A Study to Assess the Effectiveness of Structured Teaching Programme on Knowledge Regarding Impact of Outdoor Play on Child’s Growth And Development Among the Primary Care Giver of Under Five Children at Selected School of Lucknow

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Abstract

Title: Effectiveness of structured teaching programme on knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children.

Materials and Methods: The Pre-experimental with one group pre test post test design was used on 50 primary care giver of under five children, in the study, each care giver were given structured teaching program on impact of outdoor play on child’s growth and development. The socio demographic data was collected. The knowledge level of primary care giver of under five children, was assessed by structured questionnaire. Descriptive statics and inferential statistics were used to analyze the data.

Results: Findings related to structured teaching program by comparing pre test and post test knowledge level in primary care giver of under five children. There was significant association exist in primary care giver of under five children at p value <0.05. According to knowledge level of pre-test among 50 primary care giver of under five children, the 74% primary care giver were having inadequate knowledge 13% were having moderately adequate knowledge and 0% were having adequate knowledge regarding impact of outdoor play on child’s growth and development. According to post test level of knowledge, the 0 % were having inadequate knowledge. 44% were having moderately adequate knowledge and 56% were having adequate knowledge regarding impact of outdoor play on child’s growth and development. The data shows that there was significant difference between level of knowledge with gender (0.403), age of the child (4.919), education (4.692), occupation (2.797), monthly income (1.861), types of family (1.773), No. of children in family (0.674), Previous knowledge (1.878), Source of Previous Information (9.099) at p< level of significance.

Conclusion: The following conclusions were made on the basis of the finding of the study: there was significant difference in the pre-test and post-test knowledge level regarding impact of outdoor play on child’s growth and development. There was significant association existing in primary care giver of under five children at p value< 0.05. According to knowledge level of pre-test among 50 primary care giver of under five children, 74% were...
having inadequate knowledge, 26% were having moderately adequate knowledge and 0% were having adequate knowledge regarding impact of outdoor play on child’s growth and development. According to post test level of knowledge, the 0% students were having inadequate knowledge. 44% were having moderately adequate knowledge and 56% were having adequate knowledge regarding impact of outdoor play on child’s growth and development.

There was significant association existing in level of knowledge of primary care giver of under five children at p<0.05. There was no significant association of knowledge gender (0.403), age of the child (4.919), education (4.692), occupation (2.797), monthly income (1.861), types of family (1.773), No. of children in family (0.674), Previous knowledge (1.878), Source of Previous Information (9.099). at p< level of significance.

INTRODUCTION

Outdoor physical is a work of children. It consists of those activities performed for self-amusement that have behavioural, social, psychomotor rewards. Outdoor physical activity is a child directed, and the rewards come from within the individual child: it is enjoyable and spontaneous. Outdoor physical activity is so important to optimal child development that it has been recognized by the United Nations High Commission for human rights as a right of every child. It can also explore risk-tasking, fine and gross motor development and the absorption of vast amounts of basic knowledge.

The physical activity is the bodily movement produced by skeletal muscle that requires energy expenditure and is a fundamental means of improving people’s physical and mental health. The physical activity reduces the risks of many non-communicable diseases and benefit society by increasing social interaction and community engagement. It is not just a public health issues, it also promotes the well-being of communities and the protection of the environment and comprises an investment in future generations. It includes exercise as well as other activities which involve bodily movement and are done as part of playing, working, active transportation, house chores and recreational activities.

Children are the future hope of mankind. Today’s children will be the masters of future world. As the saying goes, “health is wealth”. Hence, if children are healthy, the future generation will be healthy, resulting in a healthy nation.

Today many health care settings providing care for children. They have play rooms with age appropriate toys. Play helps in development of children in various aspects such as physical, mental and social. Toys are selected for their recreational and educational value. Children should be allowed to play without much interference, so that they become more independent. Play helps children comprehend the world in which live and distinguish between reality and fantasy.

