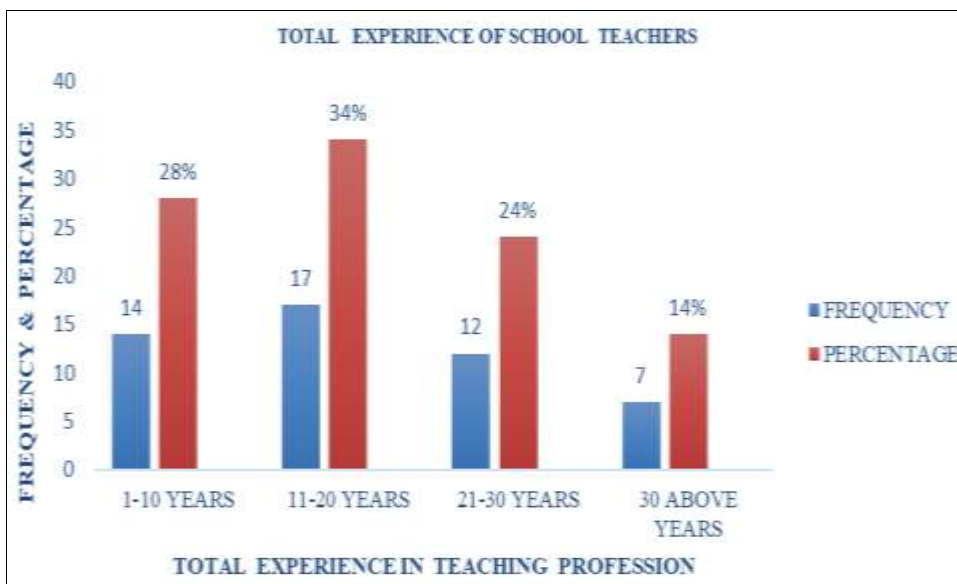


Fig 6: Frequency and Percentage distribution of Total experience in teaching profession. N=50

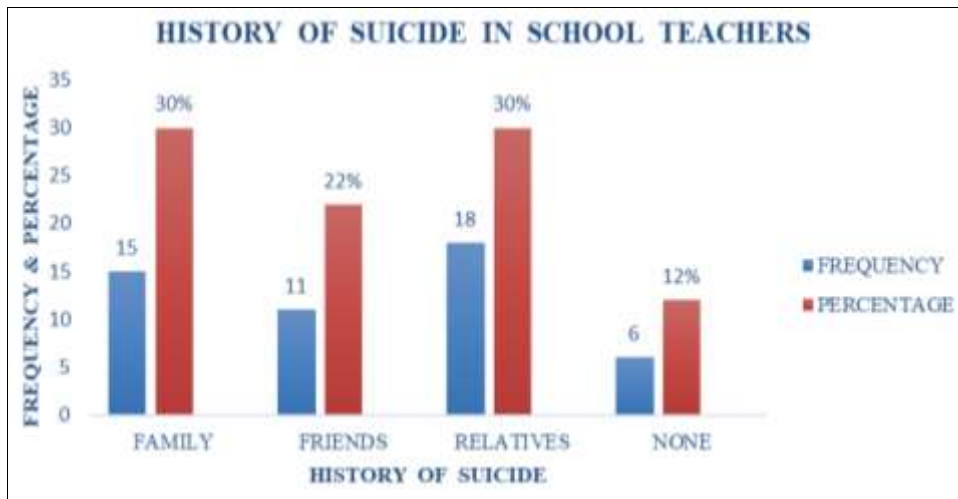


Fig 7: Frequency Percentage distribution of history of suicide in school teachers. N=50

