



## “A Study To Assess The Effectiveness Of Snake Ladder Game Assisted Teaching On Knowledge And Practice Regarding Health Habits Among School Children In Selected School Mehsana.”

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Date of Submission: 24-04-2024

Date of Acceptance: 02-05-2024

### ACKNOWLEDGEMENT

“Failure Is the Opportunity to Begin Again More Intelligently”

Henry ford I wish to acknowledge my heartfelt gratitude to the Lord Almighty for all the wisdom, knowledge, guidance, strength, protection, shield, and support. He has offered me throughout this endeavor and given me courage to overcome the difficulties and thus complete this study successfully. I honestly express my sincere gratitude to all the study participants who extended their co-operation throughout my study period. I sincere and whole hearted thanks to Trustee, Director, & all management of RatnaPrabha Nursing College for extending their support to conduct the study. I extend our gratitude to Mr. Rajesh Joshi, Principal, Ratna Prabha Nursing College, Hemchandracharya North Gujarat University, for their valuable suggestions& timely support from the inception till completion & submission of the study. I express our profound gratitude to our Guide Mr. Suresha.D, H.O.D. of Child Health Nursing, Ratna Prabha Nursing College, Hemchandracharya North Gujarat University, who through his constant encouragement Valuable guidance and sustained patience made our accomplish this study. I express my profound gratitude to Co-guide Ms. Puja solanki, lecturer Department of Child Health Nursing,

Ratna Prabha Nursing College who through his constant, valuable guidance and sustained patience made our accomplish this study. I would like to extend my deepest gratitude to our Class coordinator Mr. Surendar Kumar J, H.O.D. of Child Health Nursing, Ratna Prabha Nursing College for their helpful support during the entire course of the study.

### ABSTRACT

❖ Statement of the Problem : A Study To Assess The Effectiveness Of Snake Ladder Game Assisted Teaching On Knowledge And Practice Regarding Health Habits Among School Children In Selected School Mehsana Objective: (a) To assess the knowledge and practice regarding healthy habits among schoolchildren.(b) To assess the effectiveness of snake and ladder game on knowledge and practiceregarding healthy habits among school children. (c) To find out the association between the knowledge and practice regarding healthy habits with selected demographic variables. Methodology : Research design selected for this study was pre experimental one group pretest post test design with a sample size of 60. The data was collected by questionnaire method which includes demographic data. Close ended questionnaire to assess the knowledge and for practice regarding healthy habits. Results :



Descriptive and inferential statistics were used to analyze the data. The obtained 't' value for comparison of knowledge score was 21.24 and the 't' value for comparison of practice score was 18.40. Both were greater than table value. Conclusion : The pretest score was less in knowledge and practice regarding healthy habits among school children after administration of snake and ladder game regarding healthy habits. The findings of the study revealed that there is an improvement in the post test knowledge and practice scores.

#### OBJECTIVES OF THE STUDY

- ❖ To assess the knowledge and practice regarding healthy habits among school children.
- ❖ To assess the effectiveness of snake and ladder game on knowledge and practice regarding healthy habits among school children.
- ❖ To find out the association between the knowledge and practice regarding healthy habits with selected demographic variables.

### I. INTRODUCTION





HealthyChild;HealthyNation; HealthyWorld

A child is precious not only to the parents, to the family, community and nation but also to the world and thus it becomes the responsibility of the wide population of the whole universe to look after the interest of the children all over. Children are the asset of our country.

Hygiene is the science of health and its maintenance. It is highly personal determined by individual values and practices. Hygiene status of children is an index of national investment in the development of its man power. It is influenced by social, familial and individual factors as well as the children's knowledge of health on personal hygiene, comfort and basic needs, characteristics associated with child such as their natural and lack of knowledge are aggregating factors (UNICEF, 2009).

India is the second most populous country in the world, with over 1.21 billion people. The children age 0-15 yrs constitute about 31.1% (Male 190,075,426 and Female 172, 799,553) about 15% consist of school going children (Government of India Census, 2011).

WHO (2009) stated that the prevalence of personal hygiene and healthy habits has increased in rural schools of India in relation to the urban areas, due to the worse situation of the health status there. The complex relation between poverty and social exclusion in other hand, Disease are leading by unhygienic and the families are almost unbearable, especially in the rural areas. It has been estimated that 0.02% of children has proper hygienic practices among 180 children.