Research shows that play has many benefits for children, families and the wider community, as well as improving health and quality of life. Recent research suggests that children's access to good play provision can:

- increases their self-awareness, self-esteem, and self-respect
- improves and maintain their physical and mental health
- gives them the opportunity to mix with other children
- allows them to increase their confidence through developing new skills
- promotes their imagination, independence and creativity
- offers opportunities for children of all abilities and backgrounds to play together
- provides opportunities for developing social skills and learning
• builds resilience through risk taking and challenge, problem solving, and dealing with new and novel situations
• provides opportunities to learn about their environment and the wider community.

NEED OF THE STUDY
“The Nation walks on the feet of little children.”

(Jawaharlal Nehru)

There are two fundamental reasons why outdoor play is critical for children in our early childhood programs and schools. First many of the development tasks that children must achieve-exploring, risk-taking, fine and gross motor development and the absorption of vast amounts of basic knowledge can be most effectively learned through outdoor play. Second, our culture is taking outdoor play away from young children through excessive Television, using mobile phone and computer, busy and tired parents, educational accountability, elimination of school recess and academic standards that push more and more developmentally inappropriate academic into our early childhood program, thus taking time away from play. The main reasons why outdoor play is critical for the healthy development of young children.

Children are growing up in a rapidly changing world characterized by dramatic shifts in what all children are expected to know and be able to do. Higher and tougher standards of learning for all populations of students are focusing on a narrow view of learning. Consequently, students have less time and opportunity to play than children of previous generations. Few would disagree that the primary goal of education is student learning and that all educators, families, and policymakers bear the responsibility of making learning accessible to all children. Decades of research has documented that play has a crucial role in the optimal growth, learning and development of children from infancy through adolescence. Yet, this need is being challenged, and so children's right to play must be defended by all adults, especially educators and parents.

OPERATIONAL DEFINITION
ASSESS: - In this study it refers to the level of knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children.
EFFECTIVENESS: - In this study it refers to significant gain in knowledge as determined by significant difference between pre-test and post-test knowledge score.
GROWTH AND DEVELOPMENT: - In this study growth is refers to the increase in mass and size of the body. Development is the process where a particular organism, not only grow physically but acquires mental and physiological growth as well.
PRIMARY CARE GIVER: - In this study primary care giver refers to mother, father, uncle, grandfather, grandmother.
UNDER FIVE CHILDREN: - In this study it refers to the child with an age group of under five years which includes infant, toddler and pre-schoolers.
OUTDOOR PLAY: - Outdoor play is a natural way for children of all ages to do physical activity. Its good for children’s health and well-being to be physically active through play. That helps the child to develop creativity, intellectual activities and more helps in their physical and psychological development for example: - Swing, see-saw, slide, tunnel, spring horse, running cat and mouse, hide and seek, jumping, catching, cycling and cricket etc.
STRUCTURED TEACHING PROGRAMME: - It this study it refers to the systematically arranged information regarding the introduction of play, definition of play, characteristic of play, importance of play, introduction of outdoor play, definition of outdoor play, teaching kids about playground safety, impact of outdoor play & parent’s supervision.

KNOWLEDGE: - It refers to the information acquired through the education regarding impact of outdoor play on child’s growth and development.

HYPOTHESIS
H₁:- There is significant difference between pre and post-test knowledge scores on impact of outdoor play on child’s growth and development among the primary care giver of under five years age children.
H₂:- There is significant association between the post-test knowledge score with demographic variables.

SAMPLING CRITERIA
Inclusion Criteria: The present study includes:
• primary care giver of under five children.
• Those who are available at the time of data collection
• Those, who are willing to participate
Exclusion Criteria:
• Primary care giver who are not available at the time of data collection.
• Those who have more than 5 years children.

STATEMENT OF THE PROBLEM
A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING IMPACT OF OUTDOOR PLAY ON CHILD’S GROWTH AND DEVELOPMENT AMONG THE PRIMARY CARE GIVER OF UNDER FIVE CHILDREN AT SELECTED SCHOOL OF LUCKNOW

OBJECTIVES OF THE STUDY
A study to assess the effectiveness of structured teaching programme on knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children.
• Assess the knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children.
• Evaluate the effectiveness of structured teaching program on knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children.
• Associate the level of knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children with selected demographic variables.