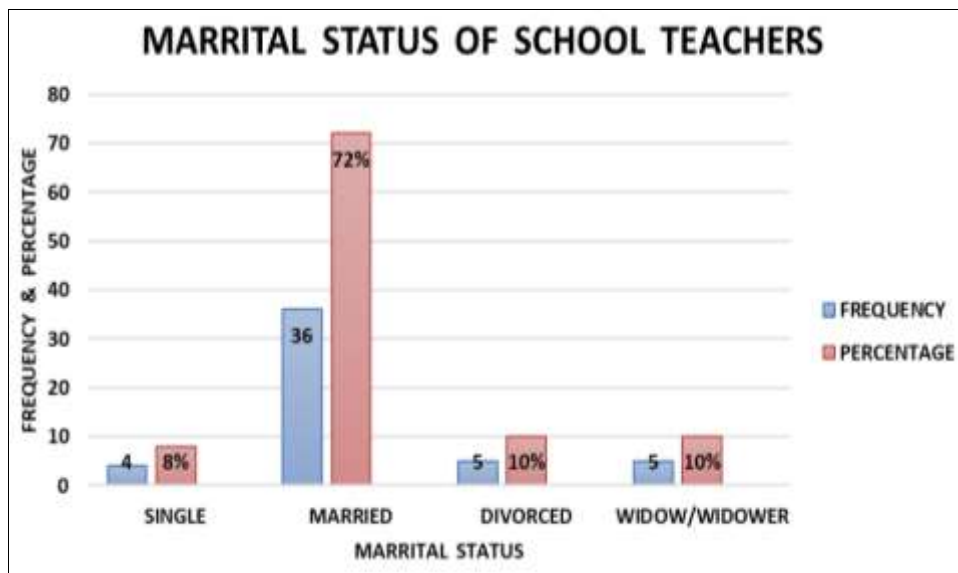


Fig 8: Frequency and Percentage distribution of marital status of school teachers. N=50



Fig 9: Frequency and Percentage distribution of previous knowledge about prevention of suicide of school teachers. N = 50

Table 1: Regards the frequency and percentage distribution of demographic variables of school teachers

S. No	Demographic variables	Number	Percentage%
1.	Age in year		
	25-33	12	24
	34-42	17	34
	43-51	13	26
	52-60	8	16
2.	Gender		
	Male	20	40
	Female	30	60
3.	Religion		
	Hindu	28	56
	Islam	8	16
	Christian	14	28
	Others	0	0
4.	Educational status		
	UG	16	32
	PG	34	68
5.	Residential area of the teachers		
	Rural	13	26
	Urban	21	42
	Semi Urban	13	26
	Semi-Rural	03	6
6.	Total experience in teaching profession in year		
	1-10	14	28
	11-20	17	34
	21-30	12	24
	30 Above	7	14
7.	History of suicide		
	Family	15	30
	Friends	11	22
	Relatives	18	36
	None	6	12
	Family	15	30
8.	Marital status		
	Single	4	8
	Married	36	72
	Divorced	5	10
	Widow/Widower	5	10
9.	Previous knowledge about prevention of suicide		
	Mass media	33	66
	Health professionals	5	10
	Friends	12	24
	None	0	0

- Regarding age out of 50 school teachers, 12 (24%) of them were 25-33 years, 17 (34%) of them were 34-42 years, 13 (26%) of them were 43-51 years and 8 (16%) of them were 52-60 years.
- Regarding sex out of 50 school teachers, 20 (40%) of them were male and 30 (60%) of them were female.
- Regarding religion out of 50 school teachers, 28 (56%) of them were hindus, 8(16%) of them were islam and 14 (28%) of them were Christians.
- Regarding educational status out of 50 school teachers, 16 (32%) of them had UG qualification and 34 (68%) of them had PG qualification.
- residential area out of 50 school teachers, 13 (26%) of them were from Rural, 21 (42%) of them were from Urban, 13 (26%) of them were from Semi Urban and 3 (6%) of them were from Semi Rural.
- Regarding experience in teaching profession out of 50 school teachers, 14 (28%) of them had 1-10 years of experience, 17 (34%) of them had 11-20 years of experience, 12 (24%) of them had 21-30 years of experience and 7 (14%) of them had 30 years above of experience.
- Regarding history of suicide out of 50 school teachers, 15 (30%) of them had Family history of suicide, 11 (22%) of them had history of suicide among their Friends, 18 (36%) of them had history of suicide among their Relatives and 6 (12%) of them had No history of suicide among their family, friends and relatives.
- Regarding marital status out of 50 school teachers, 4 (8%) of them were Single, 36 (72%) of them were Married, 5 (10%) of them were Divorced and 5 (10%) of them were Widow/widower.
- Regarding previous knowledge about prevention of suicide out of 50 school teachers, 33 (66%) of them gained knowledge from Mass Media, 5 (10%) of them from Health Professionals, 12 (24%) of them from Friends.