Vankoppen (2010) explained that the children are eager to learn and schools are important places of learning for children. Promotion of personal hygiene and sanitation in schools therefore help the students to adopt good hygiene and habits during their childhood. Children learn in school they can and often do pass on in their families and communities.

### 1.1 BACKGROUND OF STUDY-

Life is a bit like the game of snakes and ladders, you would agree. Self-defeating habits or beliefs are snakes those take you down, whereas the self-empowering ones are ladders those take you up. But in life, it's not the throw of the dice that determines your

movement and it's your conscious choices (Compwel, 2011).

School health programs based on hygiene and sanitation education in schools next to traditional education has many advantages over teaching according to daily activities with traditional methods. It also gives an opportunity to the children to clarify uncertainties to try out new knowledge and skill to be creative and to learn from each other regarding daily life activities which are oriented hygiene practices (WHO, 2010).

The personal hygiene habits developed by child can be taught in a fun way. Makeup games to see if the child can remember what steps are needed to accomplish a specific hygiene goal. Use creativity and imagination to help the child maintain an interest in personal hygiene. Charts, graphs, humor, stickers, puppets, games or songs are some ideas are used to motivate child. Be careful not to make personal hygiene too much work for child. Keep it light and fun as the child transitions into owning these habits for lifetime (Renate and Van Wijk, 2010).

The utility of games is a safe teaching strategy of health professional. There is a need of additional high quality research to explore the impact of educational games on patients and performance outcome (Sacket, Kand Fiander, M, 2013).

Abdul Halim (2012) conducted a cross-sectional study in rural Peshawar to determine the frequency of intestinal infestation of enterobius vermicularis, less than 3% (7 cases) of whip worm, and less than 7% (3 cases) prevalence of tape worm. The researcher concluded that there was a high percent of primary school children in need of health education on promotion of personal hygiene and possibly mass treatment. Integrated Research Care (2009) had cooperated with schools sanitation and hygiene, through life skills based education, to help the children to acquire and practice good health behavior along with knowledge and attitudes.

### 1.2 Need for the Study

The health of children is a vital importance of all societies because children are basic sources of the future of mankind. Today the trend has changed and the nature of care of children is based on their developmental needs. Now children's



care is more children centered (UNICEF, 2011). WHO (2009) declared that every nation should achieve the goal as health for all. Method for achieving health is with proper health care of the school children who form 15% of the total population. Ensuring access to the primary hygienic practices are the major effort undertaken by governments, national organizations and international organizations such as UNICEF. Through his effort make the development of knowledge, attitudes, values and the life skills need to make appropriate decisions and act upon them. Arno Halberger (2010) stated that school going period is a relatively safe period from health point of view. However supervision of health of school children is important. Sound health and its care picked up during these years have a great bearing in the individuals, his family and community for years to come. National Wide Survey (2011) on health status of school children in India by WHO, revealed that the evidence of morbidity was found 52.85% in boys and 67.4% in girls. "Cleanliness is next to godliness" keeping one's body clean is an important part of keeping oneself healthy and helping one feel good. Caring about the way one looks is important to one's self esteem. Motivation for personal hygiene practices among children can cause reduction in personal illness. This can be done mainly through schools by educating and reinforcing students. Sharman Esary (2007) had initiated steps to create awareness on personal hygiene among school children and motivating the children to get 100%

of good practices and habits. He has appealed to the head masters and teachers to take Henderson (2010) defined that part of the nurses role is to improve the patient level of understanding and there by promote health. The nurse as teacher should identify the needs by asking questions and determining the variables, affecting the hygienic needs of the children. Andrew Watkins (2013) stated that personal hygiene is a very important factor for healthy life. Young children need to bath regularly. Frequency of bath depends upon the each child individual needs. Tooth brushing should be integrated into the morning and bed time routine to avoid periodontal diseases and dental caries. If they don't wash their hands, skin, mouth, hair, nails and foot frequently there is a strong chance of getting infection to themselves and to others. Some infectious diseases which spread through poor hygiene are common cold, flu, and gastrointestinal dis

eases. However good hygiene teaches them to understand the importance of personal hygiene and to take care of their body from health hazards such as diarrhea, dysentery, intestinal worm infestation of lice and skin disease.