METHODOLOGY
Source of date:-
Data was collected from primary care giver having children of under five years of age in selected school

METHOD OF DATA
Research approach :- Quantitative evaluative research approach
Research Design :- Pre experimental (one group pre-test post-test) research design
Setting :- Prince Public School (private), Nakhas, Lucknow.
Reference pullulation :- all the primary care giver of under five children in selected school
Study population :- all the primary care giver of under five children in selected school
Study sample :- primary care giver of under five children fulfilling the inclusion and
Sample size :- 50
Sampling technique :- non-probability convenient sampling technique.

PROCEDURE OF DATA COLLECTION
Data for final study was collected from 05/03/2022 to 12/03/2022. The data was collected from 50 Primary care giver of under-five children whose children study in Prince Public School, Nakhas, Lucknow by using non-probability convenient sampling technique. Prior to the data collection procedure, Formal permission was obtained from the official authorities of the school. The investigator introduced himself to the primary care giver and developed a good rapport and made them to cooperate and accept for the study. After getting demographic data from the primary care giver pre-test was done with the help of the prepared tool. After the pre-test, structured teaching programme related to Impact of outdoor play were conducted with the help of Power Point Presentation and Pamphlets. After seven days, post-test was done to evaluate the effectiveness of structured teaching programme by using same evaluation tools. Based on the collected data effectiveness was found by comparing the pre-test and post test score.

METHOD OF DATA ANALYSIS
Descriptive and inferential statistics was used for data analysis. The collected data will be presented in forms of tables, diagrams and graphs. Mean, mean%, percentage, standard deviation and chi-square was used for descriptive statistics. Paired t-test was used for inferential statistics.

VARIABLES
Independent variable
Independent variables is a stimulus or activity that is manipulated or varied by the researcher to create the effect on the dependent variable.
In present study independent variable is structured teaching program for primary care giver of under five children regarding impact of outdoor play on child’s growth and development.

Dependent variable
Dependent variable is the outcome or response due to the effect of the independent variable, which researcher wants to predict or explain.
In the present study dependent variable is knowledge among primary care giver of under five children.

Demographic Variable: gender, age of child, education of primary care giver, occupation of primary care giver, monthly income of primary care giver, types of family, number of children, previous knowledge regarding outdoor play

DATA ANALYSIS AND INTERPRETATION
Data analysis is a method for rendering quantitative information on meaningful and intangible. It is a process of summarization, organization, evaluation, interpretation and communication of numeric
information in such a way that they provide answer to the research problem. This chapter deals with the analysis and interpretation of data collected from 50 samples on knowledge regarding Impact of outdoor play on child’s growth and development among primary care giver of under five children to assess the effect of structured teaching program. The data obtained were computed and analysed by both descriptive and inferential statistics. The level of significance is set at.....

OBJECTIVES OF THE STUDY:
1. Assess the knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children.
2. Evaluate the effectiveness of structured teaching program on knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children.
3. Associate the level of knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children with selected demographic variables.

The collected information was organized and presented in 2 parts:
- **Section I**: Sample characteristics of Primary care giver of under five children
- **Section II**: Objectives wise analysis

SECTION-I
DISTRIBUTION OF SAMPLES ACCORDING TO THE SOCIO-DEMOGRAPHIC VARIABLES.

Table 4.1 Frequency and Percentage Distribution of samples according to their selected socio demographic variables.