Section-II: Frequency and percentage distribution of level of knowledge score regarding prevention of suicidal behaviour of school students among school teachers in pre-test and post-test. N=50

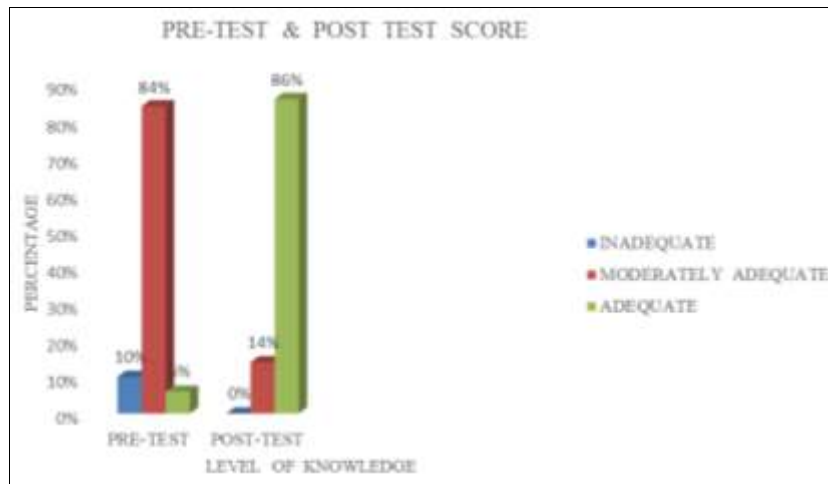


Fig 10: Percentage distribution of pre-test knowledge scores and post-test knowledge scores of teachers on knowledge regarding prevention of suicidal behaviour of school students among teachers

Table 2: Frequency and percentage distribution of pre-test knowledge scores and post-test knowledge scores on prevention of suicidal behaviour of school students among school teachers

S. No	Level of knowledge among school teachers	Pre-test		Post-test	
		Frequency	Percentage	Frequency	Percentage
1.	Inadequate	5	10	0	0
2.	Moderately adequate	42	84	7	14
3.	Adequate	3	6	43	86

The above table shows that in the pre-test, before the administration of planned teaching programme, 5 (10%) school teachers had inadequate level knowledge, 42 (84%) school teachers had moderate level of knowledge and 3 (6%) school teachers had adequate level of knowledge. In

the post-test, after the administration of planned teaching programme, no school teachers had inadequate level knowledge, 7 (14%) school teachers had moderate level of knowledge and 43 (86%) school teachers had adequate level of knowledge.

Section III

Table 3: Comparison of pre-test and post-test scores on knowledge regarding prevention of suicidal behaviour of school students among school teachers N=50

Teacher’s level of knowledge regarding prevention of suicidal behaviour of school students	Mean Score	Standard deviation	Calculated value of ‘t’	Tabulated value of ‘t’ @ 0.05 level of significance
Pre-test	14.8	3.67	15.97	2.00 (p < 0.05) Significant.
Post-test	25.14	3.18		

Table 3.1. From the above table, in the pre-test, before the administration of planned teaching programme the mean and standard deviation are 14.8 and 3.67. In the post-test after implementing planned teaching programme, the mean and standard deviation are 25.14 and 3.18 respectively. The calculated value of ‘t’ is greater than the tabulated value of ‘t’ at 0.05 level of significance. Hence the null hypothesis is

rejected. There is a significant difference between the pre-test and post-test scores on level of knowledge regarding prevention of suicidal behaviour of school students among school teachers. This implies that the planned teaching programme is statistically very high effective in improving the knowledge regarding prevention of suicidal behaviour of school students. Among school teachers.