UNESCO (2011) conducted a pilot study project in "games and other experimental activities for the teaching of science of children". Toys and games are synonymous with play. Almost every one like to play and such a desire continues throughout an individual's life. Psychologist says that play is not just a filling in of an empty period or just a relaxation of leisure activity, but it is an important learning experience.

**1.3 STATEMENT OF THE PROBLEM**  
A STUDY TO ASSESS THE EFFECTIVENESS OF SNAKE LADDER GAME ASSISTED TEACHING ON KNOWLEDGE AND PRACTICE REGARDING HEALTH HABITS AMONG SCHOOL CHILDREN IN SELECTED SCHOOL MEHSANA.

**1.4 OBJECTIVES OF THE STUDY**

- ❖ To assess the knowledge and practice regarding healthy habits among school children.
- ❖ To assess the effectiveness of snake and ladder game on knowledge and practice regarding healthy habits among school children. personal health and hygienic practices
- ❖ To find out the association between the knowledge and practice regarding healthy habits with selected demographic variables.

part in the campaign aimed at improving the quality of education and personal health.

**1.5 HYPOTHESIS**

- ❖ **H1:** There will be significant difference between pretest and posttest knowledge and practice score regarding healthy habits among school children.
- ❖ **H2:** There will be significant association between pretest and posttest knowledge and practice score regarding

**1.6 OPERATIONAL DEFINITION**

- **Assess**  
The act of estimation of knowledge regarding healthy habits by structured pretest questionnaire.
- **Effectiveness**  
It refers to producing the intended result. In this study, it refers to the extent to which the snake and ladder game has achieved the desired effect in improving knowledge on healthy habits



among school children.

- **Snake And Ladder Game**

Snake and ladder game is a board game where up to six players compete to reach the square first. In this study it refers to a game used for educating the school children about healthy habits.

- **Healthy Habits**

A behavior that is beneficial to one's physical or mental health, including personal hygiene, nutrition, sleep and rest, often linked to a high level of discipline and self control.

- **Knowledge**

It refers to the correct response of school children in the age group of 7-12 years to the self administered questionnaire on personal hygiene and is expressed in terms of knowledge score.

- **Practice**

It refers to the activities which execute in daily living.

- **School Children** The children of 7-12 years old, who are studying in 2<sup>nd</sup> to 4<sup>th</sup> standard of

### 1.7 ASSUMPTIONS

- School children have inadequate knowledge about healthy habits.
- Snake and ladder game on healthy habits enhances the knowledge and practice of children regarding healthy habits.

### 1.8 SAMPLING CRITERIA

#### Inclusion criteria-

- In this study inclusion criteria is children who can speak, write and read in Gujarati
- who are willing to participate in the study
- who are available at the time of study

#### Exclusion criteria-

- who are not willing to participate
- who are below the age of seven year children

### 1.9 CONCEPTUAL FRAMEWORK

The conceptual model provides a certain frame of reference for clinical practice

, research and education. The quality of the conceptual model comes from the organization. They provide for thinking for observations and for interpreting what is seen. They also give direction for relevant questions on phenomena, and point out solutions to practical problems (Fawcett, 1984).

Conceptual framework used for this study is based on General System Theory. The basic concepts of

A system is a set of interacting identifiable parts or components and it depends on the quality and quantity of its input, through put, output and feedback. The system has a specific purpose or goal and uses a process to achieve the goal.

#### Input

The first component of the system is input consists of information, material, or energy that enters the system.

Input includes the demographic variables such as age in years, sex, education, religion, education of father, education of mother, occupation of father, family income, number of children, birth order, area of residence, type of family, water supply, sanitation and also the pretest assessment of knowledge and

practice regarding healthy habits using prepared questionnaire for children.

#### Throughput

Throughput is the activity phase. After the input is absorbed by the system, it is processed in a way useful to the system.

At Nav primary school, Vadnagar. Administration of snake and ladder game regarding healthy habits for duration of 1 hour for 15 days acts as throughput in this present study.

#### Output

The information are continually processed through the system and released as output in an altered state.

The improvement in the level of knowledge and practice regarding healthy habits after snake and ladder game, acts as the output in this present study.

#### Feed Back

Feed back is the mechanism by which some of the output of a system regulates itself by redirecting the output of the system back in to the system as input, thus forming a feedback loop. This is a continuous process that takes place in the system.

The reassessment of knowledge and practice regarding healthy habits acts as the feedback. This is not included in the present study.