<table>
<thead>
<tr>
<th>VARIABLES</th>
<th>CATEGORY</th>
<th>PERCENTAGE</th>
<th>FREQUENCY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>Male</td>
<td>32.0%</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>68.0%</td>
<td>34</td>
</tr>
<tr>
<td>Age of Child</td>
<td>Below one year</td>
<td>20.0%</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>1-2 years</td>
<td>18.0%</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>2-3 years</td>
<td>20.0%</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>3-5 years</td>
<td>42.0%</td>
<td>21</td>
</tr>
<tr>
<td>Education</td>
<td>Primary school education</td>
<td>14.0%</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Secondary school education</td>
<td>16.0%</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>Higher secondary education</td>
<td>34.0%</td>
<td>17</td>
</tr>
<tr>
<td></td>
<td>Graduate</td>
<td>36.0%</td>
<td>18</td>
</tr>
<tr>
<td>Occupation</td>
<td>Home maker</td>
<td>26.0%</td>
<td>13</td>
</tr>
<tr>
<td></td>
<td>Government employee</td>
<td>12.0%</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Business</td>
<td>20.0%</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>Self- employee</td>
<td>42.0%</td>
<td>21</td>
</tr>
<tr>
<td>Monthly Income</td>
<td>Below 15000</td>
<td>46.0%</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>15001-20000</td>
<td>18.0%</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>20001-25000</td>
<td>20.0%</td>
<td>10</td>
</tr>
</tbody>
</table>
Table 4.1 Reveals:

- According to Gender among 50 samples of group, 16(32%) were male, 34(68%) were female group.
- According to Age of child among 50 samples of group, 10(20%) below one year, 9(18%) 1-2 years, 10(20%) 2-3 years, 21(42%) 3-5 years.
- According to Education of primary care giver, 7(14%) were primary school education, 8(16%) were secondary school education, 17(34%) were Higher secondary education, 18(36%) were graduate.
- According to Occupation of primary care giver, 13(26%) were home maker, 6(12%) were government employee, 10(20%) were Businessman, 21(42%) were self-employee.
- According to Monthly income, 23(46%) were below 15000, 9(18%) were 15001-20000, 10(20%) were 20001-25000, 8(16%) were above 25000.
- According to types of family, 22(44%) were nuclear family, 28(56%) were joint family.
- According to Number of children in family, 26(52%) were only one, 24(48%) were more than one.
- According to previous knowledge, 36(72%) were having previous knowledge, 14(28%) were having no knowledge.
- According to Source of Previous Information among 50 samples of group, 7(14%) were mass media, 11(22%) were family, 11(22%) were social media, 7(14%) were neighbours, 14(28%) no knowledge.
Fig. 4.1 (a): Bar & Pie graph showing percentage Distribution of Gender distribution of primary care giver
Fig. 4.1 (b): Bar & Pie graph showing percentage Distribution of Age of child of primary care giver.
Fig. 4.1 (c): Bar graph showing percentage Distribution of Education of primary care giver.
Fig. 4.1 (d): Bar graph showing percentage Distribution of occupation of primary care giver.

Fig. 4.1 (e): Bar graph showing percentage Distribution of Monthly income of primary care giver.
Fig.4.1 (f): Bar graph showing percentage Distribution of Types of family of primary care giver

Fig.4.1 (g): Bar graph showing percentage Distribution of number of children in family,
Fig. 4.1 (h): Bar graph showing percentage Distribution of Previous knowledge of primary care giver.

Fig. 4.1 (i): Bar graph showing percentage Distribution of source of previous knowledge among primary care giver.
SECTION-2

OBJECTIVE-1
Assess the knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children.

Table 4.2 (a) Assessment of pre-test level of knowledge regarding Impact of outdoor play on child’s growth and development among the primary care giver of under five children.
n = 50

<table>
<thead>
<tr>
<th>CRITERIA MEASURE OF PRETEST KNOWLEDGE SCORE</th>
<th>PRE TEST f(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>INADEQUATE KNOWLEDGE. (0-15)</td>
<td>37(74%)</td>
</tr>
<tr>
<td>MODERATE KNOWLEDGE. (16-24)</td>
<td>13(26%)</td>
</tr>
<tr>
<td>ADEQUATE KNOWLEDGE. (25-30)</td>
<td>0(0%)</td>
</tr>
</tbody>
</table>

Table 4.2 (a) Depicts the pre-test frequency, percentage and mean distribution of knowledge regarding Impact of outdoor play on child’s growth and development. The 37(74%) primary care giver of under-five children were having inadequate knowledge, 13(16.7%) were moderately adequate knowledge, 0 (0%) were having adequate knowledge.