Section IV: Association between post test score of school teachers with selected demographic variables of the school teachers.

Table 4: Presents the association between the post-test score of selected school teachers with selected demographic variables of the school teachers

S. No	Demographic Variables	Mild		Moderate		Severe		Calculated Value	Degree of Freedom
		F	%	F	%	F	%		
Age of school teachers									
1	a) 25-33 years	0	0	0	0	12	24	2.04# (p>0.05)	6
	b) 34-42 years	0	0	3	6	14	28		
	c) 43- 51 years	0	0	4	8	9	18		
	d) 52 -60 years	0	0	1	2	7	14		
Gender									
2	a) Male	0	0	2	4	18	36	0.88#	2

	b) Female	0	0	6	12	24	48	(<i>p</i> >0.05)	
3	Religion of the teacher								
	a) Hindus	0	0	4	8	24	48	4.10# (<i>p</i> >0.05)	
	b) Islam	0	0	3	6	5	10		
	c) Christians	0	0	1	2	13	26		
	d) others	0	0	0	0	0	0		
4	Educational status of the teacher								
	a) UG	0	0	1	2	15	30	11.20* (<i>p</i> <0.05)	2
	b) PG	0	0	7	14	27	54		
5	Residential area of the teacher								
	a) rural	0	0	1	2	12	24	15.90* <i>p</i> <0.05)	6
	b) urban	0	0	5	10	16	32		
	c) Semi urban	0	0	2	4	11	22		
	d) Semi-rural	0	0	0	0	3	6		
6	Total experience in teaching profession								
	a)1-10 years	0	0	0	0	14	28	5.01# (<i>p</i> >0.06)	6
	b) 11-20 years	0	0	4	8	13	26		
	c)21-30 years	0	0	4	8	8	16		
	d) 30 above	0	0	0	0	7	14		
7	History of suicide								
	A) Family	0	0	3	6	12	24	0.50# (<i>p</i> >0.05)	6
	B) Friends	0	0	2	4	9	18		
	C) Relatives	0	0	2	4	16	32		
	D) None	0	0	1	2	5	10		
8	Marital status								
	A) Single	0	0	0	0	4	8	1.13# (<i>p</i> >0.05)	6
	B) Married	0	0	6	12	30	60		
	C) Divorced	0	0	1	2	4	8		
	D) Widow/Widower	0	0	1	2	4	8		
9.	Previous knowledge about suicide prevention								
	A) Mass Media	0	0	3	6	30	60	7.98# (<i>p</i> >0.05)	6
	B) Health Professionals	0	0	0	0	5	10		
	C) Friends	0	0	5	10	7	14		
	D) None	0	0	0	0	0	0		

- Not Significant * - Significant

The Chi square value of demographic characteristics such as educational status of the teacher and residential area of the teacher with post test score of the selected school teachers were statistically significant (*p*<0.05). There is no significant statistical relationship between the post test score of the school teachers and selected demographic characteristics such as age, gender, religion, history of suicide, total experience in teaching profession, history of suicide and previous knowledge about prevention of suicidal prevention.

Discussion

The present study was to evaluate the effectiveness of planned teaching programme on knowledge regarding prevention of suicidal behavioural of school students among school teachers selected school at Karur. The results of the study were based on statistical analysis. The data was collected with the help of self-administered questionnaire to assess the level of knowledge regarding prevention of suicidal behaviour of school students among school teachers. The effectiveness of planned teaching programme was evaluated by using paired ‘t’ test. Chi-square was used to find out the association between the post-test score of school teachers with selected demographic variables. The results are provided according to the stated objectives.