Hence, it was concluded that primary care giver of under-five children, were having inadequate knowledge regarding Impact of outdoor play on child’s growth and development.

Fig. 4.2: Bar diagram depicts percentage distribution of knowledge regarding Impact of outdoor play on child’s growth and development among the primary care giver of under five children.
### Descriptive Statistics table:

<table>
<thead>
<tr>
<th>Descriptive Statistics</th>
<th>Mean</th>
<th>S.D.</th>
<th>Median Score</th>
<th>Maximum</th>
<th>Minimum</th>
<th>Range</th>
<th>Mean%</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRETEST KNOWLEDGE</td>
<td>13.78</td>
<td>3.483</td>
<td>13</td>
<td>23</td>
<td>8</td>
<td>15</td>
<td>45.90</td>
</tr>
</tbody>
</table>

Minimum score = 00

Maximum score = 30

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**Fig. 4.3:** Bar diagram depicts Mean(13.78), S.D(3.483), Median Score(13), Maximum Score(23), Minimum Score(8), Range(15) and Mean% of knowledge regarding Impact of outdoor play on child’s growth and development.
Table 4.2 (b) Assessment of post-test level of knowledge regarding Impact of outdoor play on child’s growth and development among the primary care giver of under five children.

<table>
<thead>
<tr>
<th>CRITERIA MEASURE OF POSTTEST KNOWLEDGE SCORE</th>
<th>POST TEST f(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>INADEQUATE KNOWLEDGE.(0-15)</td>
<td>0(0%)</td>
</tr>
<tr>
<td>MODERATE KNOWLEDGE.(16-24)</td>
<td>22(44%)</td>
</tr>
<tr>
<td>ADEQUATE KNOWLEDGE.(25-30)</td>
<td>28(56%)</td>
</tr>
</tbody>
</table>

Minimum score=0  Maximum score=30

Table4.2 (b) depicts the post-test frequency, percentage and mean distribution of knowledge regarding Impact of outdoor play on child’s growth and development. The 0(0%) primary care giver of under five children were having inadequate knowledge, 22(44%) were moderately adequate knowledge, 28 (56%) were having adequate knowledge.

Hence, it was concluded that Primary care giver of under five children were having adequate knowledge regarding Impact of outdoor play on child’s growth and development.

Fig. 4.4: Bar diagram depicts percentage distribution of knowledge regarding Impact of outdoor play on child’s growth and development among the primary care giver of under five children.
Descriptive Statistics table:

<table>
<thead>
<tr>
<th>Descriptive Statistics</th>
<th>Mean</th>
<th>S.D.</th>
<th>Median Score</th>
<th>Maximum</th>
<th>Minimum</th>
<th>Range</th>
<th>Mean%</th>
</tr>
</thead>
<tbody>
<tr>
<td>POSTTEST KNOWLEDGE</td>
<td>24.54</td>
<td>2.501</td>
<td>25</td>
<td>29</td>
<td>19</td>
<td>10</td>
<td>81.80</td>
</tr>
</tbody>
</table>

n=50

Minimum=00                                      Maximum=30

Fig. 4.5: Bar diagram depicts Mean(24.54), S.D(2.501), Median Score (25), Maximum Score(29), Minimum Score(19), Range(10) and Mean% of knowledge regarding Impact of outdoor play on child’s growth and development among the primary care giver of under five children.
OBJECTIVE -2
Evaluate the effectiveness of structured teaching program on knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children.

Table 4.3: Determine the effect of pre-test and post-test knowledge scores among primary care giver of under five children regarding impact of outdoor play on child’s growth and development.

<table>
<thead>
<tr>
<th>CRITERIA MEASURE OF KNOWLEDGE SCORE</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>SCORE LEVEL (N=50)</td>
<td>PRE TEST f(%)</td>
</tr>
<tr>
<td>INADEQUATE KNOWLEDGE. (0-15)</td>
<td>37 (74%)</td>
</tr>
<tr>
<td>MODERATE KNOWLEDGE. (16-24)</td>
<td>13 (26%)</td>
</tr>
<tr>
<td>ADEQUATE KNOWLEDGE. (25-30)</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

Maximum Score=30 Minimum Score=0

Mean & mean percentage % distribution comparison of Pre-test and Post-test knowledge scores.

<table>
<thead>
<tr>
<th>Paired T Test</th>
<th>Mean±S.D.</th>
<th>Mean%</th>
<th>Range</th>
<th>Mean Diff.</th>
<th>Paired Test</th>
<th>T</th>
<th>P value</th>
<th>Table Value at 0.05</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRETEST KNOWLEDGE</td>
<td>13.78±3.483</td>
<td>45.90</td>
<td>8-23</td>
<td>10.760</td>
<td>19.944</td>
<td>*Sig</td>
<td>&lt;0.001</td>
<td>2.01</td>
</tr>
<tr>
<td>POSTTEST KNOWLEDGE</td>
<td>24.54±2.501</td>
<td>81.80</td>
<td>19-29</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Table 4.3: The mean 24.54 of post-test score was more than the mean 13.78 of primary care giver of under five children. There is a total enhancement occur 10.760. The comparison of Pre-test and Post-test knowledge on Impact of outdoor play on child’s growth and development significant difference with t value (19.944) at $p = 0.05$ Significance Level.

Hence, it was concluded that there was significant difference between the Pre-test and Post-test knowledge on impact of outdoor play on child’s growth and development.

Fig. 4.6: Depicts comparison between pre-test and post test knowledge scores.

Fig. 4.7: Depicts Mean and SD Score
OBJECTIVES 3
Associate the level of knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children with selected demographic variables.

Table 4.4: This section deals with the findings related to the association between score and selected demographic variables. The chi-square test was used to determine the association between the score levels and selected demographic variables.
## ASSOCIATION OF PRETEST KNOWLEDGE SCORES WITH SELECTED SOCIO-DEMOGRAPHIC VARIABLES.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Category</th>
<th>Adequate</th>
<th>Moderate</th>
<th>Inadequate</th>
<th>Chi Test</th>
<th>P Value</th>
<th>df</th>
<th>Table Value</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>Male</td>
<td>0</td>
<td>3</td>
<td>13</td>
<td>0.643</td>
<td>0.423</td>
<td>1</td>
<td>3.841</td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>0</td>
<td>10</td>
<td>24</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age of Child</td>
<td>Below one year</td>
<td>0</td>
<td>0</td>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td>1- 2 years</td>
<td>0</td>
<td>2</td>
<td>7</td>
<td>5.186</td>
<td>0.159</td>
<td>3</td>
<td>7.815</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2-3 years</td>
<td>0</td>
<td>4</td>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3- 5 years</td>
<td>0</td>
<td>7</td>
<td>14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td>Primary school education</td>
<td>0</td>
<td>0</td>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td>Secondary school education</td>
<td>0</td>
<td>1</td>
<td>7</td>
<td>6.454</td>
<td>0.091</td>
<td>3</td>
<td>7.815</td>
<td></td>
</tr>
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Table 4.4: Shows that the association between the level of score and socio demographic variable. Based on the objectives used to Chi-square test used to associate the level of knowledge and selected demographic variables. There is no significance association between the level of scores and other demographic variables (gender, age of child education of primary care giver, occupation of primary care giver, monthly income of primary care giver, types of family, number of children, previous knowledge regarding outdoor play). The calculated chi-square values were less than the table value at the 0.05 level of significance.