Objectives of the study

1. To assess the knowledge regarding prevention of suicidal behaviour of school students among school teachers in selected school at Karur

The level of knowledge regarding prevention of suicidal behaviour of school students among school teachers was assessed by using self-administered questionnaire. The sample size was 50. Table 2 shows that description of pre-test scores on the level of knowledge regarding prevention of suicidal behavioural of school students among school teachers. It denotes that 5 (10%) school teachers had inadequate level of knowledge, 42 (84%) school teachers had moderate level of knowledge and 3 (6%) school teachers had adequate level of knowledge.

2. To evaluate the effectiveness of planned teaching programme on knowledge regarding prevention of suicidal behaviour of school students among school teachers at Karur

Table III shows that comparison of pre-test and post-test scores on level of knowledge regarding prevention of suicidal behaviour of school students among school teachers. Planned teaching programme was introduced and administered for 1 weeks. Post-test was conducted by using self-administered questionnaire at the end of 1 weeks. It denotes that the level of knowledge about prevention of suicidal behavioural of school students among school teachers was found to be improved.

It shows that the calculated value of ‘t’ is greater than the tabulated value of ‘t’ at 5% level of significance (i.e. 15.97 >). So we concluded that there is high significant difference between pre-test and post-test scores on the level of

knowledge regarding prevention of suicidal behavioural of school students among school teachers.

3. To associate the post-test level of knowledge score regarding prevention of suicidal behaviour of school students among school teachers with selected demographic variables.

Table IV represents the association between the pre-test score of selected school teachers with selected demographic variables. There is significant statistical relationship between the demographic characteristics such as age, Educational status, residential area and Post-test score of level of knowledge about prevention of suicidal behaviour of school students among school teachers ($p > 0.05$). There is no significant statically relationship between the post-test score of level of knowledge regarding prevention of the suicidal behaviour of school students among teachers and selected demographic characteristics such as gender, religion, total experience in teaching profession, history of suicide educational status, residential area of teacher, total experience in teaching profession, history of suicide, marital status and Previous knowledge about prevention of suicide.

Conclusion

This study was done to determine the effectiveness of planned teaching programme on knowledge regarding prevention of suicidal behaviour of school students among school teachers. The result of the study showed that there was a improvement in knowledge of school teachers after planned teaching programme and it suggest the need for education for prevention of suicidal behaviour of school students.

References

1. Ahuja. A short text book of psychiatry. (6th ed). New Delhi: Jaypee Brothers; c2006.
2. Anbu T. Textbook of Psychiatric nursing. Bangalore: EMMESS Medical publishers; c2010.
3. Basavanthappa BT. Nursing theories. (1sted). New Delhi: Jaypee Brothers; c2007.
4. Basavanthappa BT. Psychiatric Mental health nursing. New Delhi: Jaypee Brothers; c2007.
5. Basavanthappa BT. Nursing Research. New Delhi: Jaypee Brothers; c2006.
6. Bhaskara Raj D. Psychiatric Nursing. Bangalore: EMMESS Medical Publishers; c2012.
7. Bimla Kaor. Textbook of Psychiatric Nursing. New Delhi: Kumar Publishing house; c2013.
8. Arun NL, *et al.* I am not well-equipped-High School Teachers' Perceptions of Self-Injury, Canadian Journal of School Psychology; c2006.
9. Badr HE. Suicidal Behaviors among Adolescents, BMC public health; c2017.
10. Borowsky IW, *et al.* Adolescent suicide attempts: risks and, Journal of Pediatrics; c2001.
11. Vijaykumar L. Suicide and its prevention. The urgent need in India. Indian J Psychiatry; c2007.
12. Sidhartha T, Jena S. Suicidal behaviors in adolescents. Indian Journal of Paediatric; c2008.
13. List of countries by suicide rates. Data from Wikipedia, free encyclopedia. 2017 Aug. 17. available at: http://en.wikipedia.org/wiki/List_of_countries_by_suicide_rate.