<table>
<thead>
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<th>15001-20000</th>
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<th>Above 25000</th>
<th>Chi-square</th>
<th>df</th>
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ASSOCIATION OF POSTTEST KNOWLEDGE SCORES WITH SELECTED SOCIO-DEMOGRAPHIC VARIABLES.

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<th>Variables</th>
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</tbody>
</table>
Table 4.5: Shows that the association between the level of score and socio demographic variable. Based on the objectives used to Chi-square test used to associate the level of knowledge and selected demographic variables. There is no significance association between the level of scores and other demographic variables (gender, age of child education of primary care giver, occupation of primary care giver, monthly income of primary care giver, types of family, number of children, previous knowledge regarding outdoor play). The calculated chi-square values were less than the table value at the 0.05 level of significance.

**DISCUSSION**

This chapter dealt with findings of the present study, “A study to assess the effectiveness of structured teaching programme on knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children. “In this chapter, an attempt has been made to discuss the findings of other studies. The present study was conducted in Prince Public School, Nakhas, Lucknow. The aim of the study was to assess the effectiveness of Structured teaching programme on knowledge regarding impact of outdoor play on child’s growth and development. A total number of 50 primary care giver of under five children had been selected for the study. The pre-test was conducted by using questionnaire. The duration of the pre-test ranged from 20-30 minutes for each student. After the pre-test structured teaching programme was conducted about the Impact of outdoor play using Power Point Presentation and Pamphlet. After seven days, post test was conducted by using same questionnaire. The study was proved that planned teaching programme has brought about excellent changes in the level of knowledge regarding Impact of outdoor play on child’s growth and development.

**OBJECTIVES**

- Assess the knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children.
- Evaluate the effectiveness of structured teaching program on knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children.
- Associate the level of knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children with selected demographic variables.

**Objective 1**-

The first objective was to Assess the knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children.

In pre test, among 50 primary care giver of under five children 74% inadequate knowledge, 26% had moderately adequate knowledge, 0% had adequate knowledge. The overall mean for pre test was 13.78 and the standard deviation was 3.483. It reveals that, primary care giver need educational programme to improve their knowledge about Impact of outdoor play. In post test, among 50 primary care giver of under-
five children 0% inadequate knowledge, 44% had moderately adequate knowledge, 56% had adequate knowledge. The overall mean for post test was 24.54 and the standard deviation was 2.501.

Objective 2-
Evaluate the effectiveness of structured teaching program on knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children.

It reveals that the comparison between mean and standard deviation of pre and post test level of knowledge and effectiveness of structured teaching program on Impact of outdoor play.
The overall mean for pre test was 13.78 and the standard deviation was 3.483 and in post test, the overall mean for post test was 24.54 and the standard deviation was 2.501. The mean difference is 10.76 and the t-test value is 19.944. There is a total enhancement occur 10.760. This shows that the Structured teaching program was effective and showed improvement in the knowledge level of Primary care giver of under five children.

Objective 3-
Associate between knowledge score regarding health hazards of junk food with selected socio demographic variables.
The association between selected demographic variables and knowledge on Impact of outdoor play on child’s growth and development showed statistically there was no significant association between the demographic variables of (gender, age of child education of primary care giver, occupation of primary care giver, monthly income of primary care giver, types of family, number of children, previous knowledge regarding outdoor play), level of knowledge at p<0.05.

6.1 SUMMARY
The present study was conducted to assess the effectiveness of structured teaching programme on knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children. Pre-experimental one group pre-test post-test design was used for this study. 50 primary care giver, who met the inclusion criteria were selected from Prince Public School, Nakhas at Lucknow. The investigator introduced himself to the primary care giver and developed a good rapport and made them to cooperate and accept for the study. After getting demographic data from the school children pre test was done with the help of the prepared tool. After the pre test, structured teaching programme related to Impact of outdoor play had been conducted with the help of Power Point Presentation and pamphlets. After seven days, post test was done to evaluate the effectiveness of structured teaching programme by using same evaluation tools. Based on the collected data effectiveness was found by comparing the pre test and post test score. The data collected was grouped and analyzed by using descriptive statistics and inferential statistics.

6.2 CONCLUSION
In pre-test out of 50 primary care giver of under five children, 74% had inadequate knowledge, 26% had moderately adequate knowledge and 0% had adequate knowledge. In post-test 0% had inadequate knowledge, 44% had moderately adequate knowledge and 56% had adequate knowledge. The ‘t’ value 19.944 was compared with tabulated table value at the level of P < 0.05 was significant .So it has been
concluded that the structured teaching programme on knowledge regarding impact of outdoor play on child’s growth and development among the primary care giver of under five children.

6.3 NURSING IMPLICATIONS
The findings of the study have implications in different branches of nursing that is nursing practice, nursing education, nursing administration and nursing research, by assessing a level of primary care giver knowledge towards the impact of outdoor play. The investigator received a clear picture regarding the different steps to be taken in different field to improve the same.

Nursing Practice:
- Paediatrician, paediatric health nurse and other health professionals should be aware about the impact of outdoor play to under five children. The school health programme is an important part of national health programme. The purpose is to maintain, improve and promote the health of every school child. The school health programme also includes planning the course content regarding healthy physical habits of school children specially under five children.
- The teaching given and it showed that there was an increase in the knowledge and attitude of the primary care giver of under five children regarding impact of outdoor play on child’s growth and development.

Nursing Education:
- The study outlines, the significance of short term courses and in-service education to equip nurses with the current knowledge on Impact of outdoor play on child’s growth and development.
- Nurse educators when planning and instructing nursing students, should provide opportunities for students to gain the knowledge regarding Impact of outdoor play on child’s growth and development.
- Nursing personnel should be given in-service education to update their knowledge.
- Nurse educators when instructing the students, should provide adequate opportunity for each student.

Nursing Administration:
- Nursing administrator should implement teaching programmes to make the public aware about influence of mass media on eating pattern of school children and can assign nurses to conduct school health programmes.
- In-service education can be conducted for nurses regarding importance of Impact of outdoor play.
- The study finding will help the administrator to arrange continuing education programme for nurses regarding Impact of outdoor play. It helps to prepare adequate learning material for giving health education.
- The nurse administrator should take active part in the policy making, developing protocol, standing orders related health education.™

Nursing Research:
- In nursing there is scarce literature and research done on knowledge of primary care giver of impact of outdoor play. Research should be conducted to assess the needs of under five children through outdoor play.
Nurses should take initiative to conduct research on opinion of teachers regarding impact outdoor play on child’s growth and development.

There is a need for intensive and extensive research in this area. It opens a big avenue for research on innovative methods of creating awareness, development of teaching material and setting up multimedia centers for teaching and for creating awareness among the public regarding Impact of outdoor play.

These study findings will identify the present knowledge about outdoor play of primary care giver to know extent of necessary information to be given.

This study will motivate other investigator to conduct future studies regarding this topic.

This study will help the nurse researchers to develop insight into the developing module and set information towards awareness about impact of outdoor play.

6.4 LIMITATIONS:
The study is restricted to the,
- Primary care giver of under five children  in Prince Public School, Nakhas, Lucknow.
- Sample size of 50 primary care giver.
- The study was limited to the selected school at Lucknow.
- Duration of the study is 4 weeks.

6.5 RECOMMENDATIONS:-
Based on the research findings the following recommendations can be made:
- The same study can be replicated on a larger sample and also at different settings.
- A comparative study can be done between rural and urban area.
- A descriptive study on assessing the knowledge and attitude of primary care giver on impact of outdoor play.
- A structured teaching programme on impact of outdoor play can be prepared and given to the teachers and the parent’s so that they can impact knowledge to all primary care giver of under five children.
- The effectiveness of various methods of teaching like interactive video and audio programmed instructions, self-instructional module about impact of outdoor play, in implementing the knowledge and attitude of primary care giver, evaluated through the research.
- A study can be conducted to find out the knowledge of parents and teachers toward impact of outdoor play.

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JOURNALS
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